LIFE AND ACCIDENT AND HEALTH COMPANIES - ASSOCIATION EDITION

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ANNUAL STATEMENT

For the Year Ended December 31, 2011

of the Condition and Affairs of the

OHIO NATIONAL LIFE ASSURANCE CORPORATION

NAIC Group Code.....0704, 0704 (Current Period) (Prior Period) NAIC Company Code..... 89206 Employer's ID Number..... 31-0962495

Organized under the Laws of Ohio State of Domicile or Port of Entry Ohio Country of Domicile US

Incorporated/Organized..... June 26, 1979 Commenced Business..... August 22, 1979

Statutory Home Office	One Financial Way….. Cincinnati ..... OH ..... 45242 *(Street and Number) (City or Town, State and Zip Code)*	
Main Administrative Office	One Financial Way….. Cincinnati ..... OH ..... 45242 *(Street and Number) (City or Town, State and Zip Code)*	513-794-6100 *(Area Code) (Telephone Number)*
Mail Address	Post Office Box 237….. Cincinnati ..... OH ..... 45201 *(Street and Number or P. O. Box) (City or Town, State and Zip Code)*	
Primary Location of Books and Records	One Financial Way….. Cincinnati ..... OH ..... 45242 *(Street and Number) (City or Town, State and Zip Code)*	513-794-6100-6015 *(Area Code) (Telephone Number)*
Internet Web Site Address	N/A	
Statutory Statement Contact	Amber Dawn Morris *(Name)*	513-794-6100-6015 *(Area Code) (Telephone Number) (Extension)*
	amber_morris@ohionational.com *(E-Mail Address)*	513-794-4516 *(Fax Number)*

OFFICERS

Name	Title	Name	Title
Gary Thomas Huffman	President	Therese Susan McDonough	Secretary
Joseph Richard Sander	Treasurer	Ronald John Dolan	Actuary

OTHER

Larry Joel Adams	Senior Vice President & Chief Agency Officer	Thomas Abdo Barefield	Executive Vice President & Chief Marketing Officer
Lee Edward Bartels	Senior Vice President	Howard Charles Becker	Senior Vice President
Christopher Allen Carlson #	Executive Vice President & Chief Investment Officer	Anthony Gerard Esposito	Senior Vice President
Diane Sue Hagenbuch	Senior Vice President	Kristal Elaine Hambrick	Senior Vice President
Michael Francis Haverkamp	Senior Vice President	Ronald Gene Heibert	Senior Vice President & Chief Corporate Actuary
David Dale Herr, Jr. #	Senior Vice President	Stephen Ray Murphy	Senior Vice President
George Barclay Pearson, Jr.	Senior Vice President	Arthur James Roberts	Senior Vice President & CFO
James Clive Smith	Senior Vice President	Barbara Ann Turner	Senior Vice President
Paul Joseph Twilling #	Senior Vice President		

DIRECTORS OR TRUSTEES

Larry Joel Adams #	Ronald John Dolan	Michael Francis Haverkamp	Gary Thomas Huffman

State of..... Ohio
County of..... Hamilton

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions* and *Accounting Practices and Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

(Signature)	(Signature)	(Signature)
Gary Thomas Huffman	Therese Susan McDonough	Joseph Richard Sander
(Printed Name)	(Printed Name)	(Printed Name)
President	Secretary	Treasurer
(Title)	(Title)	(Title)

Subscribed and sworn to before me
This _____ day of February, 2012

Roxanna S Henry, Notary Public
May 11, 2014

a. Is this an original filing? Yes [X] No [ ]

b. If no
1. State the amendment number
2. Date filed
3. Number of pages attached

DIRECT BUSINESS IN Other Alien #1 DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	0	0	0	0	0
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	0	0	0	0	0
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	0	0	0	0	0
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

NONE

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	0	0	0	(a) 0	0	0	0	0	0	0
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year	0	0	0	(a) 0	0	0	0	0	0	0

NONE

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0	0	0	0
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	0	0	0	0	0

NONE

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF ALASKA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	47,852	0	0	0	47,852
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	47,852	0	0	0	47,852
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	0	0	0	0	0
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	11,478	0	0	0	11,478
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	11,478	0	0	0	11,478
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	41	18,797,500	0	(a) 0	0	0	0	0	41	18,797,500
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	4	2,090,000	0	0	0	0	0	0	4	2,090,000
23. In force December 31 of current year	45	20,887,500	0	(a) 0	0	0	0	0	45	20,887,500

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	5,669	5,688	0	0	0
25.2	Guaranteed renewable (b)	0	0	0	0	0
25.3	Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	5,669	5,688	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	5,669	5,688	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF ALABAMA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	6,220,017	0	0	0	6,220,017
2.	Annuity considerations	240	0	0	0	240
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	6,220,257	0	0	0	6,220,257
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,684,997	0	0	0	2,684,997
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	119,040	0	0	0	119,040
12.	Surrender values and withdrawals for life contracts	1,012,543	0	0	0	1,012,543
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	3,816,580	0	0	0	3,816,580
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	4	1,250,993	0	0	0	0	0	0	4	1,250,993
17.	Incurred during current year	11	2,615,536	0	0	0	0	0	0	11	2,615,536
	Settled during current year:										
18.1	By payment in full	8	2,395,156	0	0	0	0	0	0	8	2,395,156
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	8	2,395,156	0	0	0	0	0	0	8	2,395,156
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	8	2,395,156	0	0	0	0	0	0	8	2,395,156
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	7	1,471,373	0	0	0	0	0	0	7	1,471,373
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	3,054	1,610,862,424	0	(a) 0	0	0	0	0	3,054	1,610,862,424
21.	Issued during year	316	203,086,334	0	0	0	0	0	0	316	203,086,334
22.	Other changes to in force (Net)	(168)	(94,187,734)	0	0	0	0	0	0	(168)	(94,187,734)
23.	In force December 31 of current year	3,202	1,719,761,024	0	(a) 0	0	0	0	0	3,202	1,719,761,024

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	420,991	422,431	0	696,980	687,000
25.2	Guaranteed renewable (b)	0	0	0	12,000	11,720
25.3	Non-renewable for stated reasons only (b)	8,754	8,784	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	429,745	431,215	0	708,980	698,720
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	429,745	431,215	0	708,980	698,720

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

DIRECT BUSINESS IN THE STATE OF ARKANSAS DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	3,127,929	0	0	0	3,127,929
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	3,127,929	0	0	0	3,127,929
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	1,412,494	0	0	0	1,412,494
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	15,895	0	0	0	15,895
12. Surrender values and withdrawals for life contracts	580,414	0	0	0	580,414
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	2,008,803	0	0	0	2,008,803
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	7	1,409,932	0	0	0	0	0	0	7	1,409,932
Settled during current year:										
18.1 By payment in full	6	1,309,932	0	0	0	0	0	0	6	1,309,932
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	6	1,309,932	0	0	0	0	0	0	6	1,309,932
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	6	1,309,932	0	0	0	0	0	0	6	1,309,932
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	100,000	0	0	0	0	0	0	1	100,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	1,963	933,452,510	0	(a) 0	0	0	0	0	1,963	933,452,510
21. Issued during year	252	132,748,136	0	0	0	0	0	0	252	132,748,136
22. Other changes to in force (Net)	(135)	(25,425,005)	0	0	0	0	0	0	(135)	(25,425,005)
23. In force December 31 of current year	2,080	1,040,775,641	0	(a) 0	0	0	0	0	2,080	1,040,775,641

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	57,815	58,013	0	16,500	15,667
25.2 Guaranteed renewable (b)	3,755	3,768	0	0	0
25.3 Non-renewable for stated reasons only (b)	1,160	1,164	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	62,730	62,945	0	16,500	15,667
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	62,730	62,945	0	16,500	15,667

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN AMERICAN SAMOA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	0	0	0	0	0
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	0	0	0	0	0
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	0	0	0	0	0
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

NONE

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	0	0	0	(a) 0	0	0	0	0	0	0
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year	0	0	0	(a) 0	0	0	0	0	0	0

NONE

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0	0	0	0
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	0	0	0	0	0

NONE

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF ARIZONA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	4,589,531	0	0	0	4,589,531
2.	Annuity considerations	360	0	0	0	360
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	4,589,891	0	0	0	4,589,891
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,827,365	0	0	0	2,827,365
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	13,826	0	0	0	13,826
12.	Surrender values and withdrawals for life contracts	238,082	0	0	0	238,082
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	3,079,273	0	0	0	3,079,273
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	500,000	0	0	0	0	0	0	1	500,000
17.	Incurred during current year	4	2,827,365	0	0	0	0	0	0	4	2,827,365
	Settled during current year:										
18.1	By payment in full	4	3,297,365	0	0	0	0	0	0	4	3,297,365
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	4	3,297,365	0	0	0	0	0	0	4	3,297,365
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	4	3,297,365	0	0	0	0	0	0	4	3,297,365
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	30,000	0	0	0	0	0	0	1	30,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	2,780	1,664,921,197	0	(a) 0	0	0	0	0	2,780	1,664,921,197
21.	Issued during year	421	308,986,942	0	0	0	0	0	0	421	308,986,942
22.	Other changes to in force (Net)	(184)	(103,216,916)	0	0	0	0	0	0	(184)	(103,216,916)
23.	In force December 31 of current year	3,017	1,870,691,223	0	(a) 0	0	0	0	0	3,017	1,870,691,223

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	46,031	46,188	0	50,816	51,650
25.2	Guaranteed renewable (b)	9,060	9,091	0	0	0
25.3	Non-renewable for stated reasons only (b)	11,413	11,452	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	66,504	66,731	0	50,816	51,650
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	66,504	66,731	0	50,816	51,650

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

DIRECT BUSINESS IN THE STATE OF CALIFORNIA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	37,547,044	0	0	0	37,547,044
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	37,547,044	0	0	0	37,547,044
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	16,174,708	0	0	0	16,174,708
10. Matured endowments	15,580	0	0	0	15,580
11. Annuity benefits	68,057	0	0	0	68,057
12. Surrender values and withdrawals for life contracts	6,715,884	0	0	0	6,715,884
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	22,974,229	0	0	0	22,974,229
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	12	1,567,911	0	0	0	0	0	0	12	1,567,911
17. Incurred during current year	41	16,125,774	0	0	0	0	0	0	41	16,125,774
Settled during current year:										
18.1 By payment in full	42	15,643,960	0	0	0	0	0	0	42	15,643,960
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	42	15,643,960	0	0	0	0	0	0	42	15,643,960
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	42	15,643,960	0	0	0	0	0	0	42	15,643,960
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	11	2,049,726	0	0	0	0	0	0	11	2,049,726
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	18,616	13,178,889,041	0	(a) 0	0	0	0	0	18,616	13,178,889,041
21. Issued during year	2,216	1,804,675,013	0	0	0	0	0	0	2,216	1,804,675,013
22. Other changes to in force (Net)	(1,219)	(949,604,892)	0	0	0	0	0	0	(1,219)	(949,604,892)
23. In force December 31 of current year	19,613	14,033,959,162	0	(a) 0	0	0	0	0	19,613	14,033,959,162

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	1,757,520	1,763,532	0	4,815,213	4,816,665
25.2 Guaranteed renewable (b)	11,328	11,366	0	0	0
25.3 Non-renewable for stated reasons only (b)	32,274	32,384	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	1,801,122	1,807,282	0	4,815,213	4,816,665
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,801,122	1,807,282	0	4,815,213	4,816,665

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF CANADA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	7,825	0	0	0	7,825
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	7,825	0	0	0	7,825
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	0	0	0	0	0
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	0	0	0	0	0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	0	0	0	0	0
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	0	0	0	0	0	0	0	0	0	0
	Settled during current year:										
18.1	By payment in full	0	0	0	0	0	0	0	0	0	0
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	0	0	0	0	0	0	0	0	0	0
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	0	0	0	0	0	0	0	0	0	0
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	9	8,212,500	0	(a) 0	0	0	0	0	9	8,212,500
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(3)	(3,700,000)	0	0	0	0	0	0	(3)	(3,700,000)
23.	In force December 31 of current year	6	4,512,500	0	(a) 0	0	0	0	0	6	4,512,500

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	0	0	0	48,000	47,733
25.2	Guaranteed renewable (b)	0	0	0	0	0
25.3	Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	0	0	0	48,000	47,733
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	0	0	0	48,000	47,733

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF COLORADO DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	10,513,213	0	0	0	10,513,213
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	10,513,213	0	0	0	10,513,213
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	8,455,000	0	0	0	8,455,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	23,972	0	0	0	23,972
12.	Surrender values and withdrawals for life contracts	1,919,783	0	0	0	1,919,783
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	10,398,755	0	0	0	10,398,755
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	6	364,868	0	0	0	0	0	0	6	364,868
17. Incurred during current year	14	10,015,000	0	0	0	0	0	0	14	10,015,000
Settled during current year:										
18.1 By payment in full	14	5,569,868	0	0	0	0	0	0	14	5,569,868
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	14	5,569,868	0	0	0	0	0	0	14	5,569,868
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	14	5,569,868	0	0	0	0	0	0	14	5,569,868
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	6	4,810,000	0	0	0	0	0	0	6	4,810,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	6,935	4,024,190,468	0	(a) 0	0	0	0	0	6,935	4,024,190,468
21. Issued during year	524	434,292,855	0	0	0	0	0	0	524	434,292,855
22. Other changes to in force (Net)	(385)	(221,848,261)	0	0	0	0	0	0	(385)	(221,848,261)
23. In force December 31 of current year	7,074	4,236,635,062	0	(a) 0	0	0	0	0	7,074	4,236,635,062

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	1,491,322	1,496,423	0	1,897,005	1,929,802
25.2	Guaranteed renewable (b)	24,981	25,066	0	9,140	9,140
25.3	Non-renewable for stated reasons only (b)	21,667	21,741	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	1,537,970	1,543,230	0	1,906,145	1,938,942
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,537,970	1,543,230	0	1,906,145	1,938,942

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

DIRECT BUSINESS IN THE STATE OF CONNECTICUT DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	6,215,038	0	0	0	6,215,038
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	6,215,038	0	0	0	6,215,038
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	3,965,000	0	0	0	3,965,000
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	7,108	0	0	0	7,108
12. Surrender values and withdrawals for life contracts	447,545	0	0	0	447,545
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	4,419,653	0	0	0	4,419,653
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	2	1,800,000	0	0	0	0	0	0	2	1,800,000
17. Incurred during current year	7	3,965,000	0	0	0	0	0	0	7	3,965,000
Settled during current year:										
18.1 By payment in full	7	3,965,000	0	0	0	0	0	0	7	3,965,000
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	7	3,965,000	0	0	0	0	0	0	7	3,965,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	7	3,965,000	0	0	0	0	0	0	7	3,965,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	1,800,000	0	0	0	0	0	0	2	1,800,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	3,078	1,976,705,401	0	(a) 0	0	0	0	0	3,078	1,976,705,401
21. Issued during year	293	187,146,682	0	0	0	0	0	0	293	187,146,682
22. Other changes to in force (Net)	(178)	(149,313,901)	0	0	0	0	0	0	(178)	(149,313,901)
23. In force December 31 of current year	3,193	2,014,538,182	0	(a) 0	0	0	0	0	3,193	2,014,538,182

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	79,442	79,714	0	0	0
25.2 Guaranteed renewable (b)	13,521	13,567	0	0	0
25.3 Non-renewable for stated reasons only (b)	6,639	6,662	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	99,602	99,943	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	99,602	99,943	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF DISTRICT OF COLUMBIA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	627,084	0	0	0	627,084
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	627,084	0	0	0	627,084
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	0	0	0	0	0
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	1,008	0	0	0	1,008
12. Surrender values and withdrawals for life contracts	5,146	0	0	0	5,146
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	6,154	0	0	0	6,154
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	236	242,929,352	0	(a) 0	0	0	0	0	236	242,929,352
21. Issued during year	21	45,554,482	0	0	0	0	0	0	21	45,554,482
22. Other changes to in force (Net)	(7)	(13,353,844)	0	0	0	0	0	0	(7)	(13,353,844)
23. In force December 31 of current year	250	275,129,990	0	(a) 0	0	0	0	0	250	275,129,990

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	28,813	28,911	0	0	0
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	1,933	1,940	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	30,746	30,851	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	30,746	30,851	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF DELAWARE DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	371,426	0	0	0	371,426
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	371,426	0	0	0	371,426
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,511,739	0	0	0	1,511,739
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	1,844	0	0	0	1,844
12.	Surrender values and withdrawals for life contracts	1,982	0	0	0	1,982
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	1,515,565	0	0	0	1,515,565
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	4	1,190,000	0	0	0	0	0	0	4	1,190,000
	Settled during current year:										
18.1	By payment in full	3	190,000	0	0	0	0	0	0	3	190,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	3	190,000	0	0	0	0	0	0	3	190,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	3	190,000	0	0	0	0	0	0	3	190,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	1,000,000	0	0	0	0	0	0	1	1,000,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	403	174,865,639	0	(a) 0	0	0	0	0	403	174,865,639
21.	Issued during year	32	20,250,000	0	0	0	0	0	0	32	20,250,000
22.	Other changes to in force (Net)	(16)	20,247,217	0	0	0	0	0	0	(16)	20,247,217
23.	In force December 31 of current year	419	215,362,856	0	(a) 0	0	0	0	0	419	215,362,856

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	29,338	29,438	0	0	0
25.2	Guaranteed renewable (b)	1,041	1,044	0	0	0
25.3	Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	30,379	30,482	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	30,379	30,482	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	30,749,128	0	0	0	30,749,128
2.	Annuity considerations	1,148	0	0	0	1,148
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	30,750,276	0	0	0	30,750,276
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	5,734,686	0	0	0	5,734,686
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	152,754	0	0	0	152,754
12.	Surrender values and withdrawals for life contracts	12,865,272	0	0	0	12,865,272
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	18,752,712	0	0	0	18,752,712
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	16	11,473,004	0	0	0	0	0	0	16	11,473,004
17. Incurred during current year	40	6,992,211	0	0	0	0	0	0	40	6,992,211
Settled during current year:										
18.1 By payment in full	47	13,200,395	0	0	0	0	0	0	47	13,200,395
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	47	13,200,395	0	0	0	0	0	0	47	13,200,395
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	47	13,200,395	0	0	0	0	0	0	47	13,200,395
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	9	5,264,820	0	0	0	0	0	0	9	5,264,820
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	13,391	7,648,712,350	0	(a) 0	0	0	0	0	13,391	7,648,712,350
21. Issued during year	1,381	905,618,885	0	0	0	0	0	0	1,381	905,618,885
22. Other changes to in force (Net)	(903)	(537,594,532)	0	0	0	0	0	0	(903)	(537,594,532)
23. In force December 31 of current year	13,869	8,016,736,703	0	(a) 0	0	0	0	0	13,869	8,016,736,703

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	787,994	790,691	0	1,517,850	2,278,047
25.2	Guaranteed renewable (b)	12,427	12,470	0	6,300	5,950
25.3	Non-renewable for stated reasons only (b)	47,973	48,137	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	848,394	851,298	0	1,524,150	2,283,997
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	848,394	851,298	0	1,524,150	2,283,997

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

DIRECT BUSINESS IN THE STATE OF GEORGIA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	17,883,777	0	0	0	17,883,777
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	17,883,777	0	0	0	17,883,777
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	4,467,428	0	0	0	4,467,428
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	54,347	0	0	0	54,347
12. Surrender values and withdrawals for life contracts	12,386,023	0	0	0	12,386,023
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	16,907,798	0	0	0	16,907,798
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	3	675,000	0	0	0	0	0	0	3	675,000
17. Incurred during current year	21	4,562,043	0	0	0	0	0	0	21	4,562,043
Settled during current year:										
18.1 By payment in full	20	4,512,043	0	0	0	0	0	0	20	4,512,043
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	20	4,512,043	0	0	0	0	0	0	20	4,512,043
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	20	4,512,043	0	0	0	0	0	0	20	4,512,043
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	4	725,000	0	0	0	0	0	0	4	725,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	9,084	5,030,434,521	0	(a) 0	0	0	0	0	9,084	5,030,434,521
21. Issued during year	640	489,167,462	0	0	0	0	0	0	640	489,167,462
22. Other changes to in force (Net)	(561)	(386,397,207)	0	0	0	0	0	0	(561)	(386,397,207)
23. In force December 31 of current year	9,163	5,133,204,776	0	(a) 0	0	0	0	0	9,163	5,133,204,776

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	324,696	325,806	0	467,367	461,171
25.2 Guaranteed renewable (b)	16,926	16,984	0	0	0
25.3 Non-renewable for stated reasons only (b)	5,991	6,012	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	347,613	348,802	0	467,367	461,171
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	347,613	348,802	0	467,367	461,171

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

DIRECT BUSINESS IN GRAND TOTAL DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	434,931,636	0	0	0	434,931,636
2.	Annuity considerations	506,083	0	0	0	506,083
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	435,437,719	0	0	0	435,437,719
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	175,701,045	0	0	0	175,701,045
10.	Matured endowments	22,207	0	0	0	22,207
11.	Annuity benefits	5,761,599	0	0	0	5,761,599
12.	Surrender values and withdrawals for life contracts	96,906,912	0	0	0	96,906,912
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	278,391,763	0	0	0	278,391,763
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	173	31,531,112	0	0	0	0	0	0	173	31,531,112
17. Incurred during current year	657	174,276,414	0	0	0	0	0	0	657	174,276,414
Settled during current year:										
18.1 By payment in full	648	158,702,099	0	0	0	0	0	0	648	158,702,099
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	648	158,702,099	0	0	0	0	0	0	648	158,702,099
18.4 Reduction by compromise	1	125,000	0	0	0	0	0	0	1	125,000
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	649	158,827,099	0	0	0	0	0	0	649	158,827,099
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	181	46,980,427	0	0	0	0	0	0	181	46,980,427
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	236,070	119,965,206,942	0	(a) 0	0	0	0	0	236,070	119,965,206,942
21. Issued during year	20,528	13,861,434,353	0	0	0	0	0	0	20,528	13,861,434,353
22. Other changes to in force (Net)	(14,023)	(7,151,476,180)	0	0	0	0	0	0	(14,023)	(7,151,476,180)
23. In force December 31 of current year	242,575	126,675,165,115	0	(a) 0	0	0	0	0	242,575	126,675,165,115

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	14,912,973	14,963,981	0	19,809,391	20,281,831
25.2	Guaranteed renewable (b)	779,094	781,758	0	221,801	218,388
25.3	Non-renewable for stated reasons only (b)	543,481	545,341	0	20,000	20,000
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	16,235,548	16,291,080	0	20,051,192	20,520,219
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	16,235,548	16,291,080	0	20,051,192	20,520,219

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN GUAM DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	18,498	0	0	0	18,498
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	18,498	0	0	0	18,498
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	0	0	0	0	0
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	0	0	0	0	0
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	0	0	0	(a) 0	0	0	0	0	0	0
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year	0	0	0	(a) 0	0	0	0	0	0	0

NONE

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0	0	0	0
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	0	0	0	0	0

NONE

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF HAWAII DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	94,036	0	0	0	94,036
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	94,036	0	0	0	94,036
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,000,000	0	0	0	2,000,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	43,860	0	0	0	43,860
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	2,043,860	0	0	0	2,043,860
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	1	2,000,000	0	0	0	0	0	0	1	2,000,000
	Settled during current year:										
18.1	By payment in full	1	2,000,000	0	0	0	0	0	0	1	2,000,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	1	2,000,000	0	0	0	0	0	0	1	2,000,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	1	2,000,000	0	0	0	0	0	0	1	2,000,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	46	29,139,870	0	(a) 0	0	0	0	0	46	29,139,870
21.	Issued during year	1	1,000,000	0	0	0	0	0	0	1	1,000,000
22.	Other changes to in force (Net)	(1)	453,323	0	0	0	0	0	0	(1)	453,323
23.	In force December 31 of current year	46	30,593,193	0	(a) 0	0	0	0	0	46	30,593,193

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	8,628	8,657	0	41,300	47,671
25.2	Guaranteed renewable (b)	1,086	1,090	0	0	0
25.3	Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	9,714	9,747	0	41,300	47,671
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	9,714	9,747	0	41,300	47,671

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF IOWA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	7,175,482	0	0	0	7,175,482
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	7,175,482	0	0	0	7,175,482
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	3,628,240	0	0	0	3,628,240
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	104,037	0	0	0	104,037
12.	Surrender values and withdrawals for life contracts	3,449,515	0	0	0	3,449,515
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	7,181,792	0	0	0	7,181,792
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	6	121,188	0	0	0	0	0	0	6	121,188
17.	Incurred during current year	27	3,597,166	0	0	0	0	0	0	27	3,597,166
	Settled during current year:										
18.1	By payment in full	24	2,747,166	0	0	0	0	0	0	24	2,747,166
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	24	2,747,166	0	0	0	0	0	0	24	2,747,166
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	24	2,747,166	0	0	0	0	0	0	24	2,747,166
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	9	971,188	0	0	0	0	0	0	9	971,188
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	4,521	1,153,457,110	0	(a) 0	0	0	0	0	4,521	1,153,457,110
21.	Issued during year	185	70,118,118	0	0	0	0	0	0	185	70,118,118
22.	Other changes to in force (Net)	(285)	(64,942,278)	0	0	0	0	0	0	(285)	(64,942,278)
23.	In force December 31 of current year	4,421	1,158,632,950	0	(a) 0	0	0	0	0	4,421	1,158,632,950

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	152,497	153,019	0	36,167	35,000
25.2	Guaranteed renewable (b)	50,100	50,271	0	982	982
25.3	Non-renewable for stated reasons only (b)	1,281	1,286	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	203,878	204,576	0	37,149	35,982
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	203,878	204,576	0	37,149	35,982

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF IDAHO DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	4,080,279	0	0	0	4,080,279
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	4,080,279	0	0	0	4,080,279
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	5,837,345	0	0	0	5,837,345
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	5,400	0	0	0	5,400
12.	Surrender values and withdrawals for life contracts	1,686,551	0	0	0	1,686,551
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	7,529,296	0	0	0	7,529,296
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	4	108,112	0	0	0	0	0	0	4	108,112
17.	Incurred during current year	13	2,437,345	0	0	0	0	0	0	13	2,437,345
	Settled during current year:										
18.1	By payment in full	14	2,218,910	0	0	0	0	0	0	14	2,218,910
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	14	2,218,910	0	0	0	0	0	0	14	2,218,910
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	14	2,218,910	0	0	0	0	0	0	14	2,218,910
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	3	326,547	0	0	0	0	0	0	3	326,547
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	3,397	1,231,203,874	0	(a) 0	0	0	0	0	3,397	1,231,203,874
21.	Issued during year	279	142,083,590	0	0	0	0	0	0	279	142,083,590
22.	Other changes to in force (Net)	(226)	(71,588,201)	0	0	0	0	0	0	(226)	(71,588,201)
23.	In force December 31 of current year	3,450	1,301,699,263	0	(a) 0	0	0	0	0	3,450	1,301,699,263

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	229,410	230,195	0	132,867	133,493
25.2	Guaranteed renewable (b)	28,656	28,754	0	16,158	15,865
25.3	Non-renewable for stated reasons only (b)	11,374	11,413	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	269,440	270,362	0	149,025	149,358
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	269,440	270,362	0	149,025	149,358

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	15,292,511	0	0	0	15,292,511
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	15,292,511	0	0	0	15,292,511
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	3,807,098	0	0	0	3,807,098
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	288,825	0	0	0	288,825
12.	Surrender values and withdrawals for life contracts	2,768,325	0	0	0	2,768,325
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	6,864,248	0	0	0	6,864,248
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	3	1,298,275	0	0	0	0	0	0	3	1,298,275
17.	Incurred during current year	22	3,939,234	0	0	0	0	0	0	22	3,939,234
	Settled during current year:										
18.1	By payment in full	24	5,112,509	0	0	0	0	0	0	24	5,112,509
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	24	5,112,509	0	0	0	0	0	0	24	5,112,509
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	24	5,112,509	0	0	0	0	0	0	24	5,112,509
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	125,000	0	0	0	0	0	0	1	125,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	8,460	4,450,999,868	0	(a) 0	0	0	0	0	8,460	4,450,999,868
21.	Issued during year	748	461,691,050	0	0	0	0	0	0	748	461,691,050
22.	Other changes to in force (Net)	(623)	(324,446,379)	0	0	0	0	0	0	(623)	(324,446,379)
23.	In force December 31 of current year	8,585	4,588,244,539	0	(a) 0	0	0	0	0	8,585	4,588,244,539

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	266,422	267,333	0	34,200	34,200
25.2	Guaranteed renewable (b)	28,624	28,721	0	467	467
25.3	Non-renewable for stated reasons only (b)	11,918	11,959	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	306,964	308,013	0	34,667	34,667
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	306,964	308,013	0	34,667	34,667

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF INDIANA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	12,015,177	0	0	0	12,015,177
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	12,015,177	0	0	0	12,015,177
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,583,711	0	0	0	1,583,711
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	120,867	0	0	0	120,867
12.	Surrender values and withdrawals for life contracts	3,088,737	0	0	0	3,088,737
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	4,793,315	0	0	0	4,793,315
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	5	667,667	0	0	0	0	0	0	5	667,667
17. Incurred during current year	14	1,794,983	0	0	0	0	0	0	14	1,794,983
Settled during current year:										
18.1 By payment in full	13	1,674,522	0	0	0	0	0	0	13	1,674,522
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	13	1,674,522	0	0	0	0	0	0	13	1,674,522
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	13	1,674,522	0	0	0	0	0	0	13	1,674,522
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	6	788,129	0	0	0	0	0	0	6	788,129
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	5,120	2,133,104,931	0	(a) 0	0	0	0	0	5,120	2,133,104,931
21. Issued during year	340	198,569,883	0	0	0	0	0	0	340	198,569,883
22. Other changes to in force (Net)	(320)	(113,510,584)	0	0	0	0	0	0	(320)	(113,510,584)
23. In force December 31 of current year	5,140	2,218,164,230	0	(a) 0	0	0	0	0	5,140	2,218,164,230

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	256,457	257,334	0	261,631	390,004
25.2	Guaranteed renewable (b)	16,999	17,058	0	35,154	35,479
25.3	Non-renewable for stated reasons only (b)	1,838	1,844	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	275,294	276,236	0	296,785	425,483
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	275,294	276,236	0	296,785	425,483

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

DIRECT BUSINESS IN THE STATE OF KANSAS DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	8,019,367	0	0	0	8,019,367
2.	Annuity considerations	2,300	0	0	0	2,300
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	8,021,667	0	0	0	8,021,667
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	3,904,614	0	0	0	3,904,614
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	27,471	0	0	0	27,471
12.	Surrender values and withdrawals for life contracts	3,063,282	0	0	0	3,063,282
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	6,995,367	0	0	0	6,995,367
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	200,000	0	0	0	0	0	0	1	200,000
17.	Incurred during current year	10	4,742,424	0	0	0	0	0	0	10	4,742,424
	Settled during current year:										
18.1	By payment in full	8	3,067,207	0	0	0	0	0	0	8	3,067,207
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	8	3,067,207	0	0	0	0	0	0	8	3,067,207
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	8	3,067,207	0	0	0	0	0	0	8	3,067,207
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	3	1,875,218	0	0	0	0	0	0	3	1,875,218
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	5,056	2,447,105,717	0	(a) 0	0	0	0	0	5,056	2,447,105,717
21.	Issued during year	292	172,961,225	0	0	0	0	0	0	292	172,961,225
22.	Other changes to in force (Net)	(297)	(130,713,171)	0	0	0	0	0	0	(297)	(130,713,171)
23.	In force December 31 of current year	5,051	2,489,353,771	0	(a) 0	0	0	0	0	5,051	2,489,353,771

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	301,169	302,199	0	337,657	340,200
25.2	Guaranteed renewable (b)	23,592	23,673	0	0	0
25.3	Non-renewable for stated reasons only (b)	4,875	4,891	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	329,636	330,763	0	337,657	340,200
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	329,636	330,763	0	337,657	340,200

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

DIRECT BUSINESS IN THE STATE OF KENTUCKY DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	4,869,284	0	0	0	4,869,284
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	4,869,284	0	0	0	4,869,284
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	3,022,274	0	0	0	3,022,274
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	828	0	0	0	828
12. Surrender values and withdrawals for life contracts	876,954	0	0	0	876,954
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	3,900,056	0	0	0	3,900,056
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	1	25,000	0	0	0	0	0	0	1	25,000
17. Incurred during current year	11	2,551,812	0	0	0	0	0	0	11	2,551,812
Settled during current year:										
18.1 By payment in full	9	2,025,000	0	0	0	0	0	0	9	2,025,000
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	9	2,025,000	0	0	0	0	0	0	9	2,025,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	9	2,025,000	0	0	0	0	0	0	9	2,025,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	3	551,812	0	0	0	0	0	0	3	551,812
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	3,645	1,537,948,529	0	(a) 0	0	0	0	0	3,645	1,537,948,529
21. Issued during year	230	172,762,903	0	0	0	0	0	0	230	172,762,903
22. Other changes to in force (Net)	(214)	(68,670,241)	0	0	0	0	0	0	(214)	(68,670,241)
23. In force December 31 of current year	3,661	1,642,041,191	0	(a) 0	0	0	0	0	3,661	1,642,041,191

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	228,120	228,900	0	278,492	277,528
25.2 Guaranteed renewable (b)	7,823	7,850	0	6,600	6,563
25.3 Non-renewable for stated reasons only (b)	6,394	6,416	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	242,337	243,166	0	285,092	284,091
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	242,337	243,166	0	285,092	284,091

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

DIRECT BUSINESS IN THE STATE OF LOUISIANA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	3,334,915	0	0	0	3,334,915
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	3,334,915	0	0	0	3,334,915
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	1,050,000	0	0	0	1,050,000
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	5,639	0	0	0	5,639
12. Surrender values and withdrawals for life contracts	208,774	0	0	0	208,774
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	1,264,413	0	0	0	1,264,413
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	4	1,050,000	0	0	0	0	0	0	4	1,050,000
Settled during current year:										
18.1 By payment in full	4	1,050,000	0	0	0	0	0	0	4	1,050,000
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	4	1,050,000	0	0	0	0	0	0	4	1,050,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	4	1,050,000	0	0	0	0	0	0	4	1,050,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	2,047	1,239,816,014	0	(a) 0	0	0	0	0	2,047	1,239,816,014
21. Issued during year	287	222,118,405	0	0	0	0	0	0	287	222,118,405
22. Other changes to in force (Net)	(141)	(71,321,479)	0	0	0	0	0	0	(141)	(71,321,479)
23. In force December 31 of current year	2,193	1,390,612,940	0	(a) 0	0	0	0	0	2,193	1,390,612,940

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	160,041	160,588	0	117,000	116,410
25.2 Guaranteed renewable (b)	7,318	7,343	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	167,359	167,931	0	117,000	116,410
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	167,359	167,931	0	117,000	116,410

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

* 8 9 2 0 6 2 0 1 1 4 3 0 2 2 1 0 0 *

DIRECT BUSINESS IN THE STATE OF MASSACHUSETTS DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	10,294,375	0	0	0	10,294,375
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	10,294,375	0	0	0	10,294,375
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	1,250,000	0	0	0	1,250,000
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	130,907	0	0	0	130,907
12. Surrender values and withdrawals for life contracts	1,005,550	0	0	0	1,005,550
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	2,386,457	0	0	0	2,386,457
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	2	600,000	0	0	0	0	0	0	2	600,000
17. Incurred during current year	3	1,250,000	0	0	0	0	0	0	3	1,250,000
Settled during current year:										
18.1 By payment in full	3	1,250,000	0	0	0	0	0	0	3	1,250,000
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	3	1,250,000	0	0	0	0	0	0	3	1,250,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	3	1,250,000	0	0	0	0	0	0	3	1,250,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	600,000	0	0	0	0	0	0	2	600,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	4,144	2,722,597,982	0	(a) 0	0	0	0	0	4,144	2,722,597,982
21. Issued during year	444	277,592,003	0	0	0	0	0	0	444	277,592,003
22. Other changes to in force (Net)	(222)	(189,570,705)	0	0	0	0	0	0	(222)	(189,570,705)
23. In force December 31 of current year	4,366	2,810,619,280	0	(a) 0	0	0	0	0	4,366	2,810,619,280

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	129,094	129,536	0	0	0
25.2 Guaranteed renewable (b)	27,253	27,346	0	0	0
25.3 Non-renewable for stated reasons only (b)	11,348	11,387	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	167,695	168,269	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	167,695	168,269	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF MARYLAND DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	8,899,135	0	0	0	8,899,135
2.	Annuity considerations	2,958	0	0	0	2,958
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	8,902,093	0	0	0	8,902,093
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	3,436,124	0	0	0	3,436,124
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	218,854	0	0	0	218,854
12.	Surrender values and withdrawals for life contracts	366,949	0	0	0	366,949
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	4,021,927	0	0	0	4,021,927
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	2	68,983	0	0	0	0	0	0	2	68,983
17.	Incurred during current year	15	3,662,327	0	0	0	0	0	0	15	3,662,327
	Settled during current year:										
18.1	By payment in full	14	3,556,805	0	0	0	0	0	0	14	3,556,805
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	14	3,556,805	0	0	0	0	0	0	14	3,556,805
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	14	3,556,805	0	0	0	0	0	0	14	3,556,805
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	3	174,505	0	0	0	0	0	0	3	174,505
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	5,184	3,176,792,047	0	(a) 0	0	0	0	0	5,184	3,176,792,047
21.	Issued during year	557	382,623,720	0	0	0	0	0	0	557	382,623,720
22.	Other changes to in force (Net)	(242)	(138,141,639)	0	0	0	0	0	0	(242)	(138,141,639)
23.	In force December 31 of current year	5,499	3,421,274,128	0	(a) 0	0	0	0	0	5,499	3,421,274,128

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	354,699	355,912	0	486,240	393,695
25.2	Guaranteed renewable (b)	8,395	8,423	0	0	0
25.3	Non-renewable for stated reasons only (b)	7,421	7,446	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	370,515	371,781	0	486,240	393,695
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	370,515	371,781	0	486,240	393,695

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF MAINE DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	1,146,659	0	0	0	1,146,659
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	1,146,659	0	0	0	1,146,659
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	50,000	0	0	0	50,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	6,022	0	0	0	6,022
12.	Surrender values and withdrawals for life contracts	51,018	0	0	0	51,018
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	107,040	0	0	0	107,040
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	1	50,000	0	0	0	0	0	0	1	50,000
	Settled during current year:										
18.1	By payment in full	1	50,000	0	0	0	0	0	0	1	50,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	1	50,000	0	0	0	0	0	0	1	50,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	1	50,000	0	0	0	0	0	0	1	50,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	957	464,973,758	0	(a) 0	0	0	0	0	957	464,973,758
21.	Issued during year	70	44,990,522	0	0	0	0	0	0	70	44,990,522
22.	Other changes to in force (Net)	(38)	(35,042,690)	0	0	0	0	0	0	(38)	(35,042,690)
23.	In force December 31 of current year	989	474,921,590	0	(a) 0	0	0	0	0	989	474,921,590

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	1,589	1,594	0	56,400	56,087
25.2	Guaranteed renewable (b)	0	0	0	0	0
25.3	Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	1,589	1,594	0	56,400	56,087
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,589	1,594	0	56,400	56,087

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	14,832,558	0	0	0	14,832,558
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	14,832,558	0	0	0	14,832,558
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	3,905,152	0	0	0	3,905,152
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	379,152	0	0	0	379,152
12. Surrender values and withdrawals for life contracts	3,298,278	0	0	0	3,298,278
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	7,582,582	0	0	0	7,582,582
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	8	314,323	0	0	0	0	0	0	8	314,323
17. Incurred during current year	20	4,164,184	0	0	0	0	0	0	20	4,164,184
Settled during current year:										
18.1 By payment in full	19	3,325,914	0	0	0	0	0	0	19	3,325,914
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	19	3,325,914	0	0	0	0	0	0	19	3,325,914
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	19	3,325,914	0	0	0	0	0	0	19	3,325,914
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	9	1,152,593	0	0	0	0	0	0	9	1,152,593
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	8,816	3,706,641,851	0	(a) 0	0	0	0	0	8,816	3,706,641,851
21. Issued during year	524	287,859,964	0	0	0	0	0	0	524	287,859,964
22. Other changes to in force (Net)	(600)	(246,303,151)	0	0	0	0	0	0	(600)	(246,303,151)
23. In force December 31 of current year	8,740	3,748,198,664	0	(a) 0	0	0	0	0	8,740	3,748,198,664

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	638,326	640,509	0	768,732	768,264
25.2 Guaranteed renewable (b)	40,621	40,760	0	1,540	1,540
25.3 Non-renewable for stated reasons only (b)	23,367	23,447	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	702,314	704,716	0	770,272	769,804
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	702,314	704,716	0	770,272	769,804

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF MINNESOTA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	6,601,786	0	0	0	6,601,786
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	6,601,786	0	0	0	6,601,786
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,830,744	0	0	0	2,830,744
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	29,932	0	0	0	29,932
12.	Surrender values and withdrawals for life contracts	572,009	0	0	0	572,009
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	3,432,685	0	0	0	3,432,685
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	7	1,830,744	0	0	0	0	0	0	7	1,830,744
	Settled during current year:										
18.1	By payment in full	6	1,155,744	0	0	0	0	0	0	6	1,155,744
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	6	1,155,744	0	0	0	0	0	0	6	1,155,744
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	6	1,155,744	0	0	0	0	0	0	6	1,155,744
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	675,000	0	0	0	0	0	0	1	675,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	4,554	2,197,011,826	0	(a) 0	0	0	0	0	4,554	2,197,011,826
21.	Issued during year	309	169,647,441	0	0	0	0	0	0	309	169,647,441
22.	Other changes to in force (Net)	(237)	(124,105,802)	0	0	0	0	0	0	(237)	(124,105,802)
23.	In force December 31 of current year	4,626	2,242,553,465	0	(a) 0	0	0	0	0	4,626	2,242,553,465

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	171,239	171,825	0	87,500	104,417
25.2	Guaranteed renewable (b)	23,007	23,086	0	0	0
25.3	Non-renewable for stated reasons only (b)	11,799	11,839	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	206,045	206,750	0	87,500	104,417
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	206,045	206,750	0	87,500	104,417

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF MISSOURI DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	11,159,400	0	0	0	11,159,400
2.	Annuity considerations	340	0	0	0	340
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	11,159,740	0	0	0	11,159,740
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,339,694	0	0	0	2,339,694
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	202,074	0	0	0	202,074
12.	Surrender values and withdrawals for life contracts	3,363,275	0	0	0	3,363,275
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	5,905,043	0	0	0	5,905,043
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	5	380,920	0	0	0	0	0	0	5	380,920
17.	Incurred during current year	11	2,205,417	0	0	0	0	0	0	11	2,205,417
	Settled during current year:										
18.1	By payment in full	14	2,580,417	0	0	0	0	0	0	14	2,580,417
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	14	2,580,417	0	0	0	0	0	0	14	2,580,417
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	14	2,580,417	0	0	0	0	0	0	14	2,580,417
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	5,920	0	0	0	0	0	0	2	5,920
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	4,760	1,835,422,473	0	(a) 0	0	0	0	0	4,760	1,835,422,473
21.	Issued during year	274	134,459,984	0	0	0	0	0	0	274	134,459,984
22.	Other changes to in force (Net)	(273)	(101,947,848)	0	0	0	0	0	0	(273)	(101,947,848)
23.	In force December 31 of current year	4,761	1,867,934,609	0	(a) 0	0	0	0	0	4,761	1,867,934,609

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	215,623	216,361	0	417,784	417,447
25.2	Guaranteed renewable (b)	19,447	19,513	0	12,000	11,933
25.3	Non-renewable for stated reasons only (b)	2,388	2,397	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	237,458	238,271	0	429,784	429,380
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	237,458	238,271	0	429,784	429,380

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF NORTHERN MARIANA ISLANDS DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	0	0	0	0	0
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	0	0	0	0	0
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	0	0	0	0	0
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	0	0	0	0	0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	0	0	0	0	0
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

NONE

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	0	0	0	0	0	0	0	0	0	0
	Settled during current year:										
18.1	By payment in full	0	0	0	0	0	0	0	0	0	0
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	0	0	0	0	0	0	0	0	0	0
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	0	0	0	0	0	0	0	0	0	0
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	0	0	0	(a) 0	0	0	0	0	0	0
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23.	In force December 31 of current year	0	0	0	(a) 0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	0	0	0	0	0
25.2	Guaranteed renewable (b)	0	0	0	0	0
25.3	Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	0	0	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	0	0	0	0	0

NONE

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF MISSISSIPPI DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	2,795,233	0	0	0	2,795,233
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	2,795,233	0	0	0	2,795,233
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	5,355,000	0	0	0	5,355,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	370,945	0	0	0	370,945
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	5,725,945	0	0	0	5,725,945
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	2	200,000	0	0	0	0	0	0	2	200,000
17.	Incurred during current year	7	5,390,000	0	0	0	0	0	0	7	5,390,000
	Settled during current year:										
18.1	By payment in full	7	5,570,000	0	0	0	0	0	0	7	5,570,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	7	5,570,000	0	0	0	0	0	0	7	5,570,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	7	5,570,000	0	0	0	0	0	0	7	5,570,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	20,000	0	0	0	0	0	0	2	20,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,329	691,968,355	0	(a) 0	0	0	0	0	1,329	691,968,355
21.	Issued during year	78	42,548,223	0	0	0	0	0	0	78	42,548,223
22.	Other changes to in force (Net)	(83)	(30,924,683)	0	0	0	0	0	0	(83)	(30,924,683)
23.	In force December 31 of current year	1,324	703,591,895	0	(a) 0	0	0	0	0	1,324	703,591,895

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	172,715	173,306	0	56,733	56,120
25.2	Guaranteed renewable (b)	3,581	3,593	0	0	0
25.3	Non-renewable for stated reasons only (b)	1,846	1,853	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	178,142	178,752	0	56,733	56,120
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	178,142	178,752	0	56,733	56,120

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

DIRECT BUSINESS IN THE STATE OF MONTANA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	2,359,457	0	0	0	2,359,457
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	2,359,457	0	0	0	2,359,457
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	370,000	0	0	0	370,000
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	1,898	0	0	0	1,898
12. Surrender values and withdrawals for life contracts	137,966	0	0	0	137,966
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	509,864	0	0	0	509,864
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	1	200,000	0	0	0	0	0	0	1	200,000
17. Incurred during current year	2	370,000	0	0	0	0	0	0	2	370,000
Settled during current year:										
18.1 By payment in full	3	570,000	0	0	0	0	0	0	3	570,000
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	3	570,000	0	0	0	0	0	0	3	570,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	3	570,000	0	0	0	0	0	0	3	570,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	1,846	789,171,192	0	(a) 0	0	0	0	0	1,846	789,171,192
21. Issued during year	191	112,154,223	0	0	0	0	0	0	191	112,154,223
22. Other changes to in force (Net)	(123)	(67,908,391)	0	0	0	0	0	0	(123)	(67,908,391)
23. In force December 31 of current year	1,914	833,417,024	0	(a) 0	0	0	0	0	1,914	833,417,024

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	33,354	33,468	0	25,200	25,200
25.2 Guaranteed renewable (b)	2,632	2,641	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	35,986	36,109	0	25,200	25,200
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	35,986	36,109	0	25,200	25,200

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	17,390,883	0	0	0	17,390,883
2.	Annuity considerations	42,519	0	0	0	42,519
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	17,433,402	0	0	0	17,433,402
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	4,051,698	0	0	0	4,051,698
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	91,983	0	0	0	91,983
12.	Surrender values and withdrawals for life contracts	1,202,822	0	0	0	1,202,822
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	5,346,503	0	0	0	5,346,503
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	4	400,000	0	0	0	0	0	0	4	400,000
17. Incurred during current year	12	3,227,264	0	0	0	0	0	0	12	3,227,264
Settled during current year:										
18.1 By payment in full	13	3,394,859	0	0	0	0	0	0	13	3,394,859
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	13	3,394,859	0	0	0	0	0	0	13	3,394,859
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	13	3,394,859	0	0	0	0	0	0	13	3,394,859
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	3	232,406	0	0	0	0	0	0	3	232,406
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	6,112	3,415,688,116	0	(a) 0	0	0	0	0	6,112	3,415,688,116
21. Issued during year	625	455,518,140	0	0	0	0	0	0	625	455,518,140
22. Other changes to in force (Net)	(266)	(133,049,006)	0	0	0	0	0	0	(266)	(133,049,006)
23. In force December 31 of current year	6,471	3,738,157,250	0	(a) 0	0	0	0	0	6,471	3,738,157,250

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	427,768	429,231	0	306,720	301,237
25.2	Guaranteed renewable (b)	14,596	14,646	0	0	0
25.3	Non-renewable for stated reasons only (b)	6,186	6,207	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	448,550	450,084	0	306,720	301,237
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	448,550	450,084	0	306,720	301,237

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

DIRECT BUSINESS IN THE STATE OF NORTH DAKOTA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	1,106,236	0	0	0	1,106,236
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	1,106,236	0	0	0	1,106,236
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	500,000	0	0	0	500,000
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	12,000	0	0	0	12,000
12. Surrender values and withdrawals for life contracts	370,524	0	0	0	370,524
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	882,524	0	0	0	882,524
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	5	500,000	0	0	0	0	0	0	5	500,000
Settled during current year:										
18.1 By payment in full	5	500,000	0	0	0	0	0	0	5	500,000
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	5	500,000	0	0	0	0	0	0	5	500,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	5	500,000	0	0	0	0	0	0	5	500,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	1,013	333,086,983	0	(a) 0	0	0	0	0	1,013	333,086,983
21. Issued during year	50	27,120,135	0	0	0	0	0	0	50	27,120,135
22. Other changes to in force (Net)	(47)	(6,115,441)	0	0	0	0	0	0	(47)	(6,115,441)
23. In force December 31 of current year	1,016	354,091,677	0	(a) 0	0	0	0	0	1,016	354,091,677

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	31,959	32,068	0	0	0
25.2 Guaranteed renewable (b)	7,876	7,903	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	39,835	39,971	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	39,835	39,971	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF NEBRASKA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	6,612,122	0	0	0	6,612,122
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	6,612,122	0	0	0	6,612,122
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,178,309	0	0	0	2,178,309
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	40,838	0	0	0	40,838
12.	Surrender values and withdrawals for life contracts	1,981,682	0	0	0	1,981,682
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	4,200,829	0	0	0	4,200,829
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	7	353,803	0	0	0	0	0	0	7	353,803
17.	Incurred during current year	19	2,186,756	0	0	0	0	0	0	19	2,186,756
	Settled during current year:										
18.1	By payment in full	23	2,510,208	0	0	0	0	0	0	23	2,510,208
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	23	2,510,208	0	0	0	0	0	0	23	2,510,208
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	23	2,510,208	0	0	0	0	0	0	23	2,510,208
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	3	30,352	0	0	0	0	0	0	3	30,352
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	4,468	1,157,052,829	0	(a) 0	0	0	0	0	4,468	1,157,052,829
21.	Issued during year	256	123,859,656	0	0	0	0	0	0	256	123,859,656
22.	Other changes to in force (Net)	(257)	(87,774,864)	0	0	0	0	0	0	(257)	(87,774,864)
23.	In force December 31 of current year	4,467	1,193,137,621	0	(a) 0	0	0	0	0	4,467	1,193,137,621

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	104,542	104,899	0	35,000	93,917
25.2	Guaranteed renewable (b)	15,199	15,251	0	3,050	3,050
25.3	Non-renewable for stated reasons only (b)	14,567	14,617	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	134,308	134,767	0	38,050	96,967
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	134,308	134,767	0	38,050	96,967

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF NEW HAMPSHIRE DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	3,793,344	0	0	0	3,793,344
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	3,793,344	0	0	0	3,793,344
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	75,000	0	0	0	75,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	297,207	0	0	0	297,207
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	372,207	0	0	0	372,207
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	1	75,000	0	0	0	0	0	0	1	75,000
	Settled during current year:										
18.1	By payment in full	1	75,000	0	0	0	0	0	0	1	75,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	1	75,000	0	0	0	0	0	0	1	75,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	1	75,000	0	0	0	0	0	0	1	75,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,205	600,026,456	0	(a) 0	0	0	0	0	1,205	600,026,456
21.	Issued during year	130	106,934,165	0	0	0	0	0	0	130	106,934,165
22.	Other changes to in force (Net)	(68)	(28,621,833)	0	0	0	0	0	0	(68)	(28,621,833)
23.	In force December 31 of current year	1,267	678,338,788	0	(a) 0	0	0	0	0	1,267	678,338,788

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	28,510	28,607	0	0	0
25.2	Guaranteed renewable (b)	744	747	0	0	0
25.3	Non-renewable for stated reasons only (b)	996	999	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	30,250	30,353	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	30,250	30,353	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

DIRECT BUSINESS IN THE STATE OF NEW JERSEY DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	6,603,092	0	0	0	6,603,092
2.	Annuity considerations	400	0	0	0	400
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	6,603,492	0	0	0	6,603,492
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,662,072	0	0	0	2,662,072
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	46,302	0	0	0	46,302
12.	Surrender values and withdrawals for life contracts	907,820	0	0	0	907,820
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	3,616,194	0	0	0	3,616,194
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	1,900,000	0	0	0	0	0	0	1	1,900,000
17.	Incurred during current year	5	2,462,072	0	0	0	0	0	0	5	2,462,072
	Settled during current year:										
18.1	By payment in full	4	2,162,072	0	0	0	0	0	0	4	2,162,072
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	4	2,162,072	0	0	0	0	0	0	4	2,162,072
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	4	2,162,072	0	0	0	0	0	0	4	2,162,072
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	2,200,000	0	0	0	0	0	0	2	2,200,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	3,293	2,424,093,724	0	(a) 0	0	0	0	0	3,293	2,424,093,724
21.	Issued during year	612	390,759,554	0	0	0	0	0	0	612	390,759,554
22.	Other changes to in force (Net)	(154)	(126,412,065)	0	0	0	0	0	0	(154)	(126,412,065)
23.	In force December 31 of current year	3,751	2,688,441,213	0	(a) 0	0	0	0	0	3,751	2,688,441,213

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	300,945	301,974	0	765,019	782,824
25.2	Guaranteed renewable (b)	0	0	0	15,240	8,736
25.3	Non-renewable for stated reasons only (b)	24,039	24,121	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	324,984	326,095	0	780,259	791,560
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	324,984	326,095	0	780,259	791,560

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF NEW MEXICO DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	825,448	0	0	0	825,448
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	825,448	0	0	0	825,448
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	3,717,652	0	0	0	3,717,652
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	273,137	0	0	0	273,137
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	3,990,789	0	0	0	3,990,789
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	5	3,717,652	0	0	0	0	0	0	5	3,717,652
	Settled during current year:										
18.1	By payment in full	5	3,717,652	0	0	0	0	0	0	5	3,717,652
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	5	3,717,652	0	0	0	0	0	0	5	3,717,652
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	5	3,717,652	0	0	0	0	0	0	5	3,717,652
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	542	229,573,752	0	(a) 0	0	0	0	0	542	229,573,752
21.	Issued during year	28	18,107,755	0	0	0	0	0	0	28	18,107,755
22.	Other changes to in force (Net)	(28)	(15,876,064)	0	0	0	0	0	0	(28)	(15,876,064)
23.	In force December 31 of current year	542	231,805,443	0	(a) 0	0	0	0	0	542	231,805,443

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	41,024	41,164	0	36,000	35,800
25.2	Guaranteed renewable (b)	479	481	0	0	0
25.3	Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	41,503	41,645	0	36,000	35,800
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	41,503	41,645	0	36,000	35,800

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

DIRECT BUSINESS IN THE STATE OF NEVADA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	1,553,571	0	0	0	1,553,571
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	1,553,571	0	0	0	1,553,571
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	376,000	0	0	0	376,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	290,150	0	0	0	290,150
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	666,150	0	0	0	666,150
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	1	734,453	0	0	0	0	0	0	1	734,453
17. Incurred during current year	3	376,000	0	0	0	0	0	0	3	376,000
Settled during current year:										
18.1 By payment in full	4	1,110,453	0	0	0	0	0	0	4	1,110,453
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	4	1,110,453	0	0	0	0	0	0	4	1,110,453
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	4	1,110,453	0	0	0	0	0	0	4	1,110,453
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	731	435,488,291	0	(a) 0	0	0	0	0	731	435,488,291
21. Issued during year	85	74,593,046	0	0	0	0	0	0	85	74,593,046
22. Other changes to in force (Net)	(36)	(10,388,705)	0	0	0	0	0	0	(36)	(10,388,705)
23. In force December 31 of current year	780	499,692,632	0	(a) 0	0	0	0	0	780	499,692,632

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	49,228	49,397	0	0	0
25.2	Guaranteed renewable (b)	0	0	0	0	0
25.3	Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	49,228	49,397	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	49,228	49,397	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF NEW YORK DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	1,045,133	0	0	0	1,045,133
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	1,045,133	0	0	0	1,045,133
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,201,000	0	0	0	1,201,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	364,464	0	0	0	364,464
12.	Surrender values and withdrawals for life contracts	65,826	0	0	0	65,826
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	1,631,290	0	0	0	1,631,290
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	50,000	0	0	0	0	0	0	1	50,000
17.	Incurred during current year	4	1,772,648	0	0	0	0	0	0	4	1,772,648
	Settled during current year:										
18.1	By payment in full	4	1,819,698	0	0	0	0	0	0	4	1,819,698
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	4	1,819,698	0	0	0	0	0	0	4	1,819,698
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	4	1,819,698	0	0	0	0	0	0	4	1,819,698
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	2,950	0	0	0	0	0	0	1	2,950
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	361	369,689,396	0	(a) 0	0	0	0	0	361	369,689,396
21.	Issued during year	19	35,100,000	0	0	0	0	0	0	19	35,100,000
22.	Other changes to in force (Net)	(4)	(24,419,569)	0	0	0	0	0	0	(4)	(24,419,569)
23.	In force December 31 of current year	376	380,369,827	0	(a) 0	0	0	0	0	376	380,369,827

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	45,082	45,236	0	0	0
25.2	Guaranteed renewable (b)	245	246	0	0	0
25.3	Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	45,327	45,482	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	45,327	45,482	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF OHIO DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	36,065,686	0	0	0	36,065,686
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	36,065,686	0	0	0	36,065,686
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	14,763,116	0	0	0	14,763,116
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	906,201	0	0	0	906,201
12.	Surrender values and withdrawals for life contracts	13,014,709	0	0	0	13,014,709
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	28,684,026	0	0	0	28,684,026
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	30	1,284,098	0	0	0	0	0	0	30	1,284,098
17. Incurred during current year	69	15,100,595	0	0	0	0	0	0	69	15,100,595
Settled during current year:										
18.1 By payment in full	69	14,824,966	0	0	0	0	0	0	69	14,824,966
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	69	14,824,966	0	0	0	0	0	0	69	14,824,966
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	69	14,824,966	0	0	0	0	0	0	69	14,824,966
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	30	1,559,727	0	0	0	0	0	0	30	1,559,727
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	22,893	9,249,731,461	0	(a) 0	0	0	0	0	22,893	9,249,731,461
21. Issued during year	1,309	816,325,176	0	0	0	0	0	0	1,309	816,325,176
22. Other changes to in force (Net)	(1,400)	(606,687,219)	0	0	0	0	0	0	(1,400)	(606,687,219)
23. In force December 31 of current year	22,802	9,459,369,418	0	(a) 0	0	0	0	0	22,802	9,459,369,418

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	1,314,031	1,318,525	0	871,759	290,026
25.2	Guaranteed renewable (b)	58,403	58,603	0	6,000	4,715
25.3	Non-renewable for stated reasons only (b)	38,786	38,919	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	1,411,220	1,416,047	0	877,759	294,741
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,411,220	1,416,047	0	877,759	294,741

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF OKLAHOMA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	9,699,017	0	0	0	9,699,017
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	9,699,017	0	0	0	9,699,017
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	566,000	0	0	0	566,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	56,624	0	0	0	56,624
12.	Surrender values and withdrawals for life contracts	291,324	0	0	0	291,324
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	913,948	0	0	0	913,948
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	1	300,000	0	0	0	0	0	0	1	300,000
17. Incurred during current year	5	3,566,000	0	0	0	0	0	0	5	3,566,000
Settled during current year:										
18.1 By payment in full	5	866,000	0	0	0	0	0	0	5	866,000
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	5	866,000	0	0	0	0	0	0	5	866,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	5	866,000	0	0	0	0	0	0	5	866,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	3,000,000	0	0	0	0	0	0	1	3,000,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	2,687	1,137,258,449	0	(a) 0	0	0	0	0	2,687	1,137,258,449
21. Issued during year	326	165,203,639	0	0	0	0	0	0	326	165,203,639
22. Other changes to in force (Net)	(124)	(57,515,085)	0	0	0	0	0	0	(124)	(57,515,085)
23. In force December 31 of current year	2,889	1,244,947,003	0	(a) 0	0	0	0	0	2,889	1,244,947,003

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	87,376	87,675	0	12,000	8,900
25.2	Guaranteed renewable (b)	7,305	7,330	0	0	0
25.3	Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	94,681	95,005	0	12,000	8,900
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	94,681	95,005	0	12,000	8,900

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF OREGON DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	4,018,395	0	0	0	4,018,395
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	4,018,395	0	0	0	4,018,395
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	3,978,137	0	0	0	3,978,137
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	10,000	0	0	0	10,000
12.	Surrender values and withdrawals for life contracts	633,107	0	0	0	633,107
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	4,621,244	0	0	0	4,621,244
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	12	4,828,137	0	0	0	0	0	0	12	4,828,137
	Settled during current year:										
18.1	By payment in full	11	3,028,137	0	0	0	0	0	0	11	3,028,137
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	11	3,028,137	0	0	0	0	0	0	11	3,028,137
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	11	3,028,137	0	0	0	0	0	0	11	3,028,137
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	1,800,000	0	0	0	0	0	0	1	1,800,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	3,246	1,543,935,856	0	(a) 0	0	0	0	0	3,246	1,543,935,856
21.	Issued during year	236	154,808,574	0	0	0	0	0	0	236	154,808,574
22.	Other changes to in force (Net)	(179)	(71,463,343)	0	0	0	0	0	0	(179)	(71,463,343)
23.	In force December 31 of current year	3,303	1,627,281,087	0	(a) 0	0	0	0	0	3,303	1,627,281,087

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	241,085	241,910	0	120,786	121,962
25.2	Guaranteed renewable (b)	31,485	31,593	0	9,600	9,600
25.3	Non-renewable for stated reasons only (b)	12,746	12,789	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	285,316	286,292	0	130,386	131,562
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	285,316	286,292	0	130,386	131,562

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN OTHER ALIEN GRAND TOTAL DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	0	0	0	0	0
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	0	0	0	0	0
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	0	0	0	0	0
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

NONE

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	0	0	0	(a) 0	0	0	0	0	0	0
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year	0	0	0	(a) 0	0	0	0	0	0	0

NONE

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0	0	0	0
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	0	0	0	0	0

NONE

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

DIRECT BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	17,485,786	0	0	0	17,485,786
2. Annuity considerations	449,584	0	0	0	449,584
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	17,935,370	0	0	0	17,935,370
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	8,312,099	0	0	0	8,312,099
10. Matured endowments	6,627	0	0	0	6,627
11. Annuity benefits	1,574,722	0	0	0	1,574,722
12. Surrender values and withdrawals for life contracts	3,159,588	0	0	0	3,159,588
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	13,053,036	0	0	0	13,053,036
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	15	648,405	0	0	0	0	0	0	15	648,405
17. Incurred during current year	67	8,552,534	0	0	0	0	0	0	67	8,552,534
Settled during current year:										
18.1 By payment in full	66	8,340,024	0	0	0	0	0	0	66	8,340,024
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	66	8,340,024	0	0	0	0	0	0	66	8,340,024
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	66	8,340,024	0	0	0	0	0	0	66	8,340,024
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	16	860,915	0	0	0	0	0	0	16	860,915
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	14,231	4,902,836,538	0	(a) 0	0	0	0	0	14,231	4,902,836,538
21. Issued during year	886	609,436,245	0	0	0	0	0	0	886	609,436,245
22. Other changes to in force (Net)	(864)	(215,985,385)	0	0	0	0	0	0	(864)	(215,985,385)
23. In force December 31 of current year	14,253	5,296,287,398	0	(a) 0	0	0	0	0	14,253	5,296,287,398

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	695,104	697,481	0	395,932	424,119
25.2 Guaranteed renewable (b)	148,944	149,454	0	57,037	61,105
25.3 Non-renewable for stated reasons only (b)	50,778	50,952	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	894,826	897,887	0	452,969	485,224
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	894,826	897,887	0	452,969	485,224

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

DIRECT BUSINESS IN PUERTO RICO DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	4,487,005	0	0	0	4,487,005
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	4,487,005	0	0	0	4,487,005
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	100,000	0	0	0	100,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	326,313	0	0	0	326,313
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	426,313	0	0	0	426,313
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	1	100,000	0	0	0	0	0	0	1	100,000
	Settled during current year:										
18.1	By payment in full	1	100,000	0	0	0	0	0	0	1	100,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	1	100,000	0	0	0	0	0	0	1	100,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	1	100,000	0	0	0	0	0	0	1	100,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,023	942,064,305	0	(a) 0	0	0	0	0	1,023	942,064,305
21.	Issued during year	108	100,072,695	0	0	0	0	0	0	108	100,072,695
22.	Other changes to in force (Net)	(68)	(43,561,675)	0	0	0	0	0	0	(68)	(43,561,675)
23.	In force December 31 of current year	1,063	998,575,325	0	(a) 0	0	0	0	0	1,063	998,575,325

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	195,724	196,393	0	0	0
25.2	Guaranteed renewable (b)	0	0	0	0	0
25.3	Non-renewable for stated reasons only (b)	50,379	50,552	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	246,103	246,945	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	246,103	246,945	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

DIRECT BUSINESS IN THE STATE OF RHODE ISLAND DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	1,296,949	0	0	0	1,296,949
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	1,296,949	0	0	0	1,296,949
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	1,050,000	0	0	0	1,050,000
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	335,540	0	0	0	335,540
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	1,385,540	0	0	0	1,385,540
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	1	200,000	0	0	0	0	0	0	1	200,000
17. Incurred during current year	3	1,050,000	0	0	0	0	0	0	3	1,050,000
Settled during current year:										
18.1 By payment in full	2	550,000	0	0	0	0	0	0	2	550,000
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	2	550,000	0	0	0	0	0	0	2	550,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	2	550,000	0	0	0	0	0	0	2	550,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	700,000	0	0	0	0	0	0	2	700,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	930	484,775,732	0	(a) 0	0	0	0	0	930	484,775,732
21. Issued during year	95	48,740,000	0	0	0	0	0	0	95	48,740,000
22. Other changes to in force (Net)	(68)	(30,018,173)	0	0	0	0	0	0	(68)	(30,018,173)
23. In force December 31 of current year	957	503,497,559	0	(a) 0	0	0	0	0	957	503,497,559

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	11,837	11,878	0	0	0
25.2 Guaranteed renewable (b)	402	403	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	12,239	12,281	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	12,239	12,281	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF SOUTH CAROLINA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	3,061,470	0	0	0	3,061,470
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	3,061,470	0	0	0	3,061,470
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,706,270	0	0	0	2,706,270
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	8,878	0	0	0	8,878
12.	Surrender values and withdrawals for life contracts	723,327	0	0	0	723,327
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	3,438,475	0	0	0	3,438,475
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	3	943,937	0	0	0	0	0	0	3	943,937
17.	Incurred during current year	8	2,206,270	0	0	0	0	0	0	8	2,206,270
	Settled during current year:										
18.1	By payment in full	8	2,456,270	0	0	0	0	0	0	8	2,456,270
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	8	2,456,270	0	0	0	0	0	0	8	2,456,270
18.4	Reduction by compromise	1	125,000	0	0	0	0	0	0	1	125,000
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	9	2,581,270	0	0	0	0	0	0	9	2,581,270
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	568,937	0	0	0	0	0	0	2	568,937
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	2,600	1,216,073,363	0	(a) 0	0	0	0	0	2,600	1,216,073,363
21.	Issued during year	233	131,128,453	0	0	0	0	0	0	233	131,128,453
22.	Other changes to in force (Net)	(208)	(86,001,312)	0	0	0	0	0	0	(208)	(86,001,312)
23.	In force December 31 of current year	2,625	1,261,200,504	0	(a) 0	0	0	0	0	2,625	1,261,200,504

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	66,216	66,442	0	34,432	33,232
25.2	Guaranteed renewable (b)	9,116	9,147	0	0	0
25.3	Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	75,332	75,589	0	34,432	33,232
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	75,332	75,589	0	34,432	33,232

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF SOUTH DAKOTA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	453,314	0	0	0	453,314
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	453,314	0	0	0	453,314
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	55,000	0	0	0	55,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	106,588	0	0	0	106,588
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	161,588	0	0	0	161,588
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	2	55,000	0	0	0	0	0	0	2	55,000
	Settled during current year:										
18.1	By payment in full	2	55,000	0	0	0	0	0	0	2	55,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	2	55,000	0	0	0	0	0	0	2	55,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	2	55,000	0	0	0	0	0	0	2	55,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	443	169,432,416	0	(a) 0	0	0	0	0	443	169,432,416
21.	Issued during year	19	18,185,000	0	0	0	0	0	0	19	18,185,000
22.	Other changes to in force (Net)	0	25,778,034	0	0	0	0	0	0	0	25,778,034
23.	In force December 31 of current year	462	213,395,450	0	(a) 0	0	0	0	0	462	213,395,450

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	15,629	15,683	0	0	0
25.2	Guaranteed renewable (b)	336	337	0	0	0
25.3	Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	15,965	16,020	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	15,965	16,020	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF TENNESSEE DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	14,950,962	0	0	0	14,950,962
2.	Annuity considerations	3,671	0	0	0	3,671
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	14,954,633	0	0	0	14,954,633
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	7,367,675	0	0	0	7,367,675
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	416,274	0	0	0	416,274
12.	Surrender values and withdrawals for life contracts	2,897,174	0	0	0	2,897,174
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	10,681,123	0	0	0	10,681,123
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	16	7,240,222	0	0	0	0	0	0	16	7,240,222
	Settled during current year:										
18.1	By payment in full	15	2,598,984	0	0	0	0	0	0	15	2,598,984
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	15	2,598,984	0	0	0	0	0	0	15	2,598,984
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	15	2,598,984	0	0	0	0	0	0	15	2,598,984
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	4,641,238	0	0	0	0	0	0	1	4,641,238
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	7,837	4,364,473,739	0	(a) 0	0	0	0	0	7,837	4,364,473,739
21.	Issued during year	579	406,220,468	0	0	0	0	0	0	579	406,220,468
22.	Other changes to in force (Net)	(458)	(283,264,840)	0	0	0	0	0	0	(458)	(283,264,840)
23.	In force December 31 of current year	7,958	4,487,429,367	0	(a) 0	0	0	0	0	7,958	4,487,429,367

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	335,631	336,780	0	155,862	163,671
25.2	Guaranteed renewable (b)	10,540	10,576	0	0	0
25.3	Non-renewable for stated reasons only (b)	46,496	46,655	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	392,667	394,011	0	155,862	163,671
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	392,667	394,011	0	155,862	163,671

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF TEXAS DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	38,090,047	0	0	0	38,090,047
2.	Annuity considerations	113	0	0	0	113
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	38,090,160	0	0	0	38,090,160
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	20,908,952	0	0	0	20,908,952
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	3,764,404	0	0	0	3,764,404
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	24,673,356	0	0	0	24,673,356
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	8	1,740,187	0	0	0	0	0	0	8	1,740,187
17.	Incurred during current year	52	17,902,407	0	0	0	0	0	0	52	17,902,407
	Settled during current year:										
18.1	By payment in full	42	14,879,872	0	0	0	0	0	0	42	14,879,872
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	42	14,879,872	0	0	0	0	0	0	42	14,879,872
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	42	14,879,872	0	0	0	0	0	0	42	14,879,872
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	18	4,762,721	0	0	0	0	0	0	18	4,762,721
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	16,030	9,065,719,639	0	(a) 0	0	0	0	0	16,030	9,065,719,639
21.	Issued during year	1,677	1,166,439,092	0	0	0	0	0	0	1,677	1,166,439,092
22.	Other changes to in force (Net)	(814)	(451,254,312)	0	0	0	0	0	0	(814)	(451,254,312)
23.	In force December 31 of current year	16,893	9,780,904,419	0	(a) 0	0	0	0	0	16,893	9,780,904,419

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	1,176,954	1,180,981	0	2,028,051	1,973,955
25.2	Guaranteed renewable (b)	7,236	7,260	0	0	0
25.3	Non-renewable for stated reasons only (b)	14,825	14,875	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	1,199,015	1,203,116	0	2,028,051	1,973,955
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,199,015	1,203,116	0	2,028,051	1,973,955

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF UTAH DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	3,755,213	0	0	0	3,755,213
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	3,755,213	0	0	0	3,755,213
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	621,167	0	0	0	621,167
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	4,001	0	0	0	4,001
12.	Surrender values and withdrawals for life contracts	62,840	0	0	0	62,840
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	688,008	0	0	0	688,008
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	100,000	0	0	0	0	0	0	1	100,000
17.	Incurred during current year	3	210,000	0	0	0	0	0	0	3	210,000
	Settled during current year:										
18.1	By payment in full	2	160,000	0	0	0	0	0	0	2	160,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	2	160,000	0	0	0	0	0	0	2	160,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	2	160,000	0	0	0	0	0	0	2	160,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	150,000	0	0	0	0	0	0	2	150,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	2,594	1,594,900,361	0	(a) 0	0	0	0	0	2,594	1,594,900,361
21.	Issued during year	675	493,496,964	0	0	0	0	0	0	675	493,496,964
22.	Other changes to in force (Net)	(144)	(115,209,121)	0	0	0	0	0	0	(144)	(115,209,121)
23.	In force December 31 of current year	3,125	1,973,188,204	0	(a) 0	0	0	0	0	3,125	1,973,188,204

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	32,495	32,606	0	0	0
25.2	Guaranteed renewable (b)	1,996	2,003	0	0	0
25.3	Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	34,491	34,609	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	34,491	34,609	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF VIRGINIA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	13,141,471	0	0	0	13,141,471
2.	Annuity considerations	2,050	0	0	0	2,050
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	13,143,521	0	0	0	13,143,521
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,669,400	0	0	0	2,669,400
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	54,263	0	0	0	54,263
12.	Surrender values and withdrawals for life contracts	1,192,920	0	0	0	1,192,920
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	3,916,583	0	0	0	3,916,583
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	7	572,483	0	0	0	0	0	0	7	572,483
17. Incurred during current year	15	2,469,875	0	0	0	0	0	0	15	2,469,875
Settled during current year:										
18.1 By payment in full	18	2,688,038	0	0	0	0	0	0	18	2,688,038
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	18	2,688,038	0	0	0	0	0	0	18	2,688,038
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	18	2,688,038	0	0	0	0	0	0	18	2,688,038
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	4	354,320	0	0	0	0	0	0	4	354,320
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	6,292	3,509,850,955	0	(a) 0	0	0	0	0	6,292	3,509,850,955
21. Issued during year	579	427,384,791	0	0	0	0	0	0	579	427,384,791
22. Other changes to in force (Net)	(354)	(203,438,410)	0	0	0	0	0	0	(354)	(203,438,410)
23. In force December 31 of current year	6,517	3,733,797,336	0	(a) 0	0	0	0	0	6,517	3,733,797,336

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	321,125	322,223	0	676,011	627,270
25.2	Guaranteed renewable (b)	11,048	11,086	0	0	0
25.3	Non-renewable for stated reasons only (b)	7,301	7,326	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	339,474	340,635	0	676,011	627,270
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	339,474	340,635	0	676,011	627,270

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN U.S. VIRGIN ISLANDS DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	0	0	0	0	0
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	0	0	0	0	0
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	0	0	0	0	0
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

NONE

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	0	0	0	(a) 0	0	0	0	0	0	0
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	3	2,000,000	0	0	0	0	0	0	3	2,000,000
23. In force December 31 of current year	3	2,000,000	0	(a) 0	0	0	0	0	3	2,000,000

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0	0	0	0
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	0	0	0	0	0

NONE

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF VERMONT DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	1,581,804	0	0	0	1,581,804
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	1,581,804	0	0	0	1,581,804
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	150,000	0	0	0	150,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	3,051	0	0	0	3,051
12.	Surrender values and withdrawals for life contracts	0	0	0	0	0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	153,051	0	0	0	153,051
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	1	150,000	0	0	0	0	0	0	1	150,000
Settled during current year:										
18.1 By payment in full	1	150,000	0	0	0	0	0	0	1	150,000
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	1	150,000	0	0	0	0	0	0	1	150,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	1	150,000	0	0	0	0	0	0	1	150,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	362	204,601,033	0	(a) 0	0	0	0	0	362	204,601,033
21. Issued during year	45	18,496,425	0	0	0	0	0	0	45	18,496,425
22. Other changes to in force (Net)	(10)	(14,500,000)	0	0	0	0	0	0	(10)	(14,500,000)
23. In force December 31 of current year	397	208,597,458	0	(a) 0	0	0	0	0	397	208,597,458

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	5,383	5,401	0	0	0
25.2	Guaranteed renewable (b)	961	964	0	0	0
25.3	Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	6,344	6,365	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	6,344	6,365	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF WASHINGTON DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	7,112,737	0	0	0	7,112,737
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	7,112,737	0	0	0	7,112,737
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,702,823	0	0	0	1,702,823
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	4,702	0	0	0	4,702
12.	Surrender values and withdrawals for life contracts	3,144,486	0	0	0	3,144,486
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	4,852,011	0	0	0	4,852,011
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	2	137,472	0	0	0	0	0	0	2	137,472
17.	Incurred during current year	9	1,702,823	0	0	0	0	0	0	9	1,702,823
	Settled during current year:										
18.1	By payment in full	11	1,840,295	0	0	0	0	0	0	11	1,840,295
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	11	1,840,295	0	0	0	0	0	0	11	1,840,295
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	11	1,840,295	0	0	0	0	0	0	11	1,840,295
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	4,947	2,514,677,560	0	(a) 0	0	0	0	0	4,947	2,514,677,560
21.	Issued during year	492	314,547,401	0	0	0	0	0	0	492	314,547,401
22.	Other changes to in force (Net)	(269)	(119,013,516)	0	0	0	0	0	0	(269)	(119,013,516)
23.	In force December 31 of current year	5,170	2,710,211,445	0	(a) 0	0	0	0	0	5,170	2,710,211,445

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	427,868	429,332	0	1,212,444	1,381,573
25.2	Guaranteed renewable (b)	29,667	29,768	0	12,400	12,507
25.3	Non-renewable for stated reasons only (b)	21,062	21,134	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	478,597	480,234	0	1,224,844	1,394,080
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	478,597	480,234	0	1,224,844	1,394,080

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF WISCONSIN DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	7,594,319	0	0	0	7,594,319
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	7,594,319	0	0	0	7,594,319
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,900,000	0	0	0	2,900,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	141,679	0	0	0	141,679
12.	Surrender values and withdrawals for life contracts	878,056	0	0	0	878,056
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	3,919,735	0	0	0	3,919,735
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	7	350,030	0	0	0	0	0	0	7	350,030
17.	Incurred during current year	10	2,750,000	0	0	0	0	0	0	10	2,750,000
	Settled during current year:										
18.1	By payment in full	9	1,550,000	0	0	0	0	0	0	9	1,550,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	9	1,550,000	0	0	0	0	0	0	9	1,550,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	9	1,550,000	0	0	0	0	0	0	9	1,550,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	8	1,550,030	0	0	0	0	0	0	8	1,550,030
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	6,710	3,048,567,727	0	(a) 0	0	0	0	0	6,710	3,048,567,727
21.	Issued during year	428	266,194,693	0	0	0	0	0	0	428	266,194,693
22.	Other changes to in force (Net)	(381)	(156,341,820)	0	0	0	0	0	0	(381)	(156,341,820)
23.	In force December 31 of current year	6,757	3,158,420,600	0	(a) 0	0	0	0	0	6,757	3,158,420,600

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	321,284	322,383	0	83,915	132,581
25.2	Guaranteed renewable (b)	33,576	33,691	0	18,133	19,036
25.3	Non-renewable for stated reasons only (b)	19,803	19,871	0	20,000	20,000
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	374,663	375,945	0	122,048	171,617
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	374,663	375,945	0	122,048	171,617

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

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DIRECT BUSINESS IN THE STATE OF WEST VIRGINIA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	1,380,628	0	0	0	1,380,628
2.	Annuity considerations	400	0	0	0	400
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	1,381,028	0	0	0	1,381,028
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	546,924	0	0	0	546,924
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	45,860	0	0	0	45,860
12.	Surrender values and withdrawals for life contracts	361,335	0	0	0	361,335
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	954,119	0	0	0	954,119
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	9	398,322	0	0	0	0	0	0	9	398,322
	Settled during current year:										
18.1	By payment in full	9	398,322	0	0	0	0	0	0	9	398,322
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	9	398,322	0	0	0	0	0	0	9	398,322
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	9	398,322	0	0	0	0	0	0	9	398,322
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,300	444,599,553	0	(a) 0	0	0	0	0	1,300	444,599,553
21.	Issued during year	58	31,432,212	0	0	0	0	0	0	58	31,432,212
22.	Other changes to in force (Net)	(93)	(40,748,254)	0	0	0	0	0	0	(93)	(40,748,254)
23.	In force December 31 of current year	1,265	435,283,511	0	(a) 0	0	0	0	0	1,265	435,283,511

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	255,013	255,885	0	355,826	355,693
25.2	Guaranteed renewable (b)	5,647	5,667	0	0	0
25.3	Non-renewable for stated reasons only (b)	1,864	1,870	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	262,524	263,422	0	355,826	355,693
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	262,524	263,422	0	355,826	355,693

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

* 8 9 2 0 6 2 0 1 1 4 3 0 5 1 1 0 0 *

DIRECT BUSINESS IN THE STATE OF WYOMING DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	938,988	0	0	0	938,988
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	938,988	0	0	0	938,988
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	938,338	0	0	0	938,338
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	89,893	0	0	0	89,893
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	1,028,231	0	0	0	1,028,231
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	4	938,338	0	0	0	0	0	0	4	938,338
Settled during current year:										
18.1 By payment in full	3	888,338	0	0	0	0	0	0	3	888,338
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	3	888,338	0	0	0	0	0	0	3	888,338
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	3	888,338	0	0	0	0	0	0	3	888,338
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	50,000	0	0	0	0	0	0	1	50,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	748	286,680,408	0	(a) 0	0	0	0	0	748	286,680,408
21. Issued during year	73	36,622,029	0	0	0	0	0	0	73	36,622,029
22. Other changes to in force (Net)	(52)	(10,605,208)	0	0	0	0	0	0	(52)	(10,605,208)
23. In force December 31 of current year	769	312,697,229	0	(a) 0	0	0	0	0	769	312,697,229

(a) Includes Individual Credit Life Insurance, prior year $.....0 current year $.....0.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year $.....0 current year $.....0.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year $.....0 current year $.....0.

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal Employee Health Benefits Program premium (b)	0	0	0	0	0
24.2	Credit (group and individual)	0	0	0	0	0
24.3	Collectively renewable policies (b)	0	0	0	0	0
24.4	Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
	Other Individual Policies:					
25.1	Non-cancelable (b)	32,146	32,256	0	72,000	71,600
25.2	Guaranteed renewable (b)	1,120	1,124	0	0	0
25.3	Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	33,266	33,380	0	72,000	71,600
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	33,266	33,380	0	72,000	71,600

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

Interest Maintenance Reserve

	1 Amount
1. Reserve as of December 31, prior year	8,738,879
2. Current year's realized pre-tax capital gains/(losses) of $.....9,673,278 transferred into the reserve net of taxes of $.....3,385,647	6,287,631
3. Adjustment for current year's liability gains/(losses) released from the reserve	0
4. Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3)	15,026,510
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)	1,576,743
6. Reserve as of December 31, current year (Line 4 minus Line 5)	13,449,766

Amortization

Year of Amortization	1 Reserve as of December 31, Prior Year	2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3 Adjustment for Current Year's Liability Gains/(Losses) Released from the Reserve	4 Balance Before Reduction for the Current Year's Amortization (Cols. 1 + 2 + 3)
1. 2011	839,316	737,427	0	1,576,743
2. 2012	819,378	1,307,910	0	2,127,289
3. 2013	779,517	1,198,009	0	1,977,526
4. 2014	742,486	964,081	0	1,706,566
5. 2015	692,530	725,455	0	1,417,985
6. 2016	658,948	470,957	0	1,129,905
7. 2017	660,548	310,006	0	970,555
8. 2018	660,904	246,961	0	907,865
9. 2019	634,660	178,873	0	813,533
10. 2020	573,957	110,780	0	684,738
11. 2021	492,857	37,645	0	530,502
12. 2022	408,464	(165)	0	408,299
13. 2023	297,953	(132)	0	297,822
14. 2024	206,280	(98)	0	206,182
15. 2025	156,685	(59)	0	156,626
16. 2026	106,390	(20)	0	106,370
17. 2027	51,098	0	0	51,098
18. 2028	8,857	0	0	8,857
19. 2029	(9,305)	0	0	(9,305)
20. 2030	(14,899)	0	0	(14,899)
21. 2031	(13,272)	0	0	(13,272)
22. 2032	(8,425)	0	0	(8,425)
23. 2033	(5,151)	0	0	(5,151)
24. 2034	(1,401)	0	0	(1,401)
25. 2035	224	0	0	224
26. 2036	97	0	0	97
27. 2037	77	0	0	77
28. 2038	57	0	0	57
29. 2039	35	0	0	35
30. 2040	12	0	0	12
31. 2041 and Later	0	0	0	0
32. Total (Lines 1 to 31)	8,738,879	6,287,631	0	15,026,510

ASSET VALUATION RESERVE

	Default Component			Equity Component			7
	1 Other Than Mortgage Loans	2 Mortgage Loans	3 Total (Cols. 1 + 2)	4 Common Stock	5 Real Estate and Other Invested Assets	6 Total (Cols. 4 + 5)	Total Amount (Cols. 3 + 6)
1. Reserve as of December 31, prior year	3,802,452	4,643,754	8,446,206	727	282,086	282,813	8,729,018
2. Realized capital gains/(losses) net of taxes - General Account	(3,633,451)	(172,015)	(3,805,466)	0	0	0	(3,805,466)
3. Realized capital gains/(losses) net of taxes - Separate Accounts	0	0	0	0	0	0	0
4. Unrealized capital gains/(losses) - net of deferred taxes - General Account	(596,545)	0	(596,545)	120,721	0	120,721	(475,824)
5. Unrealized capital gains/(losses) - net of deferred taxes - Separate Accounts	0	0	0	0	0	0	0
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves	0	0	0	0	0	0	0
7. Basic contribution	3,828,826	1,274,144	5,102,970	0	0	0	5,102,970
8. Accumulated balances (Lines 1 through 5, minus 6 plus 7)	3,401,282	5,745,883	9,147,165	121,448	282,086	403,534	9,550,698
9. Maximum reserve	18,285,191	3,782,615	22,067,806	15,646,300	70,714	15,717,014	37,784,820
10. Reserve objective	12,795,793	2,389,020	15,184,813	15,646,300	70,714	15,717,014	30,901,826
11. 20% of (Line 10 minus Line 8)	1,878,902	(671,373)	1,207,530	3,104,970	(42,274)	3,062,696	4,270,226
12. Balance before transfers (Lines 8 + 11)	5,280,184	5,074,510	10,354,694	3,226,418	239,812	3,466,230	13,820,924
13. Transfers	1,291,896	(1,291,896)	0	169,098	(169,098)	0	XXX
14. Voluntary contribution	0	0	0	0	0	0	0
15. Adjustment down to maximum/up to zero	0	0	0	0	0	0	0
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	6,572,080	3,782,614	10,354,694	3,395,516	70,714	3,466,230	13,820,924

ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

Line Number	NAIC Desig-nation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
		LONG-TERM BONDS										
1		Exempt obligations	13,416,450	XXX	XXX	13,416,450	0.0000	0	0.0000	0	0.0000	0
2	1	Highest quality	1,047,017,110	XXX	XXX	1,047,017,110	0.0004	418,807	0.0023	2,408,139	0.0030	3,141,051
3	2	High quality	780,281,392	XXX	XXX	780,281,392	0.0019	1,482,535	0.0058	4,525,632	0.0090	7,022,533
4	3	Medium quality	110,489,232	XXX	XXX	110,489,232	0.0093	1,027,550	0.0230	2,541,252	0.0340	3,756,634
5	4	Low quality	27,125,912	XXX	XXX	27,125,912	0.0213	577,782	0.0530	1,437,673	0.0750	2,034,443
6	5	Lower quality	7,451,503	XXX	XXX	7,451,503	0.0432	321,905	0.1100	819,665	0.1700	1,266,756
7	6	In or near default	5,313,997	XXX	XXX	5,313,997	0.0000	0	0.2000	1,062,799	0.2000	1,062,799
8		Total unrated multi-class securities acquired by conversion	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
9		Total bonds (sum of Lines 1 through 8) (Page 2, Line 1, Column 3 plus Schedule DL, Part 1, Column 6, Line 6599999)	1,991,095,596	XXX	XXX	1,991,095,596	XXX	3,828,578	XXX	12,795,162	XXX	18,284,216
		PREFERRED STOCKS										
10	1	Highest quality	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
11	2	High quality	0	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
12	3	Medium quality	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
13	4	Low quality	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
14	5	Lower quality	5,735	XXX	XXX	5,735	0.0432	248	0.1100	631	0.1700	975
15	6	In or near default	0	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
16		Affiliated life with AVR	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
17		Total preferred stocks (sum of Lines 10 through 16) (Page 3, Line 2.1, Column 3 plus Schedule DL, Part 1, Column 6, Line 7099999)	5,735	XXX	XXX	5,735	XXX	248	XXX	631	XXX	975
		SHORT-TERM BONDS										
18		Exempt obligations	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
19	1	Highest quality	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
20	2	High quality	0	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
21	3	Medium quality	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
22	4	Low quality	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
23	5	Lower quality	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
24	6	In or near default	0	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
25		Total short-term bonds (sum of Lines 18 thru 24)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0

ASSET VALUATION RESERVE (continued)

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

Line Number	NAIC Desig-nation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution 5 Factor	Basic Contribution 6 Amount (Cols. 4 x 5)	Reserve Objective 7 Factor	Reserve Objective 8 Amount (Cols. 4 x 7)	Maximum Reserve 9 Factor	Maximum Reserve 10 Amount (Cols. 4 x 9)
		DERIVATIVE INSTRUMENTS										
26		Exchange-traded	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
27	1	Highest quality	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
28	2	High quality	0	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
29	3	Medium quality	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
30	4	Low quality	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
31	5	Lower quality	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
32	6	In or near default	0	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
33		Total derivative instruments	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
34		TOTAL (Lines 9 + 17 + 25 + 33)	1,991,101,331	XXX	XXX	1,991,101,331	XXX	3,828,826	XXX	12,795,793	XXX	18,285,191
		MORTGAGE LOANS										
		In good standing:										
35		Farm mortgages	0	0	XXX	0	(a) 0.0063	0	(a) 0.0120	0	(a) 0.0190	0
36		Residential mortgages-insured or guaranteed	0	0	XXX	0	0.0003	0	0.0006	0	0.0010	0
37		Residential mortgages-all other	0	0	XXX	0	0.0013	0	0.0030	0	0.0040	0
38		Commercial mortgages-insured or guaranteed	0	0	XXX	0	0.0003	0	0.0006	0	0.0010	0
39		Commercial mortgages-all other	398,170,002	0	XXX	398,170,002	(a) 0.0032	1,274,144	(a) 0.0060	2,389,020	(a) 0.0095	3,782,615
40		In good standing with restructured terms	0	0	XXX	0	(b) 0.0179	0	(b) 0.0397	0	(b) 0.0640	0
		Overdue, not in process:										
41		Farm mortgages	0	0	XXX	0	0.0420	0	0.0760	0	0.1200	0
42		Residential mortgages-insured or guaranteed	0	0	XXX	0	0.0005	0	0.0012	0	0.0020	0
43		Residential mortgages-all other	0	0	XXX	0	0.0025	0	0.0058	0	0.0090	0
44		Commercial mortgages-insured or guaranteed	0	0	XXX	0	0.0005	0	0.0012	0	0.0020	0
45		Commercial mortgages-all other	0	0	XXX	0	0.0420	0	0.0760	0	0.1200	0
		In process of foreclosure:										
46		Farm mortgages	0	0	XXX	0	0.0000	0	0.1700	0	0.1700	0
47		Residential mortgages-insured or guaranteed	0	0	XXX	0	0.0000	0	0.0040	0	0.0040	0
48		Residential mortgages-all other	0	0	XXX	0	0.0000	0	0.0130	0	0.0130	0
49		Commercial mortgages-insured or guaranteed	0	0	XXX	0	0.0000	0	0.0040	0	0.0040	0
50		Commercial mortgages-all other	0	0	XXX	0	0.0000	0	0.1700	0	0.1700	0
51		Total Schedule B mortgages (sum of Lines 35 through 50) (Page 2, Line 3, Column 3 plus Schedule DL, Part 1, Column 6, Line 8799999)	398,170,002	0	XXX	398,170,002	XXX	1,274,144	XXX	2,389,020	XXX	3,782,615
52		Schedule DA mortgages	0	0	XXX	0	(c) 0.0000	0	(c) 0.0000	0	(c) 0.0000	0
53		Total mortgage loans on real estate (Lines 51 + 52)	398,170,002	0	XXX	398,170,002	XXX	1,274,144	XXX	2,389,020	XXX	3,782,615

(a) Times the company's experience adjustment factor (EAF).

(b) Column 9 is the greater of 6.4% without any EAF adjustments or a company's EAF adjusted In Good Standing (IGS) factor plus 150 basis points. Columns 5 and 7 are 28% and 62% respectively of Column 9.

(c) Determined using the same factors and breakdowns used for directly owned mortgage loans.

ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Equity and Other Invested Asset Component

Line Number	NAIC Desig-nation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution 5 Factor	Basic Contribution 6 Amount (Cols. 4 x 5)	Reserve Objective 7 Factor	Reserve Objective 8 Amount (Cols. 4 x 7)	Maximum Reserve 9 Factor	Maximum Reserve 10 Amount (Cols. 4 x 9)
		COMMON STOCK										
1		Unaffiliated public	190,304	XXX	XXX	190,304	0.0000	0	(d) 0.2000	38,061	(d) 0.2000	38,061
2		Unaffiliated private	97,551,493	XXX	XXX	97,551,493	0.0000	0	0.1600	15,608,239	0.1600	15,608,239
3		Federal Home Loan Bank	0	XXX	XXX	0	0.0000	0	0.0050	0	0.0080	0
4		Affiliated life with AVR	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
		Affiliated Investment Subsidiary:										
5		Fixed income exempt obligations	0	0	0	0	XXX	0	XXX	0	XXX	0
6		Fixed income highest quality	0	0	0	0	XXX	0	XXX	0	XXX	0
7		Fixed income high quality	0	0	0	0	XXX	0	XXX	0	XXX	0
8		Fixed income medium quality	0	0	0	0	XXX	0	XXX	0	XXX	0
9		Fixed income low quality	0	0	0	0	XXX	0	XXX	0	XXX	0
10		Fixed income lower quality	0	0	0	0	XXX	0	XXX	0	XXX	0
11		Fixed income in or near default	0	0	0	0	XXX	0	XXX	0	XXX	0
12		Unaffiliated common stock public	0	0	0	0	0.0000	0	(d) 0.0000	0	(d) 0.0000	0
13		Unaffiliated common stock private	0	0	0	0	0.0000	0	0.1600	0	0.1600	0
14		Mortgage loans	0	0	0	0	(c) 0.0000	0	(c) 0.0000	0	(c) 0.0000	0
15		Real estate	0	0	0	0	(e) 0.0000	0	(e) 0.0000	0	(e) 0.0000	0
16		Affiliated - certain other (see SVO Purposes and Procedures manual)	0	XXX	XXX	0	0.0000	0	0.1300	0	0.1300	0
17		Affiliated - all other	0	XXX	XXX	0	0.0000	0	0.1600	0	0.1600	0
18		Total common stock (sum of Lines 1 through 17) (Page 2, Line 2.2, Column 3 plus Schedule DL, Column 6, Line 7599999)	97,741,797	0	0	97,741,797	XXX	0	XXX	15,646,300	XXX	15,646,300
		REAL ESTATE										
19		Home office property (General Account only)	0	0	0	0	0.0000	0	0.0750	0	0.0750	0
20		Investment properties	0	0	0	0	0.0000	0	0.0750	0	0.0750	0
21		Properties acquired in satisfaction of debt	0	0	0	0	0.0000	0	0.1100	0	0.1100	0
22		Total real estate (sum of Lines 19 through 21)	0	0	0	0	XXX	0	XXX	0	XXX	0
		OTHER INVESTED ASSETS										
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS										
23		Exempt obligations	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
24	1	Highest quality	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
25	2	High quality	0	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
26	3	Medium quality	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
27	4	Low quality	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
28	5	Lower quality	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
29	6	In or near default	0	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
30		Total with bond characteristics (sum of Lines 23 through 29)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0

ASSET VALUATION RESERVE (continued)

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Equity and Other Invested Asset Component

Line Number	NAIC Desig-nation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution 5 Factor	Basic Contribution 6 Amount (Cols. 4 x 5)	Reserve Objective 7 Factor	Reserve Objective 8 Amount (Cols. 4 x 7)	Maximum Reserve 9 Factor	Maximum Reserve 10 Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS										
31	1	Highest quality	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
32	2	High quality	0	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
33	3	Medium quality	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
34	4	Low quality	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
35	5	Lower quality	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
36	6	In or near default	0	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
37		Affiliated life with AVR	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
38		Total with preferred stock characteristics (sum of Lines 31 through 37)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS										
		In Good Standing:										
39		Farm mortgages	0	0	XXX	0	(a) 0.0000	0	(a) 0.0000	0	(a) 0.0000	0
40		Residential mortgages-insured or guaranteed	0	0	XXX	0	0.0003	0	0.0006	0	0.0010	0
41		Residential mortgages-all other	0	XXX	XXX	0	0.0013	0	0.0030	0	0.0040	0
42		Commercial mortgages-insured or guaranteed	0	0	XXX	0	0.0003	0	0.0006	0	0.0010	0
43		Commercial mortgages-all other	0	0	XXX	0	(a) 0.0000	0	(a) 0.0000	0	(a) 0.0000	0
44		In good standing with restructured terms	0	0	XXX	0	(b) 0.0000	0	(b) 0.0000	0	(b) 0.0000	0
		Overdue, Not in Process:										
45		Farm mortgages	0	0	XXX	0	0.0420	0	0.0760	0	0.1200	0
46		Residential mortgages-insured or guaranteed	0	0	XXX	0	0.0005	0	0.0012	0	0.0020	0
47		Residential mortgages-all other	0	0	XXX	0	0.0025	0	0.0058	0	0.0090	0
48		Commercial mortgages-insured or guaranteed	0	0	XXX	0	0.0005	0	0.0012	0	0.0020	0
49		Commercial mortgages-all other	0	0	XXX	0	0.0420	0	0.0760	0	0.1200	0
		In Process of foreclosure:										
50		Farm mortgages	0	0	XXX	0	0.0000	0	0.1700	0	0.1700	0
51		Residential mortgages-insured or guaranteed	0	0	XXX	0	0.0000	0	0.0040	0	0.0040	0
52		Residential mortgages-all other	0	0	XXX	0	0.0000	0	0.0130	0	0.0130	0
53		Commercial mortgages-insured or guaranteed	0	0	XXX	0	0.0000	0	0.0040	0	0.0040	0
54		Commercial mortgages-all other	0	0	XXX	0	0.0000	0	0.1700	0	0.1700	0
55		Total with mortgage loan characteristics (sum of Lines 39 through 54)	0	0	XXX	0	XXX	0	XXX	0	XXX	0

NONE

ASSET VALUATION RESERVE (continued)

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Equity and Other Invested Asset Component

Line Number	NAIC Desig-nation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK										
56		Unaffiliated public	0	XXX	XXX	0	0.0000	0	(d) 0.0000	0	(d) 0.0000	0
57		Unaffiliated private	441,962	XXX	XXX	441,962	0.0000	0	0.1600	70,714	0.1600	70,714
58		Affiliated life with AVR	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
59		Affiliated certain other (see SVO Purposes and Procedures manual)	0	XXX	XXX	0	0.0000	0	0.1300	0	0.1300	0
60		Affiliated other - all other	0	XXX	XXX	0	0.0000	0	0.1600	0	0.1600	0
61		Total with common stock characteristics (sum of Lines 56 through 60)	441,962	XXX	XXX	441,962	XXX	0	XXX	70,714	XXX	70,714
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE										
62		Home office property (general account only)	0	0	0	0	0.0000	0	0.0750	0	0.0750	0
63		Investment properties	0	0	0	0	0.0000	0	0.0750	0	0.0750	0
64		Properties acquired in satisfaction of debt	0	0	0	0	0.0000	0	0.1100	0	0.1100	0
65		Total with real estate characteristics (Lines 62 through 64)	0	0	0	0	XXX	0	XXX	0	XXX	0
		LOW INCOME HOUSING TAX CREDIT INVESTMENTS										
66		Guaranteed federal low income housing tax credit	0	0	0	0	0.0003	0	0.0006	0	0.0010	0
67		Non-guaranteed federal low income housing tax credit	0	0	0	0	0.0063	0	0.0120	0	0.0190	0
68		State low income housing tax credit	0	0	0	0	0.0273	0	0.0600	0	0.0975	0
69		All other low income housing tax credit	0	0	0	0	0.0273	0	0.0600	0	0.0975	0
70		Total low income housing tax credit (Lines 66 through 69)	0	0	0	0	XXX	0	XXX	0	XXX	0
		ALL OTHER INVESTMENTS										
71		Other invested assets - Schedule BA	0	XXX	0	0	0.0000	0	0.1300	0	0.1300	0
72		Other short-term invested assets - Schedule DA	0	XXX	0	0	0.0000	0	0.1300	0	0.1300	0
73		Total all other (sum of Lines 71 + 72)	0	XXX	0	0	XXX	0	XXX	0	XXX	0
74		Total other invested assets - Schedule BA & DA (Sum of Lines 30, 38, 55, 61, 65, 70 and 73)	441,962	0	0	441,962	XXX	0	XXX	70,714	XXX	70,714

(a) Times the company's experience adjustment factor (EAF).

(b) Column 9 is the greater of 6.4% without any EAF adjustments or a company's EAF adjusted In Good Standing (IGS) factor plus 150 basis points. Columns 5 and 7 are 28% and 62% respectively of Column 9.

(c) Determined using the same factors and breakdowns used for directly owned mortgage loans.

(d) Times the company's weighted average portfolio beta (Minimum .10, Maximum .20).

(e) Determined using same factors and breakdowns used for directly owned real estate.

ASSET VALUATION RESERVE (continued)

Basic Contributions, Reserve Objective and Maximum Reserve Calculations

Replications (Synthetic) Assets

1 RSAT Number	2 Type	3 CUSIP	4 Description of Asset(s)	5 NAIC Designation or Other Description of Asset	6 Value of Asset	7 AVR Basic Contribution	8 AVR Reserve Objective	9 AVR Maximum Reserve

NONE

SCHEDULE F

Showing all claims for death losses and all other contract claims resisted or compromised during the year, and all claims for death losses and all other contract claims resisted December 31 of current year

1 Contract Numbers	2 Claim Numbers	3 State of Residence of Claimant	4 Year of Claim for Death or Disability	5 Amount Claimed	6 Amount Paid During the Year	7 Amount Resisted Dec. 31 of Current Year	8 Why Compromised or Resisted
CLAIMS DISPOSED OF DURING CURRENT YEAR							
Death Claims - Ordinary							
6732997	5560	OH	2008	150,000	173,959	0	Policy disposed of due to a condition precedent to policy taking effect was never met.
C6917743	6522	ID	2010	2,000,000	0	0	Policy disposed of due to material misrepresentation/overinsurance
0199999. Death Claims - Ordinary				2,150,000	173,959	0	XXX
0599999. Subtotal - Disposed Death Claims				2,150,000	173,959	0	XXX
2699999. Subtotal - Claims Disposed of During Current Year				2,150,000	173,959	0	XXX
CLAIMS RESISTED DURING CURRENT YEAR							
Death Claims - Ordinary							
6858147	6386	SC	2010	125,000	3,432	0	Policy benefit resisted due to suicide within the first 2 policy years; benefit paid was a refund of all premiums paid.
2799999. Death Claims - Ordinary				125,000	3,432	0	XXX
3199999. Subtotal - Resisted Death Claims				125,000	3,432	0	XXX
5299999. Subtotal - Claims Resisted of During Current Year				125,000	3,432	0	XXX
5399999. Totals				2,275,000	177,391	0	XXX

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

		Total		Group Accident and Health		Credit Accident and Health (Group and Individual)		Collectively Renewable		Other Individual Contracts									
										Non-Cancelable		Guaranteed Renewable		Non-Renewable for Stated Reasons Only		Other Accident Only		All Other	
		1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %	15 Amount	16 %	17 Amount	18 %
PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS																			
1.	Premiums written	5,128,720	XXX	0	XXX	0	XXX	0	XXX	4,341,383	XXX	669,934	XXX	117,403	XXX	0	XXX	0	XXX
2.	Premiums earned	5,319,106	XXX	0	XXX	0	XXX	0	XXX	4,512,235	XXX	681,856	XXX	125,015	XXX	0	XXX	0	XXX
3.	Incurred claims	2,227,664	41.9	0	0.0	0	0.0	0	0.0	1,849,093	41.0	352,198	51.7	26,373	21.1	0	0.0	0	0.0
4.	Cost containment expenses	187,390	3.5	0	0.0	0	0.0	0	0.0	181,719	4.0	5,208	0.8	463	0.4	0	0.0	0	0.0
5.	Incurred claims and cost containment expenses (Lines 3 and 4)	2,415,054	45.4	0	0.0	0	0.0	0	0.0	2,030,812	45.0	357,406	52.4	26,836	21.5	0	0.0	0	0.0
6	Increase in contract reserves	(57,560)	(1.1)	0	0.0	0	0.0	0	0.0	56,299	1.2	(143,969)	(21.1)	30,110	24.1	0	0.0	0	0.0
7	Commissions (a)	(1,013,107)	(19.0)	0	0.0	0	0.0	0	0.0	(989,354)	(21.9)	22,229	3.3	(45,982)	(36.8)	0	0.0	0	0.0
8	Other general insurance expenses	1,392,150	26.2	0	0.0	0	0.0	0	0.0	1,279,043	28.3	69,942	10.3	43,165	34.5	0	0.0	0	0.0
9	Taxes, licenses and fees	118,116	2.2	0	0.0	0	0.0	0	0.0	108,520	2.4	5,934	0.9	3,662	2.9	0	0.0	0	0.0
10	Total other expenses incurred	497,159	9.3	0	0.0	0	0.0	0	0.0	398,209	8.8	98,105	14.4	845	0.7	0	0.0	0	0.0
11.	Aggregate write-ins for deductions	2,583,436	48.6	0	0.0	0	0.0	0	0.0	2,361,551	52.3	221,885	32.5	0	0.0	0	0.0	0	0.0
12.	Gain from underwriting before dividends or refunds	(118,983)	(2.2)	0	0.0	0	0.0	0	0.0	(334,636)	(7.4)	148,429	21.8	67,224	53.8	0	0.0	0	0.0
13.	Dividends or refunds	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
14.	Gain from underwriting after dividends or refunds	(118,983)	(2.2)	0	0.0	0	0.0	0	0.0	(334,636)	(7.4)	148,429	21.8	67,224	53.8	0	0.0	0	0.0
DETAILS OF WRITE-INS																			
1101.	Surrender and Return of Premium Benefits	2,583,436	48.6	0	0.0	0	0.0	0	0.0	2,361,551	52.3	221,885	32.5	0	0.0	0	0.0	0	0.0
1102.			0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1103.			0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1199.	Total (Lines 1101 thru 1103 plus 1198) (Line 11 above)	2,583,436	48.6	0	0.0	0	0.0	0	0.0	2,361,551	52.3	221,885	32.5	0	0.0	0	0.0	0	0.0

(a) Includes $.....0 reported as 'Contract, membership and other fees retained by agents.'

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (continued)

	1	2	3	4	Other Individual Contracts				
					5	6	7	8	9
	Total	Group Accident and Health	Credit Accident and Health (Group and Individual)	Collectively Renewable	Non-Cancelable	Guaranteed Renewable	Non-Renewable for Stated Reasons Only	Other Accident Only	All Other
PART 2 - RESERVES AND LIABILITIES									
A. Premium Reserves:									
1. Unearned premiums	(1,175,906)	0	0	0	(1,181,865)	46,475	(40,516)	0	0
2. Advance premiums	127,923	0	0	0	119,806	7,448	669	0	0
3. Reserve for rate credits	0	0	0	0	0	0	0	0	0
4. Total premium reserves, current year	(1,047,983)	0	0	0	(1,062,059)	53,923	(39,847)	0	0
5. Total premium reserves, prior year	(857,597)	0	0	0	(891,207)	65,845	(32,235)	0	0
6. Increase in total premium reserves	(190,386)	0	0	0	(170,852)	(11,922)	(7,612)	0	0
B. Contract Reserves:									
1. Additional reserves (a)	26,981,158	0	0	0	23,664,915	3,052,788	263,455	0	0
2. Reserve for future contingent benefits	0	0	0	0	0	0	0	0	0
3. Total contract reserves, current year	26,981,158	0	0	0	23,664,915	3,052,788	263,455	0	0
4. Total contract reserves, prior year	27,038,718	0	0	0	23,608,616	3,196,757	233,345	0	0
5. Increase in contract reserves	(57,560)	0	0	0	56,299	(143,969)	30,110	0	0
C. Claim Reserves and Liabilities:									
1. Total current year	21,297,009	0	0	0	20,556,351	644,467	96,191	0	0
2. Total prior year	22,315,342	0	0	0	21,746,666	496,458	72,218	0	0
3. Increase	(1,018,333)	0	0	0	(1,190,315)	148,009	23,973	0	0
PART 3 - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES									
1. Claims Paid During the Year:									
1.1 On claims incurred prior to current year	3,178,324	0	0	0	2,996,243	179,681	2,400	0	0
1.2 On claims incurred during current year	67,673	0	0	0	43,165	24,508	0	0	0
2. Claim Reserves and Liabilities, December 31, Current Year:									
2.1 On claims incurred prior to current year	19,692,740	0	0	0	19,461,438	179,588	51,714	0	0
2.2 On claims incurred during current year	1,604,269	0	0	0	1,094,913	464,879	44,477	0	0
3. Test:									
3.1 Lines 1.1 and 2.1	22,871,064	0	0	0	22,457,681	359,269	54,114	0	0
3.2 Claim reserves and liabilities, December 31, prior year	22,315,342	0	0	0	21,746,666	496,458	72,218	0	0
3.3 Line 3.1 minus Line 3.2	555,722	0	0	0	711,015	(137,189)	(18,104)	0	0
PART 4 - REINSURANCE									
A. Reinsurance Assumed:									
1. Premiums written	894,031	0	0	0	793,945	98,266	1,820	0	0
2. Premiums earned	907,628	0	0	0	806,512	99,296	1,820	0	0
3. Incurred claims	1,027,343	0	0	0	904,848	122,495	0	0	0
4. Commissions	114,157	0	0	0	101,633	12,524	0	0	0
B. Reinsurance Ceded:									
1. Premiums written	13,094,412	0	0	0	12,373,734	298,949	421,729	0	0
2. Premiums earned	13,003,865	0	0	0	12,285,507	300,121	418,237	0	0
3. Incurred claims	12,051,711	0	0	0	11,769,539	166,945	115,227	0	0
4. Commissions	2,121,226	0	0	0	1,942,279	57,191	121,756	0	0

(a) Includes $.....0 premium deficiency reserve.

SCHEDULE H - PART 5 - HEALTH CLAIMS

		1 Medical	2 Dental	3 Other	4 Total
A.	Direct:				
1.	Incurred claims	0	0	13,252,032	13,252,032
2.	Beginning claim reserves and liabilities	0	0	175,094,111	175,094,111
3.	Ending claim reserves and liabilities	0	0	167,194,609	167,194,609
4.	Claims paid	0	0	21,151,534	21,151,534
B.	Assumed Reinsurance:				
5.	Incurred claims	0	0	1,027,343	1,027,343
6.	Beginning claim reserves and liabilities	0	0	9,144,572	9,144,572
7.	Ending claim reserves and liabilities	0	0	8,588,866	8,588,866
8.	Claims paid	0	0	1,583,049	1,583,049
C.	Ceded Reinsurance:				
9.	Incurred claims	0	0	12,051,711	12,051,711
10.	Beginning claim reserves and liabilities	0	0	165,299,987	165,299,987
11.	Ending claim reserves and liabilities	0	0	157,239,334	157,239,334
12.	Claims paid	0	0	20,112,364	20,112,364
D.	Net:				
13.	Incurred claims	0	0	2,227,664	2,227,664
14.	Beginning claim reserves and liabilities	0	0	18,938,696	18,938,696
15.	Ending claim reserves and liabilities	0	0	18,544,141	18,544,141
16.	Claims paid	0	0	2,622,219	2,622,219
E.	Net Incurred Claims and Cost Containment Expenses:				
17.	Incurred claims and cost containment expenses	0	0	2,415,054	2,415,054
18.	Beginning reserves and liabilities	0	0	18,941,471	18,941,471
19.	Ending reserves and liabilities	0	0	18,547,159	18,547,159
20.	Paid claims and cost containment expenses	0	0	2,809,366	2,809,366

SCHEDULE S - PART 1 - SECTION 1

Reinsurance Assumed Life Insurance, Annuities, Deposit Funds and Other Liabilities
Without Life or Disability Contingencies, and Related Benefits Listed by Reinsured Company as of December 31, Current Year

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Amount of In Force at End of Year	8 Reserve	9 Premiums	10 Reinsurance Payable on Paid and Unpaid Losses	11 Modified Coinsurance Reserve	12 Funds Withheld Under Coinsurance
General Account - Affiliates - U.S. Affiliates											
67172	31-0397080	10/04/2006	Ohio National Life Insurance Company	OH	YRT/I	0	0	(18,248)	0	0	0
67172	31-0397080	10/01/2009	Ohio National Life Insurance Company	OH	YRT/I	0	0	(6,751)	0	0	0
0199999.	Total - General Account - U.S. Affiliates					0	0	(24,999)	0	0	0
0399999.	Total - General Account - Affiliates					0	0	(24,999)	0	0	0
0799999.	Total - General Account					0	0	(24,999)	0	0	0
1599999.	Total U.S.					0	0	(24,999)	0	0	0
1799999.	Total					0	0	(24,999)	0	0	0

SCHEDULE S - PART 1 - SECTION 2

Reinsurance Assumed Accident and Health Insurance Listed by Reinsured Company as of December 31, Current Year

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Premiums	8 Unearned Premiums	9 Reserve Liability Other Than for Unearned Premiums	10 Reinsurance Payable on Paid and Unpaid Losses	11 Modified Coinsurance Reserve	12 Funds Withheld Under Coinsurance
Non-Affiliates - Non-U.S. Non-Affiliates											
61301	47-0098400	05/01/1985	Ameritas Life Insurance Corporation	NE	CO/I	277,376	20,024	4,018,596	13,620	0	0
64017	75-0300900	11/23/1987	Conseco Variable Insurance Company	TX	CO/I	435,117	49,413	5,282,773	84,914	0	0
57320	47-0339250	09/09/1990	Woodmen of the World	NE	CO/I	191,267	6,237	2,242,933	3,938	0	0
0599999.	Total - Non-Affiliates - Non-U.S. Non-Affiliates					903,760	75,674	11,544,302	102,472	0	0
0699999.	Total - Non-Affiliates					903,760	75,674	11,544,302	102,472	0	0
0899999.	Total Non-U.S.					903,760	75,674	11,544,302	102,472	0	0
0999999.	Total					903,760	75,674	11,544,302	102,472	0	0

SCHEDULE S - PART 2

Reinsurance Recoverable on Paid and Unpaid Losses Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 Unpaid Losses
Life and Annuity - Affiliates - U.S. Affiliates						
13575	26-3791519	12/31/2008	Montgomery Re	VT	700,000	9,859,365
13575	26-3791519	06/30/2009	Montgomery Re	VT	1,000,000	0
13575	26-3791519	05/01/2011	Montgomery Re	VT	3,500,000	2,203,640
0199999	Total - Life and Annuity Affiliates - U.S. Affiliates				5,200,000	12,063,005
0399999	Total - Life and Annuity Affiliates				5,200,000	12,063,005
Life and Annuity - Non-Affiliates - U.S. Non-Affiliates						
90611	41-1366075	04/15/1999	Allianz Life Insurance Co. of North Amer	MN	136,248	0
90611	41-1366075	07/31/2001	Allianz Life Insurance Co. of North Amer	MN	18,208	0
90611	41-1366075	07/31/2001	Allianz Life Insurance Co. of North Amer	MN	52,511	0
90611	41-1366075	04/01/2003	Allianz Life Insurance Co. of North Amer	MN	0	900,025
90611	41-1366075	04/01/2003	Allianz Life Insurance Co. of North Amer	MN	36,000	36,000
39845	48-0921045	09/01/1967	Employer's Reassurance Corporation	KS	7,343	2,170
86258	13-2572994	04/01/2004	General & Cologne Life Re of America	CT	19,500	0
97071	13-3126819	10/10/2009	Generali USA Life Reassurance Company	MO	0	361,131
65676	35-0472300	06/01/1998	The Lincoln National Life Insurance Comp	IN	0	40,000
65676	35-0472300	04/15/1999	The Lincoln National Life Insurance Comp	IN	136,350	0
65676	35-0472300	03/15/2000	The Lincoln National Life Insurance Comp	IN	0	160,080
65676	35-0472300	07/31/2001	The Lincoln National Life Insurance Comp	IN	17,258	0
65676	35-0472300	07/31/2001	The Lincoln National Life Insurance Comp	IN	52,479	0
66346	58-0828824	06/01/1998	Munich American Reassurance Company	GA	0	40,000
66346	58-0828824	04/15/1999	Munich American Reassurance Company	GA	136,248	0
66346	58-0828824	03/15/2000	Munich American Reassurance Company	GA	0	159,960
66346	58-0828824	07/31/2001	Munich American Reassurance Company	GA	24,852	0
66346	58-0828824	07/31/2001	Munich American Reassurance Company	GA	105,020	0
66346	58-0828824	04/01/2003	Munich American Reassurance Company	GA	0	900,025
66346	58-0828824	04/01/2003	Munich American Reassurance Company	GA	126,000	126,000
66346	58-0828824	04/01/2004	Munich American Reassurance Company	GA	19,500	0
66346	58-0828824	04/01/2004	Munich American Reassurance Company	GA	63,000	916,250
66346	58-0828824	01/19/2005	Munich American Reassurance Company	GA	225,000	0
66346	58-0828824	09/01/2005	Munich American Reassurance Company	GA	0	297,000
66346	58-0828824	01/01/2006	Munich American Reassurance Company	GA	78,750	0
66346	58-0828824	10/01/2007	Munich American Reassurance Company	GA	145,522	0
66346	58-0828824	12/31/2008	Munich American Reassurance Company	GA	1,000,000	300,000
66346	58-0828824	10/10/2009	Munich American Reassurance Company	GA	0	423,631
66346	58-0828824	04/01/2011	Munich American Reassurance Company	GA	300,000	593,589
93572	43-1235868	01/01/1987	RGA Reinsurance Company	MO	0	42,400
93572	43-1235868	01/01/1994	RGA Reinsurance Company	MO	0	4,855
93572	43-1235868	06/01/1998	RGA Reinsurance Company	MO	0	80,000
93572	43-1235868	04/15/1999	RGA Reinsurance Company	MO	204,423	0
93572	43-1235868	03/15/2000	RGA Reinsurance Company	MO	0	240,000
93572	43-1235868	07/31/2001	RGA Reinsurance Company	MO	27,319	0
93572	43-1235868	07/31/2001	RGA Reinsurance Company	MO	52,479	0
93572	43-1235868	04/01/2003	RGA Reinsurance Company	MO	0	900,025
93572	43-1235868	04/01/2004	RGA Reinsurance Company	MO	19,500	0
93572	43-1235868	07/01/2008	RGA Reinsurance Company	MO	17,118	0
93572	43-1235868	10/10/2009	RGA Reinsurance Company	MO	0	361,131
68713	84-0499703	01/01/1994	Security Life of Denver Insurance Co	CO	0	4,855
68713	84-0499703	06/01/1998	Security Life of Denver Insurance Co	CO	0	80,000
68713	84-0499703	04/15/1999	Security Life of Denver Insurance Co	CO	204,423	0
68713	84-0499703	03/15/2000	Security Life of Denver Insurance Co	CO	0	240,000
68713	84-0499703	07/31/2001	Security Life of Denver Insurance Co	CO	35,355	0
68713	84-0499703	07/31/2001	Security Life of Denver Insurance Co	CO	52,511	0
68713	84-0499703	05/01/2002	Security Life of Denver Insurance Co	CO	142,052	0
68713	84-0499703	04/01/2003	Security Life of Denver Insurance Co	CO	0	900,025
68713	84-0499703	04/01/2003	Security Life of Denver Insurance Co	CO	18,000	18,000
68713	84-0499703	04/01/2004	Security Life of Denver Insurance Co	CO	28,500	249,750
82627	06-0839705	06/01/1984	Swiss Re Life & Health America, Inc	CT	0	1,111,791
82627	06-0839705	01/01/1987	Swiss Re Life & Health America, Inc	CT	0	60,532
82627	06-0839705	01/01/1994	Swiss Re Life & Health America, Inc	CT	0	14,565
82627	06-0839705	06/01/1998	Swiss Re Life & Health America, Inc	CT	0	160,000
82627	06-0839705	04/15/1999	Swiss Re Life & Health America, Inc	CT	204,423	0
82627	06-0839705	03/15/2000	Swiss Re Life & Health America, Inc	CT	0	240,000
82627	06-0839705	07/31/2001	Swiss Re Life & Health America, Inc	CT	25,871	0
82627	06-0839705	07/01/2011	Swiss Re Life & Health America, Inc	CT	675,000	593,589
87572	23-2038295	07/31/2001	Scottish Re USA Inc	NC	8,036	0
87572	23-2038295	09/01/2005	Scottish Re USA Inc	NC	0	135,000
87572	23-2038295	01/01/2006	Scottish Re USA Inc	NC	78,750	0
86231	39-0989781	01/01/2006	Transamerica Life Insurance Company	NC	94,500	0
86231	39-0989781	10/01/2007	Transamerica Life Insurance Company	NC	145,522	0
80586	13-6150240	10/10/2009	XL Re Life America, Inc	CT	0	298,631
0499999	Total - Life and Annuity Non-Affiliates - U.S. Non-Affiliates				4,733,571	10,991,010

SCHEDULE S - PART 2

Reinsurance Recoverable on Paid and Unpaid Losses Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 Unpaid Losses
Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates						
80659	38-0397420	04/01/2004	The Canada Life Assurance Company	CA	0	166,500
80659	38-0397420	09/01/2005	The Canada Life Assurance Company	CA	0	108,000
0599999.	Total - Life and Annuity Non-Affiliates - Non-U.S. Non-Affiliates				0	274,500
0699999.	Total - Life and Annuity Non-Affiliates				4,733,571	11,265,510
0799999.	Total - Life and Annuity				9,933,571	23,328,515
Accident and Health - Affiliates - U.S. Affiliates						
67172	31-0397080	08/03/1979	The Ohio National Life Insurance Company	OH	3,785	641,660
0899999.	Total - Accident and Health Affiliates - U.S. Affiliates				3,785	641,660
1099999.	Total - Accident and Health Affiliates				3,785	641,660
Accident and Health - Non-Affiliates - U.S. Non-Affiliates						
39845	48-0921045	09/01/1967	Employer's Reassurance Corporation	KS	9,536	893
86258	13-2572994	01/01/1999	General Re Life Corporation	CT	9,756	58,284
66346	58-0828824	01/01/1999	Munich American Reassurance Company	GA	11,671	58,497
82627	06-0839705	02/01/1981	Swiss Re Life & Health America, Inc.	CT	2,475,369	1,401,757
67598	04-1768571	11/01/1988	UnumProvident Corporation	MA	242,750	212,515
1199999	Total - Accident and Health Non-Affiliates - U.S. Non-Affiliates				2,749,082	1,731,946
1399999.	Total - Accident and Health Non-Affiliates				2,749,082	1,731,946
1499999.	Total - Accident and Health				2,752,867	2,373,606
1599999.	Total U.S.				12,686,438	25,427,621
1699999.	Total Non-U.S.				0	274,500
1799999.	Total				12,686,438	25,702,121

SCHEDULE S - PART 3 - SECTION 1

Reinsurance Ceded Life Insurance, Annuities, Deposit Funds and Other Liabilities
Without Life or Disability Contingencies, and Related Benefits Listed by Reinsuring Company as of December 31, Current Year

1	2	3	4	5	6	7	Reserve Credit Taken		10	Outstanding Surplus Relief		13	14
							8	9		11	12		
NAIC Company Code	Federal ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
General Account - Authorized - Affiliates - U.S. Affiliates													
67172	31-0397080	10/04/2006	Ohio National Life Insurance Company	OH	CO/I	310,873,603	131,360,463	131,755,989	0	0	0	0	0
67172	31-0397080	10/01/2009	Ohio National Life Insurance Company	OH	CO/I	333,829,494	107,500,118	51,219,674	54,065,130	0	0	0	0
0199999.	Total - General Account - Authorized - Affiliates - U.S. Affiliates					644,703,097	238,860,581	182,975,663	54,065,130	0	0	0	0
0399999.	Total - General Account - Authorized - Affiliates					644,703,097	238,860,581	182,975,663	54,065,130	0	0	0	0
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates													
90611	41-1366075	04/01/1982	Allianz Life Insurance Co. of North America	MN	YRT/I	69,263	2,685	2,494	4,211	0	0	0	0
90611	41-1366075	11/01/1983	Allianz Life Insurance Co. of North America	MN	DIS/I	0	0	0	(2,452)	0	0	0	0
90611	41-1366075	11/01/1983	Allianz Life Insurance Co. of North America	MN	YRT/I	861,593	25,345	22,782	(174,978)	0	0	0	0
90611	41-1366075	01/01/1987	Allianz Life Insurance Co. of North America	MN	ADB/I	0	0	5	(105)	0	0	0	0
90611	41-1366075	01/01/1987	Allianz Life Insurance Co. of North America	MN	DIS/I	0	91	105	512	0	0	0	0
90611	41-1366075	01/01/1987	Allianz Life Insurance Co. of North America	MN	YRT/I	5,301,335	87,874	119,885	(945,178)	0	0	0	0
90611	41-1366075	06/01/1988	Allianz Life Insurance Co. of North America	MN	YRT/I	925,000	5,707	5,281	8,060	0	0	0	0
90611	41-1366075	02/01/1999	Allianz Life Insurance Co. of North America	MN	DIS/I	0	154	213	249	0	0	0	0
90611	41-1366075	02/01/1999	Allianz Life Insurance Co. of North America	MN	YRT/I	9,773,208	58,493	56,439	38,533	0	0	0	0
90611	41-1366075	04/15/1999	Allianz Life Insurance Co. of North America	MN	CO/I	186,363,149	739,721	699,736	259,161	0	0	0	0
90611	41-1366075	04/15/1999	Allianz Life Insurance Co. of North America	MN	DIS/I	0	43,879	35,212	7,967	0	0	0	0
90611	41-1366075	04/15/1999	Allianz Life Insurance Co. of North America	MN	YRT/I	109,351,971	495,848	483,527	310,120	0	0	0	0
90611	41-1366075	03/15/2000	Allianz Life Insurance Co. of North America	MN	DIS/I	0	91	56	807	0	0	0	0
90611	41-1366075	03/15/2000	Allianz Life Insurance Co. of North America	MN	YRT/I	19,441,646	78,505	63,819	94,581	0	0	0	0
90611	41-1366075	09/01/2000	Allianz Life Insurance Co. of North America	MN	DIS/I	0	15	15	79	0	0	0	0
90611	41-1366075	09/01/2000	Allianz Life Insurance Co. of North America	MN	YRT/I	4,925,140	18,665	17,801	13,699	0	0	0	0
90611	41-1366075	09/30/2000	Allianz Life Insurance Co. of North America	MN	DIS/I	0	367	390	559	0	0	0	0
90611	41-1366075	09/30/2000	Allianz Life Insurance Co. of North America	MN	YRT/I	16,809,565	68,550	59,109	58,445	0	0	0	0
90611	41-1366075	07/31/2001	Allianz Life Insurance Co. of North America	MN	CO/I	557,859,028	12,607,148	12,276,210	848,502	0	0	0	0
90611	41-1366075	07/31/2001	Allianz Life Insurance Co. of North America	MN	DIS/I	0	25,314	24,170	17,308	0	0	0	0
90611	41-1366075	07/31/2001	Allianz Life Insurance Co. of North America	MN	YRT/I	16,532,663	57,326	52,623	35,352	0	0	0	0
90611	41-1366075	01/01/2002	Allianz Life Insurance Co. of North America	MN	DIS/I	0	486	464	1,013	0	0	0	0
90611	41-1366075	01/01/2002	Allianz Life Insurance Co. of North America	MN	YRT/I	23,318,034	96,497	89,357	79,438	0	0	0	0
90611	41-1366075	07/01/2002	Allianz Life Insurance Co. of North America	MN	DIS/I	0	221	210	364	0	0	0	0
90611	41-1366075	07/01/2002	Allianz Life Insurance Co. of North America	MN	YRT/I	26,094,607	213,387	194,679	149,576	0	0	0	0
90611	41-1366075	01/01/2003	Allianz Life Insurance Co. of North America	MN	CO/I	125,220,055	2,551,099	2,462,551	191,725	0	0	0	0
90611	41-1366075	01/01/2003	Allianz Life Insurance Co. of North America	MN	DIS/I	0	2,395	2,475	4,747	0	0	0	0
90611	41-1366075	01/01/2003	Allianz Life Insurance Co. of North America	MN	YRT/I	12,753,772	42,595	36,833	35,944	0	0	0	0
90611	41-1366075	04/01/2003	Allianz Life Insurance Co. of North America	MN	CO/I	758,061,589	15,356,519	14,354,596	1,013,258	0	0	0	0
90611	41-1366075	04/01/2003	Allianz Life Insurance Co. of North America	MN	DIS/I	0	34,972	33,583	29,536	0	0	0	0
90611	41-1366075	04/01/2003	Allianz Life Insurance Co. of North America	MN	YRT/I	100,667,524	323,844	304,591	281,637	0	0	0	0
60895	35-0145825	01/01/1986	American United Life Insurance Company	IN	YRT/I	89,464	660	601	857	0	0	0	0

SCHEDULE S - PART 3 - SECTION 1

Reinsurance Ceded Life Insurance, Annuities, Deposit Funds and Other Liabilities
Without Life or Disability Contingencies, and Related Benefits Listed by Reinsuring Company as of December 31, Current Year

1	2	3	4	5	6	7	Reserve Credit Taken		10	Outstanding Surplus Relief		13	14
							8	9		11	12		
NAIC Company Code	Federal ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
62413	36-0947200	01/01/1987	Continental Assurance Company	IL	YRT/I	1,402,078	82,870	75,901	104,193	0	0	0	0
39845	48-0921045	04/01/1968	Employers Reinsurance Corporation	MO	CO/I	0	89,476	124,484	0	0	0	0	0
86258	13-2572994	07/01/1982	General & Cologne Life Re of America	CT	YRT/I	278,256	7,903	22,584	9,484	0	0	0	0
86258	13-2572994	01/01/1987	General & Cologne Life Re of America	CT	DIS/I	0	88	111	64	0	0	0	0
86258	13-2572994	01/01/1987	General & Cologne Life Re of America	CT	YRT/I	4,978,645	129,540	111,310	280,598	0	0	0	0
86258	13-2572994	04/01/2004	General & Cologne Life Re of America	CT	DIS/I	0	1,776	1,489	2,966	0	0	0	0
86258	13-2572994	04/01/2004	General & Cologne Life Re of America	CT	YRT/I	71,547,248	202,937	212,945	171,836	0	0	0	0
86258	13-2572994	09/01/2004	General & Cologne Life Re of America	CT	YRT/I	0	0	13,941	(4,063)	0	0	0	0
86258	13-2572994	01/19/2005	General & Cologne Life Re of America	CT	DIS/I	0	1,423	1,523	2,645	0	0	0	0
86258	13-2572994	01/19/2005	General & Cologne Life Re of America	CT	YRT/I	58,961,831	162,862	195,193	140,071	0	0	0	0
86258	13-2572994	12/01/2005	General & Cologne Life Re of America	CT	DIS/I	0	181	191	345	0	0	0	0
86258	13-2572994	12/01/2005	General & Cologne Life Re of America	CT	YRT/I	26,969,840	70,238	65,335	27,518	0	0	0	0
86258	13-2572994	01/01/2006	General & Cologne Life Re of America	CT	DIS/I	0	4,142	4,182	8,359	0	0	0	0
86258	13-2572994	01/01/2006	General & Cologne Life Re of America	CT	YRT/I	349,748,003	814,023	806,173	519,451	0	0	0	0
97071	13-3126819	06/04/2007	Generali USA Life Reassurance Company	MO	DIS/I	0	117	10,717	(5,538)	0	0	0	0
97071	13-3126819	06/04/2007	Generali USA Life Reassurance Company	MO	YRT/I	13,006,899	25,102	1,587,258	(92,906)	0	0	0	0
97071	13-3126819	10/01/2007	Generali USA Life Reassurance Company	MO	DIS/I	0	2	1,349	(93)	0	0	0	0
97071	13-3126819	10/01/2007	Generali USA Life Reassurance Company	MO	YRT/I	1,880,338	3,117	448,037	(11,379)	0	0	0	0
97071	13-3126819	10/10/2009	Generali USA Life Reassurance Company	MO	DIS/I	0	9,496	13,483	13,219	0	0	0	0
97071	13-3126819	10/10/2009	Generali USA Life Reassurance Company	MO	YRT/I	1,019,874,392	1,419,551	1,845,484	684,014	0	0	0	0
88340	59-2859797	01/01/2010	Hannover Life Reassurance Company Of America	FL	YRT/I	8,116,171	7,070	17,282	18,241	0	0	0	0
86258	13-2572994	10/01/1988	General & Cologne Life Re of America	CT	YRT/I	117,205	1,090	2,255	3,733	0	0	0	0
65676	35-0472300	03/18/1982	Lincoln National Life Insurance Company	IN	DIS/I	0	254	298	559	0	0	0	0
65676	35-0472300	03/18/1982	Lincoln National Life Insurance Company	IN	YRT/I	7,914,371	280,284	331,179	296,994	0	0	0	0
65676	35-0472300	03/09/1998	Lincoln National Life Insurance Company	IN	DIS/I	0	183	183	271	0	0	0	0
65676	35-0472300	03/09/1998	Lincoln National Life Insurance Company	IN	YRT/I	8,997,382	46,358	41,488	45,571	0	0	0	0
65676	35-0472300	06/01/1998	Lincoln National Life Insurance Company	IN	DIS/I	0	331	304	374	0	0	0	0
65676	35-0472300	06/01/1998	Lincoln National Life Insurance Company	IN	YRT/I	20,972,534	126,692	128,595	92,820	0	0	0	0
65676	35-0472300	02/01/1999	Lincoln National Life Insurance Company	IN	DIS/I	0	155	214	249	0	0	0	0
65676	35-0472300	02/01/1999	Lincoln National Life Insurance Company	IN	YRT/I	13,026,685	59,179	57,026	39,168	0	0	0	0
65676	35-0472300	04/15/1999	Lincoln National Life Insurance Company	IN	CO/I	186,363,156	739,721	699,736	259,116	0	0	0	0
65676	35-0472300	04/15/1999	Lincoln National Life Insurance Company	IN	DIS/I	0	43,970	35,293	8,072	0	0	0	0
65676	35-0472300	04/15/1999	Lincoln National Life Insurance Company	IN	YRT/I	117,130,169	725,287	692,361	433,899	0	0	0	0
65676	35-0472300	03/01/2000	Lincoln National Life Insurance Company	IN	CO/I	171,688,823	3,232,115	6,881,673	(2,124,144)	0	0	0	0
65676	35-0472300	03/01/2000	Lincoln National Life Insurance Company	IN	DIS/I	0	27,740	27,793	(42,408)	0	0	0	0
65676	35-0472300	03/15/2000	Lincoln National Life Insurance Company	IN	DIS/I	0	92	56	808	0	0	0	0
65676	35-0472300	03/15/2000	Lincoln National Life Insurance Company	IN	YRT/I	19,456,229	78,564	63,867	94,643	0	0	0	0
65676	35-0472300	09/01/2000	Lincoln National Life Insurance Company	IN	CO/I	320,394,426	6,993,686	6,942,975	516,961	0	0	0	0

SCHEDULE S - PART 3 - SECTION 1

Reinsurance Ceded Life Insurance, Annuities, Deposit Funds and Other Liabilities
Without Life or Disability Contingencies, and Related Benefits Listed by Reinsuring Company as of December 31, Current Year

1	2	3	4	5	6	7	Reserve Credit Taken		10	Outstanding Surplus Relief		13	14
							8	9		11	12		
NAIC Company Code	Federal ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
65676	35-0472300	09/01/2000	Lincoln National Life Insurance Company	IN	DIS/I	0	5,615	5,930	10,574	0	0	0	0
65676	35-0472300	09/01/2000	Lincoln National Life Insurance Company	IN	YRT/I	4,465,821	18,045	17,264	13,956	0	0	0	0
65676	35-0472300	09/05/2000	Lincoln National Life Insurance Company	IN	YRT/I	21,739,692	112,105	108,412	145,591	0	0	0	0
65676	35-0472300	09/30/2000	Lincoln National Life Insurance Company	IN	DIS/I	0	462	477	747	0	0	0	0
65676	35-0472300	09/30/2000	Lincoln National Life Insurance Company	IN	YRT/I	20,520,838	75,486	68,567	64,812	0	0	0	0
65676	35-0472300	07/01/2001	Lincoln National Life Insurance Company	IN	DIS/I	0	99	99	208	0	0	0	0
65676	35-0472300	07/01/2001	Lincoln National Life Insurance Company	IN	YRT/I	866,036	3,042	2,776	2,294	0	0	0	0
65676	35-0472300	07/31/2001	Lincoln National Life Insurance Company	IN	CO/I	550,877,378	12,474,319	12,151,135	836,162	0	0	0	0
65676	35-0472300	07/31/2001	Lincoln National Life Insurance Company	IN	DIS/I	0	25,169	24,026	17,028	0	0	0	0
65676	35-0472300	07/31/2001	Lincoln National Life Insurance Company	IN	YRT/I	12,778,621	50,221	46,305	28,618	0	0	0	0
65676	35-0472300	01/01/2002	Lincoln National Life Insurance Company	IN	DIS/I	0	486	464	1,014	0	0	0	0
65676	35-0472300	01/01/2002	Lincoln National Life Insurance Company	IN	YRT/I	22,433,343	73,020	64,184	54,442	0	0	0	0
65676	35-0472300	07/01/2002	Lincoln National Life Insurance Company	IN	DIS/I	0	221	210	364	0	0	0	0
65676	35-0472300	07/01/2002	Lincoln National Life Insurance Company	IN	YRT/I	15,626,341	77,902	73,013	52,779	0	0	0	0
65676	35-0472300	01/01/2003	Lincoln National Life Insurance Company	IN	CO/I	125,220,055	2,551,099	2,462,551	191,725	0	0	0	0
65676	35-0472300	01/01/2003	Lincoln National Life Insurance Company	IN	DIS/I	0	2,377	2,459	4,711	0	0	0	0
65676	35-0472300	01/01/2003	Lincoln National Life Insurance Company	IN	YRT/I	12,556,654	42,512	36,756	35,633	0	0	0	0
65676	35-0472300	04/01/2003	Lincoln National Life Insurance Company	IN	YRT/I	22,408	27	24	15	0	0	0	0
65676	35-0472300	01/19/2005	Lincoln National Life Insurance Company	IN	YRT/I	4,197,059	19,295	17,865	22,062	0	0	0	0
76694	23-2044256	12/31/2009	London Life Insurance Company	PA	YRT/I	7,747,407,232	0	0	27,620,392	0	0	0	0
66346	58-0828824	04/01/1984	Munich American Reassurance Company	GA	YRT/I	75,620	216	201	552	0	0	0	0
66346	58-0828824	03/09/1998	Munich American Reassurance Company	GA	DIS/I	0	183	183	271	0	0	0	0
66346	58-0828824	03/09/1998	Munich American Reassurance Company	GA	YRT/I	8,518,504	44,131	39,537	41,685	0	0	0	0
66346	58-0828824	06/01/1998	Munich American Reassurance Company	GA	DIS/I	0	331	304	374	0	0	0	0
66346	58-0828824	06/01/1998	Munich American Reassurance Company	GA	YRT/I	20,721,058	126,240	128,221	90,825	0	0	0	0
66346	58-0828824	02/01/1999	Munich American Reassurance Company	GA	DIS/I	0	154	213	249	0	0	0	0
66346	58-0828824	02/01/1999	Munich American Reassurance Company	GA	YRT/I	9,773,212	58,493	56,439	38,533	0	0	0	0
66346	58-0828824	04/15/1999	Munich American Reassurance Company	GA	CO/I	186,363,156	739,721	699,736	259,137	0	0	0	0
66346	58-0828824	04/15/1999	Munich American Reassurance Company	GA	DIS/I	0	43,879	35,212	7,967	0	0	0	0
66346	58-0828824	04/15/1999	Munich American Reassurance Company	GA	YRT/I	110,486,599	495,125	479,984	308,080	0	0	0	0
66346	58-0828824	03/15/2000	Munich American Reassurance Company	GA	DIS/I	0	91	56	807	0	0	0	0
66346	58-0828824	03/15/2000	Munich American Reassurance Company	GA	YRT/I	19,441,647	78,505	63,819	94,572	0	0	0	0
66346	58-0828824	09/01/2000	Munich American Reassurance Company	GA	CO/I	310,742,614	6,677,484	6,637,833	497,658	0	0	0	0
66346	58-0828824	09/01/2000	Munich American Reassurance Company	GA	DIS/I	0	5,123	5,438	10,165	0	0	0	0
66346	58-0828824	09/01/2000	Munich American Reassurance Company	GA	YRT/I	5,183,390	22,942	21,988	16,927	0	0	0	0
66346	58-0828824	09/30/2000	Munich American Reassurance Company	GA	DIS/I	0	624	649	994	0	0	0	0
66346	58-0828824	09/30/2000	Munich American Reassurance Company	GA	YRT/I	28,167,101	106,146	94,481	91,509	0	0	0	0
66346	58-0828824	07/31/2001	Munich American Reassurance Company	GA	CO/I	1,102,413,602	24,963,545	24,306,710	1,674,359	0	0	0	0

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Without Life or Disability Contingencies, and Related Benefits Listed by Reinsuring Company as of December 31, Current Year

1	2	3	4	5	6	7	Reserve Credit Taken		10	Outstanding Surplus Relief		13	14
							8	9		11	12		
NAIC Company Code	Federal ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
66346	58-0828824	07/31/2001	Munich American Reassurance Company	GA	DIS/I	0	50,088	47,811	33,720	0	0	0	0
66346	58-0828824	07/31/2001	Munich American Reassurance Company	GA	YRT/I	20,821,575	78,780	72,298	47,356	0	0	0	0
66346	58-0828824	01/01/2002	Munich American Reassurance Company	GA	DIS/I	0	701	669	1,460	0	0	0	0
66346	58-0828824	01/01/2002	Munich American Reassurance Company	GA	YRT/I	33,998,398	107,470	94,322	80,584	0	0	0	0
66346	58-0828824	07/01/2002	Munich American Reassurance Company	GA	DIS/I	0	359	353	605	0	0	0	0
66346	58-0828824	07/01/2002	Munich American Reassurance Company	GA	YRT/I	23,487,895	113,109	106,471	76,240	0	0	0	0
66346	58-0828824	01/01/2003	Munich American Reassurance Company	GA	CO/I	127,170,051	2,575,986	2,485,252	193,227	0	0	0	0
66346	58-0828824	01/01/2003	Munich American Reassurance Company	GA	DIS/I	0	2,460	2,538	4,875	0	0	0	0
66346	58-0828824	01/01/2003	Munich American Reassurance Company	GA	YRT/I	15,474,750	51,691	44,685	43,986	0	0	0	0
66346	58-0828824	04/01/2003	Munich American Reassurance Company	GA	CO/I	2,043,750,316	40,976,543	38,523,670	2,800,311	0	0	0	0
66346	58-0828824	04/01/2003	Munich American Reassurance Company	GA	DIS/I	0	107,675	102,044	74,492	0	0	0	0
66346	58-0828824	04/01/2003	Munich American Reassurance Company	GA	YRT/I	110,524,542	335,695	314,011	293,117	0	0	0	0
66346	58-0828824	04/01/2004	Munich American Reassurance Company	GA	CO/I	1,923,981,633	36,940,343	34,311,423	2,717,281	0	0	0	0
66346	58-0828824	04/01/2004	Munich American Reassurance Company	GA	DIS/I	0	58,932	185,114	65,690	0	0	0	0
66346	58-0828824	04/01/2004	Munich American Reassurance Company	GA	YRT/I	87,560,105	289,080	274,565	276,156	0	0	0	0
66346	58-0828824	09/01/2004	Munich American Reassurance Company	GA	YRT/I	0	0	14,253	(4,559)	0	0	0	0
66346	58-0828824	11/01/2004	Munich American Reassurance Company	GA	DIS/I	0	0	60	(493)	0	0	0	0
66346	58-0828824	11/01/2004	Munich American Reassurance Company	GA	YRT/I	6,883,000	16,459	39,315	9,049	0	0	0	0
66346	58-0828824	01/19/2005	Munich American Reassurance Company	GA	CO/I	1,023,869,259	17,515,393	15,947,155	1,508,566	0	0	0	0
66346	58-0828824	01/19/2005	Munich American Reassurance Company	GA	DIS/I	0	18,742	20,074	36,429	0	0	0	0
66346	58-0828824	01/19/2005	Munich American Reassurance Company	GA	YRT/I	135,779,407	346,559	407,826	287,403	0	0	0	0
66346	58-0828824	07/01/2005	Munich American Reassurance Company	GA	CO/I	189,915,207	3,586,340	3,335,070	369,347	0	0	0	0
66346	58-0828824	07/01/2005	Munich American Reassurance Company	GA	DIS/I	0	4,357	4,412	8,537	0	0	0	0
66346	58-0828824	07/01/2005	Munich American Reassurance Company	GA	YRT/I	93,639,338	250,098	234,810	91,614	0	0	0	0
66346	58-0828824	09/01/2005	Munich American Reassurance Company	GA	CO/I	258,637,540	4,473,080	4,063,091	477,718	0	0	0	0
66346	58-0828824	09/01/2005	Munich American Reassurance Company	GA	DIS/I	0	6,900	6,983	13,427	0	0	0	0
66346	58-0828824	09/01/2005	Munich American Reassurance Company	GA	YRT/I	112,784,675	222,105	207,410	86,837	0	0	0	0
66346	58-0828824	12/01/2005	Munich American Reassurance Company	GA	CO/I	78,684,275	1,426,472	1,291,079	148,673	0	0	0	0
66346	58-0828824	12/01/2005	Munich American Reassurance Company	GA	DIS/I	0	1,654	1,768	3,144	0	0	0	0
66346	58-0828824	12/01/2005	Munich American Reassurance Company	GA	YRT/I	56,455,000	388,265	349,438	45,295	0	0	0	0
66346	58-0828824	01/01/2006	Munich American Reassurance Company	GA	CO/I	751,178,264	9,386,601	8,099,165	1,170,216	0	0	0	0
66346	58-0828824	01/01/2006	Munich American Reassurance Company	GA	DIS/I	0	16,575	17,210	32,689	0	0	0	0
66346	58-0828824	01/01/2006	Munich American Reassurance Company	GA	YRT/I	114,107,645	304,270	360,348	432,446	0	0	0	0
66346	58-0828824	06/04/2007	Munich American Reassurance Company	GA	DIS/I	0	146	11,360	(5,026)	0	0	0	0
66346	58-0828824	06/04/2007	Munich American Reassurance Company	GA	YRT/I	13,622,607	18,983	2,090,988	(135,171)	0	0	0	0
66346	58-0828824	10/01/2007	Munich American Reassurance Company	GA	DIS/I	0	1,974	4,623	3,293	0	0	0	0
66346	58-0828824	10/01/2007	Munich American Reassurance Company	GA	YRT/I	155,150,034	389,000	1,275,645	545,343	0	0	0	0
66346	58-0828824	12/31/2008	Munich American Reassurance Company	GA	CO/I	7,917,458,717	60,403,759	60,406,879	12,609,691	0	0	0	0

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Without Life or Disability Contingencies, and Related Benefits Listed by Reinsuring Company as of December 31, Current Year

1	2	3	4	5	6	7	Reserve Credit Taken		10	Outstanding Surplus Relief		13	14
							8	9		11	12		
NAIC Company Code	Federal ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
66346	58-0828824	12/31/2008	Munich American Reassurance Company	GA	DIS/I	0	168,038	181,449	323,908	0	0	0	0
66346	58-0828824	10/10/2009	Munich American Reassurance Company	GA	DIS/I	0	17,622	25,858	23,928	0	0	0	0
66346	58-0828824	10/10/2009	Munich American Reassurance Company	GA	YRT/I	1,819,549,721	2,435,672	3,374,545	991,767	0	0	0	0
66346	58-0828824	04/01/2011	Munich American Reassurance Company	GA	CO/I	8,411,706,607	59,894,842	0	15,173,280	0	0	0	0
66346	58-0828824	04/01/2011	Munich American Reassurance Company	GA	DIS/I	0	151,683	0	391,277	0	0	0	0
93572	43-1235868	01/01/1977	RGA Reinsurance Company	MO	DIS/I	0	133	131	262	0	0	0	0
93572	43-1235868	01/01/1977	RGA Reinsurance Company	MO	YRT/I	2,865,000	22,741	32,504	10,190	0	0	0	0
93572	43-1235868	01/01/1983	RGA Reinsurance Company	MO	DIS/I	0	127,934	123,026	699	0	0	0	0
93572	43-1235868	01/01/1983	RGA Reinsurance Company	MO	YRT/I	1,200,000	5,128	11,518	4,737	0	0	0	0
93572	43-1235868	02/01/1983	RGA Reinsurance Company	MO	DIS/I	0	547	785	492	0	0	0	0
93572	43-1235868	02/01/1983	RGA Reinsurance Company	MO	YRT/I	3,792,237	28,278	32,190	29,258	0	0	0	0
93572	43-1235868	01/01/1984	RGA Reinsurance Company	MO	DIS/I	0	0	0	(3)	0	0	0	0
93572	43-1235868	01/01/1984	RGA Reinsurance Company	MO	YRT/I	4,195,279	101,053	102,038	91,150	0	0	0	0
93572	43-1235868	06/01/1984	RGA Reinsurance Company	MO	YRT/I	7,570,279	245,632	230,661	205,364	0	0	0	0
93572	43-1235868	01/01/1987	RGA Reinsurance Company	MO	DIS/I	0	4,131	5,055	3,025	0	0	0	0
93572	43-1235868	01/01/1987	RGA Reinsurance Company	MO	YRT/I	90,944,519	1,169,931	1,155,856	1,260,389	0	0	0	0
93572	43-1235868	05/01/1988	RGA Reinsurance Company	MO	DIS/I	0	224	186	441	0	0	0	0
93572	43-1235868	05/01/1988	RGA Reinsurance Company	MO	YRT/I	725,000	4,174	4,247	6,374	0	0	0	0
93572	43-1235868	11/14/1991	RGA Reinsurance Company	MO	DIS/I	0	1	1	-	0	0	0	0
93572	43-1235868	11/14/1991	RGA Reinsurance Company	MO	YRT/I	31,620,513	200,101	181,355	312,747	0	0	0	0
93572	43-1235868	01/01/1994	RGA Reinsurance Company	MO	DIS/I	0	652	728	1,081	0	0	0	0
93572	43-1235868	01/01/1994	RGA Reinsurance Company	MO	YRT/I	27,462,073	435,359	395,558	543,706	0	0	0	0
93572	43-1235868	10/01/1995	RGA Reinsurance Company	MO	DIS/I	0	21,602	21,788	2,473	0	0	0	0
93572	43-1235868	10/01/1995	RGA Reinsurance Company	MO	YRT/I	61,198,521	465,790	449,752	504,648	0	0	0	0
93572	43-1235868	07/01/1997	RGA Reinsurance Company	MO	DIS/I	0	669	805	1,137	0	0	0	0
93572	43-1235868	07/01/1997	RGA Reinsurance Company	MO	YRT/I	36,171,741	221,341	215,901	187,909	0	0	0	0
93572	43-1235868	03/09/1998	RGA Reinsurance Company	MO	DIS/I	0	366	365	542	0	0	0	0
93572	43-1235868	03/09/1998	RGA Reinsurance Company	MO	YRT/I	19,381,468	113,006	103,758	105,975	0	0	0	0
93572	43-1235868	06/01/1998	RGA Reinsurance Company	MO	DIS/I	0	662	608	747	0	0	0	0
93572	43-1235868	06/01/1998	RGA Reinsurance Company	MO	YRT/I	47,434,867	265,881	270,362	191,898	0	0	0	0
93572	43-1235868	02/01/1999	RGA Reinsurance Company	MO	DIS/I	0	232	320	373	0	0	0	0
93572	43-1235868	02/01/1999	RGA Reinsurance Company	MO	YRT/I	15,477,569	89,593	86,162	58,873	0	0	0	0
93572	43-1235868	04/15/1999	RGA Reinsurance Company	MO	CO/I	186,363,156	739,721	699,736	259,161	0	0	0	0
93572	43-1235868	04/15/1999	RGA Reinsurance Company	MO	DIS/I	0	49,808	39,963	8,949	0	0	0	0
93572	43-1235868	04/15/1999	RGA Reinsurance Company	MO	YRT/I	228,859,702	1,168,519	1,113,029	797,894	0	0	0	0
93572	43-1235868	03/15/2000	RGA Reinsurance Company	MO	DIS/I	0	137	84	1,201	0	0	0	0
93572	43-1235868	03/15/2000	RGA Reinsurance Company	MO	YRT/I	33,769,760	239,136	204,313	192,510	0	0	0	0

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1	2	3	4	5	6	7	Reserve Credit Taken		10	Outstanding Surplus Relief		13	14
							8	9		11	12		
NAIC Company Code	Federal ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
93572	43-1235868	09/01/2000	RGA Reinsurance Company	MO	CO/I	310,742,610	6,677,484	6,637,833	498,421	0	0	0	0
93572	43-1235868	09/01/2000	RGA Reinsurance Company	MO	DIS/I	0	5,196	5,511	10,314	0	0	0	0
93572	43-1235868	09/01/2000	RGA Reinsurance Company	MO	YRT/I	5,820,550	27,643	26,422	22,697	0	0	0	0
93572	43-1235868	09/30/2000	RGA Reinsurance Company	MO	DIS/I	0	645	671	1,025	0	0	0	0
93572	43-1235868	09/30/2000	RGA Reinsurance Company	MO	YRT/I	44,550,161	242,537	226,679	166,707	0	0	0	0
93572	43-1235868	07/31/2001	RGA Reinsurance Company	MO	CO/I	614,714,378	13,750,891	13,362,999	932,198	0	0	0	0
93572	43-1235868	07/31/2001	RGA Reinsurance Company	MO	DIS/I	0	25,492	24,338	17,532	0	0	0	0
93572	43-1235868	07/31/2001	RGA Reinsurance Company	MO	YRT/I	40,884,552	129,537	118,719	87,594	0	0	0	0
93572	43-1235868	01/01/2002	RGA Reinsurance Company	MO	DIS/I	0	728	695	1,519	0	0	0	0
93572	43-1235868	01/01/2002	RGA Reinsurance Company	MO	YRT/I	58,013,242	349,688	240,286	273,987	0	0	0	0
93572	43-1235868	07/01/2002	RGA Reinsurance Company	MO	DIS/I	0	320	411	745	0	0	0	0
93572	43-1235868	07/01/2002	RGA Reinsurance Company	MO	YRT/I	27,073,273	197,423	240,614	122,623	0	0	0	0
93572	43-1235868	01/01/2003	RGA Reinsurance Company	MO	CO/I	128,145,055	2,709,325	2,603,268	204,677	0	0	0	0
93572	43-1235868	01/01/2003	RGA Reinsurance Company	MO	DIS/I	0	2,497	2,577	4,950	0	0	0	0
93572	43-1235868	01/01/2003	RGA Reinsurance Company	MO	YRT/I	20,425,662	71,616	61,867	59,536	0	0	0	0
93572	43-1235868	04/01/2003	RGA Reinsurance Company	MO	DIS/I	0	921	1,130	1,854	0	0	0	0
93572	43-1235868	04/01/2003	RGA Reinsurance Company	MO	YRT/I	134,364,973	525,976	523,848	348,534	0	0	0	0
93572	43-1235868	04/01/2004	RGA Reinsurance Company	MO	DIS/I	0	1,824	1,541	3,059	0	0	0	0
93572	43-1235868	04/01/2004	RGA Reinsurance Company	MO	YRT/I	146,249,643	511,871	490,600	479,052	0	0	0	0
93572	43-1235868	09/01/2004	RGA Reinsurance Company	MO	YRT/I	0	0	14,614	(5,424)	0	0	0	0
93572	43-1235868	01/19/2005	RGA Reinsurance Company	MO	DIS/I	0	1,818	1,944	3,419	0	0	0	0
93572	43-1235868	01/19/2005	RGA Reinsurance Company	MO	YRT/I	86,945,709	371,441	517,420	329,042	0	0	0	0
93572	43-1235868	06/04/2007	RGA Reinsurance Company	MO	DIS/I	0	146	12,570	(5,855)	0	0	0	0
93572	43-1235868	06/04/2007	RGA Reinsurance Company	MO	YRT/I	10,008,627	17,563	2,245,015	(142,617)	0	0	0	0
93572	43-1235868	10/01/2007	RGA Reinsurance Company	MO	DIS/I	0	1,554	4,040	2,715	0	0	0	0
93572	43-1235868	10/01/2007	RGA Reinsurance Company	MO	YRT/I	158,580,962	299,858	1,206,098	412,620	0	0	0	0
93572	43-1235868	07/01/2008	RGA Reinsurance Company	MO	YRT/I	5,694,008	14,544	33,426	7,160	0	0	0	0
93572	43-1235868	10/10/2009	RGA Reinsurance Company	MO	DIS/I	0	10,866	14,900	16,047	0	0	0	0
93572	43-1235868	10/10/2009	RGA Reinsurance Company	MO	YRT/I	1,146,715,956	1,769,270	2,072,039	1,161,411	0	0	0	0
68713	84-0499703	08/01/1993	Security Life of Denver Insurance Company	CO	DIS/I	0	1	1	-	0	0	0	0
68713	84-0499703	08/01/1993	Security Life of Denver Insurance Company	CO	YRT/I	3,734,738	16,179	18,696	25,856	0	0	0	0
68713	84-0499703	01/01/1994	Security Life of Denver Insurance Company	CO	DIS/I	0	615	692	1,009	0	0	0	0
68713	84-0499703	01/01/1994	Security Life of Denver Insurance Company	CO	YRT/I	22,182,353	168,793	172,489	188,125	0	0	0	0
68713	84-0499703	10/01/1995	Security Life of Denver Insurance Company	CO	DIS/I	0	21,602	21,788	2,473	0	0	0	0
68713	84-0499703	10/01/1995	Security Life of Denver Insurance Company	CO	YRT/I	54,606,926	588,170	554,962	597,464	0	0	0	0
68713	84-0499703	07/01/1997	Security Life of Denver Insurance Company	CO	DIS/I	0	805	936	1,406	0	0	0	0
68713	84-0499703	07/01/1997	Security Life of Denver Insurance Company	CO	YRT/I	32,536,654	347,616	340,550	415,055	0	0	0	0
68713	84-0499703	03/09/1998	Security Life of Denver Insurance Company	CO	DIS/I	0	366	365	542	0	0	0	0

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Reinsurance Ceded Life Insurance, Annuities, Deposit Funds and Other Liabilities
Without Life or Disability Contingencies, and Related Benefits Listed by Reinsuring Company as of December 31, Current Year

1	2	3	4	5	6	7	Reserve Credit Taken		10	Outstanding Surplus Relief		13	14
							8	9		11	12		
NAIC Company Code	Federal ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
68713	84-0499703	03/09/1998	Security Life of Denver Insurance Company	CO	YRT/I	17,542,430	89,554	80,228	84,927	0	0	0	0
68713	84-0499703	06/01/1998	Security Life of Denver Insurance Company	CO	DIS/I	0	891	827	1,199	0	0	0	0
68713	84-0499703	06/01/1998	Security Life of Denver Insurance Company	CO	YRT/I	44,208,915	264,142	267,342	191,829	0	0	0	0
68713	84-0499703	06/08/1998	Security Life of Denver Insurance Company	CO	ADB/I	0	272	245	-	0	0	0	0
68713	84-0499703	06/08/1998	Security Life of Denver Insurance Company	CO	CO/I	186,722,787	753,998	705,630	296,047	0	0	0	0
68713	84-0499703	06/08/1998	Security Life of Denver Insurance Company	CO	DIS/I	0	3,101	3,091	5,569	0	0	0	0
68713	84-0499703	06/08/1998	Security Life of Denver Insurance Company	CO	YRT/I	583,015	743	675	1,069	0	0	0	0
68713	84-0499703	02/01/1999	Security Life of Denver Insurance Company	CO	DIS/I	0	232	320	373	0	0	0	0
68713	84-0499703	02/01/1999	Security Life of Denver Insurance Company	CO	YRT/I	15,706,188	92,903	90,026	60,230	0	0	0	0
68713	84-0499703	04/15/1999	Security Life of Denver Insurance Company	CO	DIS/I	0	17,699	13,989	2,973	0	0	0	0
68713	84-0499703	04/15/1999	Security Life of Denver Insurance Company	CO	YRT/I	167,933,738	752,216	753,125	481,035	0	0	0	0
68713	84-0499703	03/15/2000	Security Life of Denver Insurance Company	CO	DIS/I	0	137	84	1,201	0	0	0	0
68713	84-0499703	03/15/2000	Security Life of Denver Insurance Company	CO	YRT/I	29,169,760	117,788	95,753	141,799	0	0	0	0
68713	84-0499703	09/01/2000	Security Life of Denver Insurance Company	CO	DIS/I	0	28	28	152	0	0	0	0
68713	84-0499703	09/01/2000	Security Life of Denver Insurance Company	CO	YRT/I	7,741,300	32,473	31,074	23,918	0	0	0	0
68713	84-0499703	09/05/2000	Security Life of Denver Insurance Company	CO	YRT/I	21,739,639	112,105	108,412	145,591	0	0	0	0
68713	84-0499703	09/30/2000	Security Life of Denver Insurance Company	CO	DIS/I	0	712	756	1,084	0	0	0	0
68713	84-0499703	09/30/2000	Security Life of Denver Insurance Company	CO	YRT/I	46,936,482	157,578	120,632	157,518	0	0	0	0
68713	84-0499703	10/02/2000	Security Life of Denver Insurance Company	CO	YRT/I	847,554	6,297	6,043	8,478	0	0	0	0
68713	84-0499703	07/31/2001	Security Life of Denver Insurance Company	CO	CO/I	551,209,031	12,481,835	12,212,725	834,237	0	0	0	0
68713	84-0499703	07/31/2001	Security Life of Denver Insurance Company	CO	DIS/I	0	25,702	24,537	17,796	0	0	0	0
68713	84-0499703	07/31/2001	Security Life of Denver Insurance Company	CO	YRT/I	26,713,293	231,917	211,402	111,520	0	0	0	0
68713	84-0499703	01/01/2002	Security Life of Denver Insurance Company	CO	CO/I	27,472,855	815,329	747,255	65,455	0	0	0	0
68713	84-0499703	01/01/2002	Security Life of Denver Insurance Company	CO	DIS/I	0	1,674	1,652	3,397	0	0	0	0
68713	84-0499703	01/01/2002	Security Life of Denver Insurance Company	CO	YRT/I	44,547,607	198,105	212,711	116,383	0	0	0	0
68713	84-0499703	05/01/2002	Security Life of Denver Insurance Company	CO	DIS/I	0	8,552	8,805	16,753	0	0	0	0
68713	84-0499703	05/01/2002	Security Life of Denver Insurance Company	CO	YRT/I	175,833,775	1,390,579	1,383,158	895,724	0	0	0	0
68713	84-0499703	07/01/2002	Security Life of Denver Insurance Company	CO	DIS/I	0	361	322	571	0	0	0	0
68713	84-0499703	07/01/2002	Security Life of Denver Insurance Company	CO	YRT/I	30,868,900	209,055	185,310	119,688	0	0	0	0
68713	84-0499703	01/01/2003	Security Life of Denver Insurance Company	CO	CO/I	111,522,200	2,156,013	2,097,428	166,683	0	0	0	0
68713	84-0499703	01/01/2003	Security Life of Denver Insurance Company	CO	DIS/I	0	1,793	1,851	3,572	0	0	0	0
68713	84-0499703	01/01/2003	Security Life of Denver Insurance Company	CO	YRT/I	23,534,494	90,047	73,453	75,585	0	0	0	0
68713	84-0499703	04/01/2003	Security Life of Denver Insurance Company	CO	CO/I	937,484,736	39,731,515	37,277,604	1,262,410	0	0	0	0
68713	84-0499703	04/01/2003	Security Life of Denver Insurance Company	CO	DIS/I	0	26,765	26,424	32,852	0	0	0	0
68713	84-0499703	04/01/2003	Security Life of Denver Insurance Company	CO	YRT/I	100,535,124	333,726	317,216	301,819	0	0	0	0
68713	84-0499703	04/01/2004	Security Life of Denver Insurance Company	CO	CO/I	874,784,894	16,830,040	15,422,685	1,125,440	0	0	0	0
68713	84-0499703	04/01/2004	Security Life of Denver Insurance Company	CO	DIS/I	0	20,062	96,709	31,583	0	0	0	0
68713	84-0499703	04/01/2004	Security Life of Denver Insurance Company	CO	YRT/I	79,834,859	296,824	225,505	326,828	0	0	0	0

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Reinsurance Ceded Life Insurance, Annuities, Deposit Funds and Other Liabilities
Without Life or Disability Contingencies, and Related Benefits Listed by Reinsuring Company as of December 31, Current Year

1	2	3	4	5	6	7	Reserve Credit Taken		10	Outstanding Surplus Relief		13	14
							8	9		11	12		
NAIC Company Code	Federal ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
68713	84-0499703	09/01/2004	Security Life of Denver Insurance Company	CO	YRT/I	0	0	14,128	(3,910)	0	0	0	0
82627	06-0839705	11/01/1981	Swiss Re Life & Health America, Inc	CT	YRT/I	2,366,834	18,935	18,068	43,617	0	0	0	0
82627	06-0839705	01/01/1982	Swiss Re Life & Health America, Inc	CT	DIS/I	0	218	213	429	0	0	0	0
82627	06-0839705	01/01/1982	Swiss Re Life & Health America, Inc	CT	YRT/I	1,646,000	14,621	32,759	17,598	0	0	0	0
82627	06-0839705	06/06/1983	Swiss Re Life & Health America, Inc	CT	DIS/I	0	22	25	42	0	0	0	0
82627	06-0839705	06/06/1983	Swiss Re Life & Health America, Inc	CT	YRT/I	3,568,951	94,368	85,583	91,173	0	0	0	0
82627	06-0839705	06/01/1984	Swiss Re Life & Health America, Inc	CT	DIS/I	0	207	425	254	0	0	0	0
82627	06-0839705	06/01/1984	Swiss Re Life & Health America, Inc	CT	YRT/I	9,259,259	196,369	202,827	179,973	0	0	0	0
82627	06-0839705	01/01/1987	Swiss Re Life & Health America, Inc	CT	ADB/I	0	48	48	93	0	0	0	0
82627	06-0839705	01/01/1987	Swiss Re Life & Health America, Inc	CT	DIS/I	0	1,724	1,782	1,807	0	0	0	0
82627	06-0839705	01/01/1987	Swiss Re Life & Health America, Inc	CT	YRT/I	48,644,161	917,068	982,983	990,996	0	0	0	0
82627	06-0839705	01/01/1990	Swiss Re Life & Health America, Inc	CT	DIS/I	0	504	410	992	0	0	0	0
82627	06-0839705	01/01/1990	Swiss Re Life & Health America, Inc	CT	YRT/I	1,400,000	6,783	6,143	9,308	0	0	0	0
82627	06-0839705	11/14/1991	Swiss Re Life & Health America, Inc	CT	DIS/I	0	1	1	-	0	0	0	0
82627	06-0839705	11/14/1991	Swiss Re Life & Health America, Inc	CT	YRT/I	19,407,607	186,210	182,563	269,213	0	0	0	0
82627	06-0839705	10/16/1992	Swiss Re Life & Health America, Inc	CT	DIS/I	0	207,002	199,021	968	0	0	0	0
82627	06-0839705	10/16/1992	Swiss Re Life & Health America, Inc	CT	YRT/I	650,000	5,460	7,436	9,614	0	0	0	0
82627	06-0839705	08/01/1993	Swiss Re Life & Health America, Inc	CT	DIS/I	0	1	1	-	0	0	0	0
82627	06-0839705	08/01/1993	Swiss Re Life & Health America, Inc	CT	YRT/I	5,817,115	59,229	56,493	139,809	0	0	0	0
82627	06-0839705	01/01/1994	Swiss Re Life & Health America, Inc	CT	DIS/I	0	1,870	2,101	3,070	0	0	0	0
82627	06-0839705	01/01/1994	Swiss Re Life & Health America, Inc	CT	YRT/I	64,686,061	597,702	600,838	658,833	0	0	0	0
82627	06-0839705	10/01/1995	Swiss Re Life & Health America, Inc	CT	DIS/I	0	82,950	83,198	7,457	0	0	0	0
82627	06-0839705	10/01/1995	Swiss Re Life & Health America, Inc	CT	YRT/I	145,046,432	1,271,624	1,220,201	1,259,926	0	0	0	0
82627	06-0839705	07/01/1997	Swiss Re Life & Health America, Inc	CT	DIS/I	0	2,227	2,649	3,845	0	0	0	0
82627	06-0839705	07/01/1997	Swiss Re Life & Health America, Inc	CT	YRT/I	83,232,985	663,910	635,280	650,028	0	0	0	0
82627	06-0839705	03/09/1998	Swiss Re Life & Health America, Inc	CT	DIS/I	0	732	730	1,083	0	0	0	0
82627	06-0839705	03/09/1998	Swiss Re Life & Health America, Inc	CT	YRT/I	35,708,552	194,992	174,817	182,433	0	0	0	0
82627	06-0839705	06/01/1998	Swiss Re Life & Health America, Inc	CT	DIS/I	0	1,417	1,310	1,678	0	0	0	0
82627	06-0839705	06/01/1998	Swiss Re Life & Health America, Inc	CT	YRT/I	85,625,114	510,670	517,876	369,642	0	0	0	0
82627	06-0839705	02/01/1999	Swiss Re Life & Health America, Inc	CT	DIS/I	0	232	320	373	0	0	0	0
82627	06-0839705	02/01/1999	Swiss Re Life & Health America, Inc	CT	YRT/I	15,501,369	133,087	127,670	85,345	0	0	0	0
82627	06-0839705	04/15/1999	Swiss Re Life & Health America, Inc	CT	DIS/I	0	17,699	13,989	2,973	0	0	0	0
82627	06-0839705	04/15/1999	Swiss Re Life & Health America, Inc	CT	YRT/I	184,412,438	886,404	845,650	511,096	0	0	0	0
82627	06-0839705	03/15/2000	Swiss Re Life & Health America, Inc	CT	DIS/I	0	137	84	1,211	0	0	0	0
82627	06-0839705	03/15/2000	Swiss Re Life & Health America, Inc	CT	YRT/I	29,169,760	117,788	95,753	141,865	0	0	0	0
82627	06-0839705	09/01/2000	Swiss Re Life & Health America, Inc	CT	DIS/I	0	22	22	119	0	0	0	0
82627	06-0839705	09/01/2000	Swiss Re Life & Health America, Inc	CT	YRT/I	5,420,550	23,968	22,968	17,682	0	0	0	0
82627	06-0839705	09/05/2000	Swiss Re Life & Health America, Inc	CT	YRT/I	21,739,642	112,105	108,412	145,591	0	0	0	0

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Reinsurance Ceded Life Insurance, Annuities, Deposit Funds and Other Liabilities
Without Life or Disability Contingencies, and Related Benefits Listed by Reinsuring Company as of December 31, Current Year

1	2	3	4	5	6	7	Reserve Credit Taken		10	Outstanding Surplus Relief		13	14
							8	9		11	12		
NAIC Company Code	Federal ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
82627	06-0839705	09/29/2000	Swiss Re Life & Health America, Inc	CT	YRT/I	780,810	35,021	31,388	18,128	0	0	0	0
82627	06-0839705	09/30/2000	Swiss Re Life & Health America, Inc	CT	DIS/I	0	549	584	837	0	0	0	0
82627	06-0839705	09/30/2000	Swiss Re Life & Health America, Inc	CT	YRT/I	28,125,511	116,628	100,767	96,446	0	0	0	0
82627	06-0839705	10/02/2000	Swiss Re Life & Health America, Inc	CT	YRT/I	847,554	6,297	6,043	8,478	0	0	0	0
82627	06-0839705	07/31/2001	Swiss Re Life & Health America, Inc	CT	DIS/I	0	665	632	870	0	0	0	0
82627	06-0839705	07/31/2001	Swiss Re Life & Health America, Inc	CT	YRT/I	24,358,482	108,838	96,469	65,826	0	0	0	0
82627	06-0839705	01/01/2002	Swiss Re Life & Health America, Inc	CT	DIS/I	0	727	695	1,497	0	0	0	0
82627	06-0839705	01/01/2002	Swiss Re Life & Health America, Inc	CT	YRT/I	45,921,675	319,057	280,094	234,599	0	0	0	0
82627	06-0839705	07/01/2002	Swiss Re Life & Health America, Inc	CT	DIS/I	0	223	179	330	0	0	0	0
82627	06-0839705	07/01/2002	Swiss Re Life & Health America, Inc	CT	YRT/I	20,788,691	113,890	105,985	77,545	0	0	0	0
82627	06-0839705	01/01/2003	Swiss Re Life & Health America, Inc	CT	DIS/I	0	288	284	571	0	0	0	0
82627	06-0839705	01/01/2003	Swiss Re Life & Health America, Inc	CT	YRT/I	18,804,609	69,550	60,006	57,123	0	0	0	0
82627	06-0839705	04/01/2003	Swiss Re Life & Health America, Inc	CT	YRT/I	3,000,000	2,024	1,858	2,005	0	0	0	0
82627	06-0839705	01/19/2005	Swiss Re Life & Health America, Inc	CT	YRT/I	4,197,061	19,295	17,865	22,062	0	0	0	0
82627	06-0839705	01/01/2006	Swiss Re Life & Health America, Inc	CT	YRT/I	78,830,411	269,773	417,502	207,941	0	0	0	0
82627	06-0839705	07/01/2008	Swiss Re Life & Health America, Inc	CT	YRT/I	7,944,357	18,776	40,292	12,394	0	0	0	0
82627	06-0839705	01/01/2010	Swiss Re Life & Health America, Inc	CT	YRT/I	7,997,706	6,954	16,818	14,925	0	0	0	0
82627	06-0839705	07/01/2011	Swiss Re Life & Health America, Inc	CT	CO/I	8,408,756,444	59,879,694	0	12,167,011	0	0	0	0
82627	06-0839705	07/01/2011	Swiss Re Life & Health America, Inc	CT	DIS/I	0	151,677	0	314,515	0	0	0	0
87572	23-2038295	09/01/2000	Scottish Re U.S. Inc	NC	DIS/I	0	168	178	281	0	0	0	0
87572	23-2038295	09/01/2000	Scottish Re U.S. Inc	NC	YRT/I	6,674,796	28,354	25,632	22,525	0	0	0	0
87572	23-2038295	09/30/2000	Scottish Re U.S. Inc	NC	YRT/I	2,057,439	8,550	6,847	8,207	0	0	0	0
87572	23-2038295	07/31/2001	Scottish Re U.S. Inc	NC	DIS/I	0	196	186	256	0	0	0	0
87572	23-2038295	07/31/2001	Scottish Re U.S. Inc	NC	YRT/I	5,136,758	21,898	20,227	12,017	0	0	0	0
87572	23-2038295	01/01/2002	Scottish Re U.S. Inc	NC	DIS/I	0	214	204	446	0	0	0	0
87572	23-2038295	01/01/2002	Scottish Re U.S. Inc	NC	YRT/I	8,285,649	29,914	26,209	21,274	0	0	0	0
87572	23-2038295	07/01/2002	Scottish Re U.S. Inc	NC	DIS/I	0	66	53	97	0	0	0	0
87572	23-2038295	07/01/2002	Scottish Re U.S. Inc	NC	YRT/I	6,112,656	33,418	30,910	22,739	0	0	0	0
87572	23-2038295	01/01/2003	Scottish Re U.S. Inc	NC	DIS/I	0	74	73	146	0	0	0	0
87572	23-2038295	01/01/2003	Scottish Re U.S. Inc	NC	YRT/I	4,818,544	17,765	15,375	14,599	0	0	0	0
87572	23-2038295	01/19/2005	Scottish Re U.S. Inc	NC	DIS/I	0	22	12	44	0	0	0	0
87572	23-2038295	01/19/2005	Scottish Re U.S. Inc	NC	YRT/I	5,972,134	21,046	19,368	24,560	0	0	0	0
87572	23-2038295	09/01/2005	Scottish Re U.S. Inc	NC	CO/I	219,238,398	3,413,504	3,051,454	294,321	0	0	0	0
87572	23-2038295	09/01/2005	Scottish Re U.S. Inc	NC	DIS/I	0	4,112	4,171	7,984	0	0	0	0
87572	23-2038295	12/01/2005	Scottish Re U.S. Inc	NC	CO/I	82,112,215	1,297,992	1,158,944	106,738	0	0	0	0
87572	23-2038295	12/01/2005	Scottish Re U.S. Inc	NC	DIS/I	0	1,094	1,161	2,000	0	0	0	0
87572	23-2038295	01/01/2006	Scottish Re U.S. Inc	NC	CO/I	1,283,799,858	16,559,413	14,065,287	1,727,218	0	0	0	0

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1	2	3	4	5	6	7	Reserve Credit Taken		10	Outstanding Surplus Relief		13	14
							8	9		11	12		
NAIC Company Code	Federal ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
87572	23-2038295	01/01/2006	Scottish Re U.S. Inc	NC	DIS/I	0	26,112	27,600	50,847	0	0	0	0
87572	23-2038295	01/01/2006	Scottish Re U.S. Inc	NC	YRT/I	43,824,109	139,214	212,561	110,690	0	0	0	0
64688	75-6020048	04/01/2004	SCOR Global Life Americas Reinsurance Company	TX	YRT/I	4,695,838	460	3,822	2,757	0	0	0	0
64688	75-6020048	01/19/2005	SCOR Global Life Americas Reinsurance Company	TX	YRT/I	2,553,962	124	810	1,404	0	0	0	0
64688	75-6020048	01/01/2006	SCOR Global Life Americas Reinsurance Company	TX	YRT/I	11,230,593	402	2,381	(16,283)	0	0	0	0
64688	75-6020048	10/01/2007	SCOR Global Life Americas Reinsurance Company	TX	YRT/I	2,978,369	40	202	611	0	0	0	0
86231	39-0989781	01/13/1988	Transamerica Life Insurance Company	NC	YRT/I	61,288	755	703	1,503	0	0	0	0
86231	39-0989781	01/01/2006	Transamerica Life Insurance Company	NC	CO/I	1,615,879,507	17,589,214	15,167,207	2,178,963	0	0	0	0
86231	39-0989781	01/01/2006	Transamerica Life Insurance Company	NC	DIS/I	0	32,671	34,307	63,630	0	0	0	0
86231	39-0989781	01/01/2006	Transamerica Life Insurance Company	NC	YRT/I	148,836,446	642,463	741,109	571,322	0	0	0	0
86231	39-0989781	06/04/2007	Transamerica Life Insurance Company	NC	DIS/I	0	51	14,358	(6,807)	0	0	0	0
86231	39-0989781	06/04/2007	Transamerica Life Insurance Company	NC	YRT/I	6,670,197	16,606	2,366,203	(134,305)	0	0	0	0
86231	39-0989781	10/01/2007	Transamerica Life Insurance Company	NC	DIS/I	0	1,678	4,234	2,834	0	0	0	0
86231	39-0989781	10/01/2007	Transamerica Life Insurance Company	NC	YRT/I	171,631,492	331,010	1,410,467	422,445	0	0	0	0
80586	13-6150240	10/01/2007	XL Re Life America, Inc	CT	DIS/I	0	1,551	1,476	2,673	0	0	0	0
80586	13-6150240	10/01/2007	XL Re Life America, Inc	CT	YRT/I	111,685,834	227,874	242,413	291,375	0	0	0	0
80586	13-6150240	10/10/2009	XL Re Life America, Inc	CT	DIS/I	0	809	577	1,707	0	0	0	0
80586	13-6150240	10/10/2009	XL Re Life America, Inc	CT	YRT/I	173,501,773	385,253	199,669	638,100	0	0	0	0
0499999.	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates					60,969,941,117	560,475,389	435,222,640	121,137,966	0	0	0	0
General Account - Authorized - Non-Affiliates - Non-U.S. Non-Affiliates													
80659	38-0397420	04/01/2004	The Canada Life Assurance Company	CA	CO/I	690,405,053	13,169,258	12,214,522	939,155	0	0	0	0
80659	38-0397420	04/01/2004	The Canada Life Assurance Company	CA	DIS/I	0	18,962	69,815	23,034	0	0	0	0
80659	38-0397420	04/01/2004	The Canada Life Assurance Company	CA	YRT/I	5,241,530	6,190	4,634	8,903	0	0	0	0
80659	38-0397420	01/19/2005	The Canada Life Assurance Company	CA	CO/I	498,224,621	8,176,501	7,307,226	677,969	0	0	0	0
80659	38-0397420	01/19/2005	The Canada Life Assurance Company	CA	DIS/I	0	7,596	8,002	14,904	0	0	0	0
80659	38-0397420	01/19/2005	The Canada Life Assurance Company	CA	YRT/I	3,623,220	4,408	4,010	6,287	0	0	0	0
80659	38-0397420	07/01/2005	The Canada Life Assurance Company	CA	CO/I	188,817,625	3,941,753	3,494,419	300,461	0	0	0	0
80659	38-0397420	07/01/2005	The Canada Life Assurance Company	CA	DIS/I	0	3,044	3,198	5,882	0	0	0	0
80659	38-0397420	09/01/2005	The Canada Life Assurance Company	CA	CO/I	252,677,620	4,126,057	3,642,758	392,913	0	0	0	0
80659	38-0397420	09/01/2005	The Canada Life Assurance Company	CA	DIS/I	0	4,828	4,875	9,415	0	0	0	0
80675	38-0455060	08/01/1982	Crown Life Insurance Company	CA	YRT/I	473,071	3,866	3,488	6,536	0	0	0	0
80675	38-0455060	09/10/1987	Crown Life Insurance Company	CA	YRT/I	95,129	998	935	1,942	0	0	0	0
0599999.	Total - General Account - Authorized - Non-Affiliates - Non-U.S. Non-Affiliates					1,639,557,869	29,463,461	26,757,882	2,387,401	0	0	0	0
0699999.	Total - General Account - Authorized - Non-Affiliates					62,609,498,986	589,938,850	461,980,522	123,525,367	0	0	0	0
0799999.	Total - General Account - Authorized					63,254,202,083	828,799,431	644,956,185	177,590,497	0	0	0	0
General Account - Unauthorized - Affiliates - U.S. Affiliates													
13575	26-3791519	12/31/2008	Montgomery Re	VT	CO/I	9,104,739,045	53,299,007	73,366,406	15,228,330	0	0	0	0
13575	26-3791519	12/31/2008	Montgomery Re	VT	DIS/I	0	343,908	534,678	240,414	0	0	0	0

SCHEDULE S - PART 3 - SECTION 1

Reinsurance Ceded Life Insurance, Annuities, Deposit Funds and Other Liabilities
Without Life or Disability Contingencies, and Related Benefits Listed by Reinsuring Company as of December 31, Current Year

1	2	3	4	5	6	7	Reserve Credit Taken		10	Outstanding Surplus Relief		13	14
							8	9		11	12		
NAIC Company Code	Federal ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
13575	26-3791519	06/30/2009	Montgomery Re	VT	CO/I	11,303,983,994	74,856,291	76,943,174	14,248,610	0	0	0	0
13575	26-3791519	06/30/2009	Montgomery Re	VT	DIS/I	0	928,997	961,059	360,454	0	0	0	0
13575	26-3791519	05/01/2011	Montgomery Re	VT	CO/I	21,141,534,853	206,219,213	0	34,069,846	0	0	0	0
13575	26-3791519	05/01/2011	Montgomery Re	VT	DIS/I	0	1,118,428	0	712,339	0	0	0	0
0899999.	Total - General Account - Unauthorized - Affiliates - U.S. Affiliates					41,550,257,892	336,765,844	151,805,317	64,859,993	0	0	0	0
1099999.	Total - General Account - Unauthorized - Affiliates					41,550,257,892	336,765,844	151,805,317	64,859,993	0	0	0	0
General Account - Unauthorized - Non-Affiliates - Non-U.S. Non-Affiliates													
00000	AA-3190770	01/01/2006	Ace Tempest Life Reinsurance	BM	DIS/I	0	547	493	1,010	0	0	0	0
00000	AA-3190770	01/01/2006	Ace Tempest Life Reinsurance	BM	YRT/I	51,488,551	142,381	151,797	130,755	0	0	0	0
1299999.	Total - General Account - Unauthorized - Non-Affiliates - Non-U.S. Non-Affiliates					51,488,551	142,928	152,290	131,765	0	0	0	0
1399999.	Total - General Account - Unauthorized - Non-Affiliates					51,488,551	142,928	152,290	131,765	0	0	0	0
1499999.	Total - General Account - Unauthorized					41,601,746,443	336,908,772	151,957,607	64,991,758	0	0	0	0
1599999.	Total - General Account - Authorized and Unauthorized					104,855,948,526	1,165,708,203	796,913,792	242,582,255	0	0	0	0
3199999.	Total U.S.					103,164,902,106	1,136,101,814	770,003,620	240,063,089	0	0	0	0
3299999.	Total Non-U.S.					1,691,046,420	29,606,389	26,910,172	2,519,166	0	0	0	0
3399999.	Total					104,855,948,526	1,165,708,203	796,913,792	242,582,255	0	0	0	0

SCHEDULE S - PART 3 - SECTION 2

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

1	2	3	4	5	6	7	8	9	Outstanding Surplus Relief		12	13
									10	11		
NAIC Company Code	Federal ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type	Premiums	Unearned Premiums (estimated)	Reserve Credit Taken Other Than for Unearned Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
General Account - Authorized - Affiliates - U.S. Affiliates												
67172	31-0397080	08/03/1979	The Ohio National Life Insurance Company	OH	CO/I	4,411,835	91,386	61,863,295	0	0	0	0
0199999.	Total - General Account - Authorized - Affiliates - U.S. Affiliates					4,411,835	91,386	61,863,295	0	0	0	0
0399999.	Total - General Account - Authorized - Affiliates					4,411,835	91,386	61,863,295	0	0	0	0
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates												
39845	48-0921045	09/01/1967	Employer's Reinsurance Corporation	MO	CO/I	25,414	5,676	173,675	0	0	0	0
86258	13-2572994	01/01/1999	General Re Life Corporation	CT	CO/I	557,045	141,068	1,256,365	0	0	0	0
66346	58-0828824	01/01/1999	Munich American Reassurance Company	GA	CO/I	625,250	189,587	1,282,882	0	0	0	0
82627	06-0839705	02/01/1981	Swiss Re Life & Health America, Inc	CT	CO/I	6,809,929	1,925,173	96,121,248	0	0	0	0
67598	04-1768571	11/01/1988	UnumProvident Corporation	MA	CO/I	664,939	289,866	15,239,821	0	0	0	0
0499999.	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates					8,682,577	2,551,370	114,073,991	0	0	0	0
0699999.	Total - General Account - Authorized - Non-Affiliates					8,682,577	2,551,370	114,073,991	0	0	0	0
0799999.	Total - General Account - Authorized					13,094,412	2,642,756	175,937,286	0	0	0	0
1599999.	Total - General Account - Authorized and Unauthorized					13,094,412	2,642,756	175,937,286	0	0	0	0
3199999.	Total - U.S.					13,094,412	2,642,756	175,937,286	0	0	0	0
3399999.	Total					13,094,412	2,642,756	175,937,286	0	0	0	0

SCHEDULE S - PART 4

Reinsurance Ceded To Unauthorized Companies

1	2	3	4	5	6	7	8	9	Letter of Credit Issuing or Confirming Bank (a)			13	14	15	16	17
									10	11	12					
NAIC Company Code	Federal ID Number	Effective Date	Name of Reinsurer	Reserve Credit Taken	Paid and Unpaid Losses Recoverable (Debit)	Other Debits	Total (Cols. 5 + 6 + 7)	Letters of Credit	American Bankers Association (ABA) Routing Number	Letter of Credit Code	Bank Name	Trust Agreements	Funds Deposited by and Withheld from Reinsurers	Other	Miscellaneous Balances (Credit)	Sum of Cols. 9 + 13 + 14 + 15 + 16 But Not in Excess of Col. 8
General Account - Life and Annuity - Affiliates - U.S. Affiliates																
13575	26-3791519	12/31/2008	Montgomery Re	53,299,007	0	0	53,299,007	0	0			53,299,007	0	0	2,566,186	53,299,007
13575	26-3791519	12/31/2008	Montgomery Re	343,908	0	0	343,908	0	0			343,908	0	0	40,513	343,908
13575	26-3791519	06/30/2009	Montgomery Re	74,856,291	0	0	74,856,291	0	0			74,856,291	0	0	2,401,089	74,856,291
13575	26-3791519	06/30/2009	Montgomery Re	928,997	0	0	928,997	0	0			928,997	0	0	60,742	928,997
13575	26-3791519	05/01/2011	Montgomery Re	206,219,213	0	0	206,219,213	0	0			249,579,022	0	0	5,741,244	206,219,213
13575	26-3791519	05/01/2011	Montgomery Re	1,118,428	0	0	1,118,428	0	0			1,118,428	0	0	120,039	1,118,428
0199999.	Total - General Account - Life and Annuity - Affiliates - U.S. Affiliates			336,765,844	0	0	336,765,844	0	XXX	XXX	XXX	380,125,653	0	0	10,929,813	336,765,844
0399999.	Total - General Account - Life and Annuity - Affiliates			336,765,844	0	0	336,765,844	0	XXX	XXX	XXX	380,125,653	0	0	10,929,813	336,765,844
General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates																
00000	AA-3190770	01/01/2006	Ace Tempest Life Reinsurance	547	0	0	547	547	121000248	1	Wells Fargo	0	0	0	0	547
00000	AA-3190770	01/01/2006	Ace Tempest Life Reinsurance	142,381	0	0	142,381	144,453	121000248	1	Wells Fargo	0	0	0	0	142,381
0599999.	Total - General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates			142,928	0	0	142,928	145,000	XXX	XXX	XXX	0	0	0	0	142,928
0699999.	Total - General Account - Life and Annuity - Non-Affiliates			142,928	0	0	142,928	145,000	XXX	XXX	XXX	0	0	0	0	142,928
0799999.	Total - General Account - Life and Annuity			336,908,772	0	0	336,908,772	145,000	XXX	XXX	XXX	380,125,653	0	0	10,929,813	336,908,772
1599999.	Total - General Account			336,908,772	0	0	336,908,772	145,000	XXX	XXX	XXX	380,125,653	0	0	10,929,813	336,908,772
2399999.	Total - U.S.			336,765,844	0	0	336,765,844	0	XXX	XXX	XXX	380,125,653	0	0	10,929,813	336,765,844
2499999.	Total - Non-U.S.			142,928	0	0	142,928	145,000	XXX	XXX	XXX	0	0	0	0	142,928
2599999.	Total			336,908,772	0	0	336,908,772	145,000	XXX	XXX	XXX	380,125,653	0	0	10,929,813	336,908,772

SCHEDULE S - PART 5

Five-Year Exhibit of Reinsurance Ceded Business
(000 Omitted)

		1 2011	2 2010	3 2009	4 2008	5 2007
A.	**OPERATIONS ITEMS**					
1.	Premiums and annuity considerations for life and accident and health contracts	255,677	193,458	144,844	121,943	158,537
2.	Commissions and reinsurance expense allowances	108,257	27,915	39,453	53,429	17,613
3.	Contract claims	160,901	135,057	103,194	67,066	55,969
4.	Surrender benefits and withdrawals for life contracts	0	0	0	0	0
5.	Dividends to policyholders	0	0	0	0	0
6.	Reserve adjustments on reinsurance ceded	0	0	0	0	0
7.	Increase in aggregate reserves for life and accident and health contracts	504,780	74,386	119,906	211,847	156,592
B.	**BALANCE SHEET ITEMS**					
8.	Premiums and annuity considerations for life and accident and health contracts deferred and uncollected	0	0	0	0	0
9.	Aggregate reserves for life and accident and health contracts	1,344,288	985,808	911,421	798,072	586,225
10.	Liability for deposit-type contracts	0	0	0	0	0
11.	Contract claims unpaid	25,702	14,399	16,861	9,461	4,902
12.	Amounts recoverable on reinsurance	12,686	7,661	8,682	4,696	2,866
13.	Experience rating refunds due or unpaid	0	0	0	0	0
14.	Policyholders' dividends (not included in Line 10)	0	0	0	0	0
15.	Commissions and reinsurance expense allowances unpaid	0	0	0	0	0
16.	Unauthorized reinsurance offset	0	0	0	0	0
C.	**UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)**					
17.	Funds deposited by and withheld from (F)	0	0	0	0	0
18.	Letters of credit (L)	145	150,000	150,810	100,810	781
19.	Trust agreements (T)	380,126	47,251	47,489	14,984	0
20.	Other (O)	0	0	0	0	0

SCHEDULE S - PART 6

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

		1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
	ASSETS (Page 2, Col. 3)			
1.	Cash and invested assets (Line 12)	2,565,873,308	0	2,565,873,308
2.	Reinsurance (Line 16)	12,792,729	0	12,792,729
3.	Premiums and considerations (Line 15)	119,173,472	0	119,173,472
4.	Net credit for ceded reinsurance	XXX	1,369,990,366	1,369,990,366
5.	All other admitted assets (balance)	250,880,521	0	250,880,521
6.	Total assets excluding Separate Accounts (Line 26)	2,948,720,030	1,369,990,366	4,318,710,396
7.	Separate Account Assets (Line 27)	223,761,892	0	223,761,892
8.	Total assets (Line 28)	3,172,481,922	1,369,990,366	4,542,472,288
	LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9.	Contract reserves (Lines 1 and 2)	2,421,300,681	1,344,288,245	3,765,588,926
10.	Liability for deposit-type contracts (Line 3)	953,238	0	953,238
11.	Claim reserves (Line 4)	11,723,045	25,702,121	37,425,166
12.	Policyholder dividends/reserves (Lines 5 through 7)	0	0	0
13.	Premium & annuity considerations received in advance (Line 8)	581,547	0	581,547
14.	Other contract liabilities (Line 9)	13,449,767	0	13,449,767
15.	Reinsurance in unauthorized companies (Line 24.2)	0	0	0
16.	Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.3)	0	0	0
17.	All other liabilities (balance)	168,305,928	0	168,305,928
18.	Total liabilities excluding Separate Accounts (Line 26)	2,616,314,206	1,369,990,366	3,986,304,572
19.	Separate Account liabilities (Line 27)	223,761,892	0	223,761,892
20.	Total liabilities (Line 28)	2,840,076,098	1,369,990,366	4,210,066,464
21.	Capital & surplus (Line 38)	332,405,827	XXX	332,405,827
22.	Total liabilities, capital & surplus (Line 39)	3,172,481,925	1,369,990,366	4,542,472,291
	NET CREDIT FOR CEDED REINSURANCE			
23.	Contract reserves	1,344,288,245		
24.	Claim reserves	25,702,121		
25.	Policyholder dividends/reserves	0		
26.	Premium & annuity considerations received in advance	0		
27.	Liability for deposit-type contracts	0		
28.	Other contract liabilities	0		
29.	Reinsurance ceded assets	0		
30.	Other ceded reinsurance recoverables	0		
31.	Total ceded reinsurance recoverables	1,369,990,366		
32.	Premiums and considerations	0		
33.	Reinsurance in unauthorized companies	0		
34.	Funds held under reinsurance treaties with unauthorized reinsurers	0		
35.	Other ceded reinsurance payables/offsets	0		
36.	Total ceded reinsurance payables/offsets	0		
37.	Total net credit for ceded reinsurance	1,369,990,366		

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.		Direct Business Only					
		1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1. Alabama	AL	6,220,017	240	429,745	0	0	6,650,002
2. Alaska	AK	47,852	0	5,669	0	0	53,521
3. Arizona	AZ	4,589,531	360	66,504	0	0	4,656,395
4. Arkansas	AR	3,127,929	0	62,730	0	0	3,190,659
5. California	CA	37,547,044	0	1,801,122	0	0	39,348,166
6. Colorado	CO	10,513,213	0	1,537,970	0	0	12,051,183
7. Connecticut	CT	6,215,038	0	99,602	0	0	6,314,640
8. Delaware	DE	371,426	0	30,379	0	0	401,805
9. District of Columbia	DC	627,084	0	30,746	0	0	657,830
10. Florida	FL	30,749,128	1,148	848,394	0	0	31,598,670
11. Georgia	GA	17,883,777	0	347,466	0	0	18,231,243
12. Hawaii	HI	94,036	0	9,714	0	0	103,750
13. Idaho	ID	4,080,279	0	269,440	0	0	4,349,719
14. Illinois	IL	15,292,511	0	306,964	0	0	15,599,475
15. Indiana	IN	12,015,177	0	275,294	0	0	12,290,471
16. Iowa	IA	7,175,482	0	203,878	0	0	7,379,360
17. Kansas	KS	8,019,367	2,300	329,636	0	0	8,351,303
18. Kentucky	KY	4,869,284	0	242,337	0	0	5,111,621
19. Louisiana	LA	3,334,915	0	167,359	0	0	3,502,274
20. Maine	ME	1,146,659	0	1,589	0	0	1,148,248
21. Maryland	MD	8,899,135	2,958	370,515	0	0	9,272,608
22. Massachusetts	MA	10,294,375	0	167,695	0	0	10,462,070
23. Michigan	MI	14,832,558	0	702,314	0	0	15,534,872
24. Minnesota	MN	6,601,786	0	206,045	0	0	6,807,831
25. Mississippi	MS	2,795,233	0	178,142	0	0	2,973,375
26. Missouri	MO	11,159,400	340	237,458	0	0	11,397,198
27. Montana	MT	2,359,457	0	35,986	0	0	2,395,443
28. Nebraska	NE	6,612,122	0	134,308	0	0	6,746,430
29. Nevada	NV	1,553,571	0	49,228	0	0	1,602,799
30. New Hampshire	NH	3,793,344	0	30,250	0	0	3,823,594
31. New Jersey	NJ	6,603,092	400	324,984	0	0	6,928,476
32. New Mexico	NM	825,448	0	41,503	0	0	866,951
33. New York	NY	1,045,133	0	45,327	0	0	1,090,460
34. North Carolina	NC	17,390,883	42,519	448,550	0	0	17,881,952
35. North Dakota	ND	1,106,236	0	39,835	0	0	1,146,071
36. Ohio	OH	36,065,686	0	1,411,220	0	0	37,476,906
37. Oklahoma	OK	9,699,017	0	94,681	0	0	9,793,698
38. Oregon	OR	4,018,395	0	285,316	0	0	4,303,711
39. Pennsylvania	PA	17,485,786	449,584	894,514	0	0	18,829,884
40. Rhode Island	RI	1,296,949	0	12,239	0	0	1,309,188
41. South Carolina	SC	3,061,470	0	75,271	0	0	3,136,741
42. South Dakota	SD	453,314	0	15,965	0	0	469,279
43. Tennessee	TN	14,950,962	3,671	392,667	0	0	15,347,300
44. Texas	TX	38,090,047	113	1,199,015	0	0	39,289,175
45. Utah	UT	3,755,213	0	34,491	0	0	3,789,704
46. Vermont	VT	1,581,804	0	6,344	0	0	1,588,148
47. Virginia	VA	13,141,471	2,050	339,474	0	0	13,482,995
48. Washington	WA	7,112,737	0	478,597	0	0	7,591,334
49. West Virginia	WV	1,380,628	400	262,524	0	0	1,643,552
50. Wisconsin	WI	7,594,319	0	374,663	0	0	7,968,982
51. Wyoming	WY	938,988	0	33,266	0	0	972,254
52. American Samoa	AS	0	0	0	0	0	0
53. Guam	GU	18,498	0	0	0	0	18,498
54. Puerto Rico	PR	4,487,005	0	246,103	0	0	4,733,108
55. US Virgin Islands	VI	0	0	0	0	0	0
56. Northern Mariana Islands	MP	0	0	0	0	0	0
57. Canada	CN	7,825	0	0	0	0	7,825
58. Aggregate Other Alien	OT	0	0	0	0	0	0
59. Totals		434,931,636	506,083	16,235,028	0	0	451,672,747

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 Federal ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 *
Members														
0704	Ohio National Mutual, Inc	0	31-1614095	0	0		Ohio National Mutual, Inc	OH	UIP		Ownership, Board of Directors, Management	0.00		0
0704	Ohio National Mutual, Inc	0	31-1614097	0	0		Ohio National Financial Sevices, Inc	OH	UIP	Ohio National Mutual, Inc	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc	0
0704	Ohio National Mutual, Inc	0	98-0602966	0	0		Sycamore Re, Ltd	BM	IA	Ohio National Financial Services, Inc	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc	0
0704	Ohio National Mutual, Inc	0	31-1702660	0	0		ON Global Holdings, LLC	OH	NIA	Sycamore Re LTD	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc	0
0704	Ohio National Mutual, Inc	0		0	0		Ohio National Sudamerica S.A.	CL	NIA	ON Global Holding, LLC	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc	0
0704	Ohio National Mutual, Inc	0		0	0		Ohio National Seguros de Vida S.A	CL	IA	Ohio National Sudamerica S.A	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc	0
0704	Ohio National Mutual, Inc	0	06-1187459	0	0		Fiduciary Capital Management, Inc	CT	NIA	Ohio National Financial Services, Inc	Ownership, Board of Directors, Management	60.80	Ohio National Mutual, Inc	0
0704	Ohio National Mutual, Inc	0	31-0397080	0	0		The Ohio National Life Insurance Company	OH	UDP	Ohio National Financial Services, Inc	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc	0
0704	Ohio National Mutual, Inc	0	31-0962495	0	0		Ohio National Life Assurance Coporation	OH		The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc	0
0704	Ohio National Mutual, Inc	0	13-2740556	0	0		National Security Life and Annuity Company	NY	IA	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc	0

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 Federal ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 *
0704	Ohio National Mutual, Inc.	0	26-37591519	0	0		Montgomery Re, Inc.	VT	IA	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0	27-3959024	0	0		Kenwood Re, Inc.	VT	NIA	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0	31-1454693	0	0		Ohio National Investments, Inc.	OH	NIA	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0	31-1454699	0	0		Ohio National Equities, Inc.	OH	NIA	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0	31-0742113	0	0		The O.N. Equity Sales Company	OH	NIA	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0	32-0071428	0	0		Ohio National Insurance Agency, Inc.	OH	NIA	The O.N. Equity Sales Company	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0	31-0784369	0	0		O.N. Investment Management Company	OH	NIA	The O.N. Equity Sales Company	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0	63-1202147	0	0		Ohio National insurance Agency of Alabama, Inc.	AL	NIA	The O.N. Equity Sales Company	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0	31-1684349	0	0		ON Flight, Inc.	OH	NIA	Ohio National Financial Services, Inc.	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc.	0

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 Federal ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 *
0704.....	Ohio National Mutual, Inc.....	0.....	26-4812790	0.....	0.....	.....	Financial Way Realty, Inc.....	OH.....	NIA.....	Ohio National Financial Services, Inc.....	Ownership, Board of Directors, Management	.....100.00	Ohio National Mutual, Inc.....	0.....
0704.....	Ohio National Mutual, Inc.....	0.....	03-0374493	0.....	0.....	.....	Suffolk Capital Management, LLC.....	NY.....	NIA.....	Ohio National Financial Services, Inc.....	Ownership, Board of Directors, Management	.....81.48	Ohio National Mutual, Inc.....	0.....

SCHEDULE Y

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1 NAIC Company Code	2 Federal ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
Affiliated Transactions												
00000	31-1614095	Ohio National Mutual Holdings, Inc.	0	0	0	0	0	0		0	0	0
00000	31-1614097	Ohio National Financial Services	0	0	(3,100,714)	0	0	0		0	(3,100,714)	0
67172	31-0397080	The Ohio National Life Insurance Company	24,460,000	0	0	0	40,847,003	(16,194,836)		0	49,112,167	(301,460,707)
89206	31-0962495	Ohio National Life Assurance Corporation	(24,460,000)	0	3,100,714	0	(40,851,513)	125,975,616		0	63,764,817	655,489,556
00000	31-1702660	ON Global Holdings, LLC	0	0	0	0	0	0		0	0	0
00000	00-0000000	Ohio National Sudamerica S.A.	0	0	0	0	0	0		0	0	0
00000	00-0000000	Ohio National Seguros de Vida S.A.	0	0	0	0	0	0		0	0	0
00000	06-1187459	Fiduciary Capital Management, Inc.	0	0	0	0	0	0		0	0	0
00000	31-1684349	ON Flight, Inc.	0	0	0	0	0	0		0	0	0
00000	03-0374493	Suffolk Capital Management, LLC	0	0	0	0	0	0		0	0	0
85472	13-2740556	National Security Life and Annuity Co	0	0	0	0	0	0		0	0	0
00000	31-1454693	Ohio National Investments, Inc.	0	0	0	0	0	0		0	0	0
00000	31-1454699	Ohio National Equities, Inc.	0	0	0	0	3,228	0		0	3,228	0
00000	31-0742113	The O.N. Equity Sales Company	0	0	0	0	1,282	0		0	1,282	0
00000	32-0071428	Ohio National Insurance Agency, Inc.	0	0	0	0	0	0		0	0	0
00000	31-0784369	O.N. Investment Management Company	0	0	0	0	0	0		0	0	0
00000	63-1202147	O.N. Insurance Agency of Alabama, Inc.	0	0	0	0	0	0		0	0	0
00000	98-0602966	Sycamore Re, Ltd.	0	0	0	0	0	0		0	0	0
13575	26-3791519	Montgomery Re, Inc.	0	0	0	0	0	(109,780,780)		0	(109,780,780)	(354,028,849)
00000	26-4812790	Financial Way Reality, Inc.	0	0	0	0	0	0		0	0	0
00000	27-3959024	Kenwood Re , Inc.	0	0	0	0	0	0		0	0	0
9999999	Control Totals		0	0	0	0	0	0	XXX	0	0	0

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

		Responses
	MARCH FILING	
1.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2.	Will the confidential Risk-Based Capital Report be filed with the NAIC by March 1?	YES
3.	Will the confidential Risk-Based Capital Report be filed with the state of domicile, if required, by March 1?	YES
4.	Will an actuarial opinion be filed with this statement by March 1?	YES
	APRIL FILING	
5.	Will Management's Discussion and Analysis be filed by April 1?	YES
6.	Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
7.	Will the Adjustment Form (if required) be filed with state of domicile and the NAIC by April 1?	YES
8.	Will the Supplemental Investment Risk Interrogatories be filed by April 1?	YES
	JUNE FILING	
9.	Will an audited financial report be filed by June 1?	YES
10.	Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES
	AUGUST FILING	
11.	Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1?	YES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

	MARCH FILING	
12.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
13.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
14.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
15.	Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	NO
16.	Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	YES
17.	Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?	YES
18.	Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1?	NO
19.	Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1?	NO
20.	Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
21.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
22.	Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1?	NO
23.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
24.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
25.	Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?	YES
26.	Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?	YES
27.	Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1?	NO
28.	Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1?	NO
29.	Will the Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	NO
30.	Will the Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	NO
31.	Will the Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	NO
32.	Will the Actuarial Certification Related to the Reserves required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	NO
33.	Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1?	YES
34.	Will the Workers' Compensation Carve-Out Supplement be filed by March 1?	NO
35.	Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1?	YES
36.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
37.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partners be filed electronically with the NAIC by March 1?	NO
38.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
39.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
	APRIL FILING	
40.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
41.	Will the Interest-Sensitive Life Insurance Products Report Forms be filed with the state of domicile and the NAIC by April 1?	YES
42.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
43.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	YES
44.	Will the Analysis of Annuity Operations by Lines of Business be filed with the state of domicile and the NAIC by April 1?	YES
45	Will the Analysis of Increase in Annuity Reserves During the Year be filed with the state of domicile and the NAIC by April 1?	YES
46.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	YES
47.	Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?	YES
	AUGUST FILING	
48.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

EXPLANATIONS:

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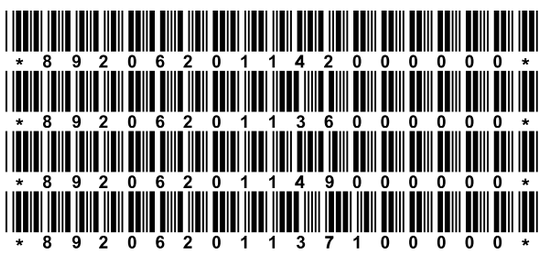
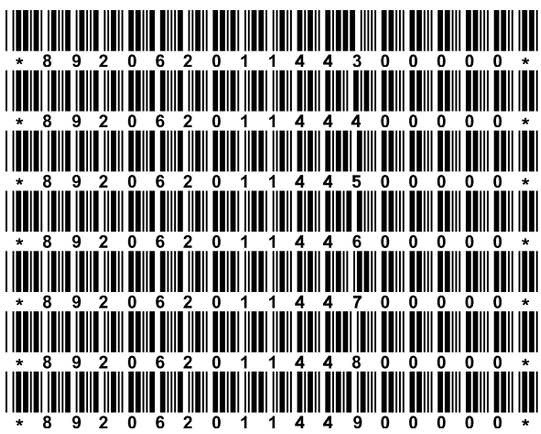
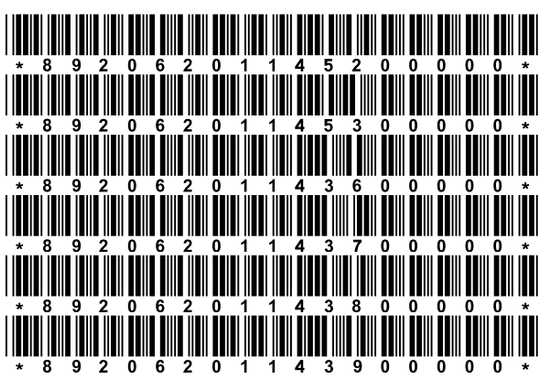
BAR CODE:







SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

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Overflow Page for Write-Ins

Additional Write-ins for Exhibit 2:

	Insurance				5	6
	1	Accident and Health		4		
		2	3	All Other Lines		
	Life	Cost Containment	All Other	of Business	Investment	Total
09.304. Regional General Agent Development	46,368	0	333	0	0	46,701
09.397. Summary of remaining write-ins for Line 9.3	46,368	0	333	0	0	46,701

Overflow Page for Write-Ins

NONE

SCHEDULE O SUPPLEMENT

For the year ended December 31, 2011
(To Be Filed March 1)

Of The.....OHIO NATIONAL LIFE ASSURANCE CORPORATION
Address (City, State, Zip Code).....Cincinnati, OH 45242
NAIC Group Code.....0704 NAIC Company Code.....89206 Employer's ID Number.....31-0962495

SUPPLEMENTAL SCHEDULE O - PART 1

Development of Incurred Losses
($000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Net Amounts Paid Policyholders				
	1	2	3	4	5
	2007	2008	2009	2010	2011 (a)
1. Prior	0	0	0	0	0
2. 2007	0	0	0	0	0
3. 2008	XXX	0	0	0	0
4. 2009	XXX	XXX	0	0	0
5. 2010	XXX	XXX	XXX	0	0
6. 2011	XXX	XXX	XXX	XXX	0

NONE

Section B - Other Accident and Health

1. Prior	2,877	2,288	2,123	1,741	2,543
2. 2007	(42)	342	295	204	191
3. 2008	XXX	364	496	338	152
4. 2009	XXX	XXX	158	320	147
5. 2010	XXX	XXX	XXX	619	144
6. 2011	XXX	XXX	XXX	XXX	68

Section C - Credit Accident and Health

1. Prior	0	0	0	0	0
2. 2007	0	0	0	0	0
3. 2008	XXX	0	0	0	0
4. 2009	XXX	XXX	0	0	0
5. 2010	XXX	XXX	XXX	0	0
6. 2011	XXX	XXX	XXX	XXX	0

NONE

(a) See Paragraph 9 of the Annual Audited Financial Reports in the General section of the Annual Statement Instructions.

SCHEDULE O SUPPLEMENT
SUPPLEMENTAL SCHEDULE O - PART 2

Development of Incurred Losses
($000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Net Amounts Paid for Cost Containment Expenses				
	1 2007	2 2008	3 2009	4 2010	5 2011
1. Prior	0	0	0	0	0
2. 2007	0	0	0	0	0
3. 2008	XXX	0	0	0	0
4. 2009	XXX	XXX	0	0	0
5. 2010	XXX	XXX	XXX	0	0
6. 2011	XXX	XXX	XXX	XXX	0

Section B - Other Accident and Health

1. Prior	0	0	0	0	0
2. 2007	0	0	0	0	0
3. 2008	XXX	0	0	0	0
4. 2009	XXX	XXX	111	0	0
5. 2010	XXX	XXX	XXX	0	0
6. 2011	XXX	XXX	XXX	XXX	0

Section C - Credit Accident and Health

1. Prior	0	0	0	0	0
2. 2007	0	0	0	0	0
3. 2008	XXX	0	0	0	0
4. 2009	XXX	XXX	0	0	0
5. 2010	XXX	XXX	XXX	0	0
6. 2011	XXX	XXX	XXX	XXX	0

NONE

NONE

SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O - PART 3

Development of Incurred Losses

($000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders and Claim Liability and Reserve Outstanding at End of Year				
	1	2	3	4	5
	2007	2008	2009	2010	2011
1. 2007	0	0	0	XXX	XXX
2. 2008	XXX	0	0	0	XXX
3. 2009	XXX	XXX	0	0	0
4. 2010	XXX	XXX	XXX	0	0
5. 2011	XXX	XXX	XXX	XXX	0

NONE

Section B - Other Accident and Health

1. 2007	2,355	1,906	1,619	XXX	XXX
2. 2008	XXX	2,961	2,386	1,464	XXX
3. 2009	XXX	XXX	1,875	1,234	880
4. 2010	XXX	XXX	XXX	2,663	955
5. 2011	XXX	XXX	XXX	XXX	1,672

Section C - Credit Accident and Health

1. 2007	0	0	0	XXX	XXX
2. 2008	XXX	0	0	0	XXX
3. 2009	XXX	XXX	0	0	0
4. 2010	XXX	XXX	XXX	0	0
5. 2011	XXX	XXX	XXX	XXX	0

NONE

SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O - PART 4

Development of Incurred Losses

($000 OMITTED)

Section A - Group Accident and Health

NONE

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at End of Year				
	1	2	3	4	5
	2007	2008	2009	2010	2011
1. 2007	0	0	0	0	0
2. 2008	XXX	0	0	0	0
3. 2009	XXX	XXX	0	0	0
4. 2010	XXX	XXX	XXX	0	0
5. 2011	XXX	XXX	XXX	XXX	0

Section B - Other Accident and Health

1. 2007	2,355	1,906	1,619	1,457	1,332
2. 2008	XXX	2,961	2,386	1,464	1,153
3. 2009	XXX	XXX	1,875	1,234	880
4. 2010	XXX	XXX	XXX	2,663	955
5. 2011	XXX	XXX	XXX	XXX	1,672

Section C - Credit Accident and Health

NONE

1. 2007	0	0	0	0	0
2. 2008	XXX	0	0	0	0
3. 2009	XXX	XXX	0	0	0
4. 2010	XXX	XXX	XXX	0	0
5. 2011	XXX	XXX	XXX	XXX	0

SUPPLEMENTAL SCHEDULE O - PART 5

($000 OMITTED)

Reserve and Liability Methodology - Exhibits 6 and 8

Line of Business	1 Methodology	2 Amount
1. Industrial life		0
2. Ordinary life		11,419
3. Individual annuity		7
4. Supplementary contracts		0
5. Credit life		0
6. Group life		0
7. Group annuities		0
8. Group accident and health		0
9. Credit accident and health		0
10. Other accident and health	Standard Factor and Other	21,297
11. Total		32,723

Sch. O-Pt. 1-Sn. D
NONE

Sch. O-Pt. 1-Sn. E
NONE

Sch. O-Pt. 1-Sn. F
NONE

Sch. O-Pt. 1-Sn. G
NONE

Sch. O-Pt. 2-Sn. D
NONE

Sch. O-Pt. 2-Sn. E
NONE

Sch. O-Pt. 2-Sn. F
NONE

Sch. O-Pt. 2-Sn. G
NONE

Sch. O-Pt. 3-Sn. D
NONE

Sch. O-Pt. 3-Sn. E
NONE

Sch. O-Pt. 3-Sn. F
NONE

Sch. O-Pt. 3-Sn. G
NONE

Sch. O-Pt. 4-Sn. D
NONE

Sch. O-Pt. 4-Sn. E
NONE

Sch. O-Pt. 4-Sn. F
NONE

Sch. O-Pt. 4-Sn. G
NONE

2011 ALPHABETICAL INDEX
LIFE ANNUAL STATEMENT BLANK

SCHEDULE S - PART 4

Reinsurance Ceded To Unauthorized Companies

1	2	3	4	5	6	7	8	9	Letter of Credit Issuing or Confirming Bank (a)			13	14	15	16	17
									10	11	12					
NAIC Company Code	Federal ID Number	Effective Date	Name of Reinsurer	Reserve Credit Taken	Paid and Unpaid Losses Recoverable (Debit)	Other Debits	Total (Cols. 5 + 6 + 7)	Letters of Credit	American Bankers Association (ABA) Routing Number	Letter of Credit Code	Bank Name	Trust Agreements	Funds Deposited by and Withheld from Reinsurers	Other	Miscellaneous Balances (Credit)	Sum of Cols. 9 + 13 + 14 + 15 + 16 But Not in Excess of Col. 8
General Account - Life and Annuity - Affiliates - U.S. Affiliates																
13575	26-3791519	12/31/2008	Montgomery Re	53,299,007	0	0	53,299,007	0	0			53,299,007	0	0	2,566,186	53,299,007
13575	26-3791519	12/31/2008	Montgomery Re	343,908	0	0	343,908	0	0			343,908	0	0	40,513	343,908
13575	26-3791519	06/30/2009	Montgomery Re	74,856,291	0	0	74,856,291	0	0			74,856,291	0	0	2,401,089	74,856,291
13575	26-3791519	06/30/2009	Montgomery Re	928,997	0	0	928,997	0	0			928,997	0	0	60,742	928,997
13575	26-3791519	05/01/2011	Montgomery Re	206,219,213	0	0	206,219,213	0	0			249,579,022	0	0	5,741,244	206,219,213
13575	26-3791519	05/01/2011	Montgomery Re	1,118,428	0	0	1,118,428	0	0			1,118,428	0	0	120,039	1,118,428
0199999.	Total - General Account - Life and Annuity - Affiliates - U.S. Affiliates			336,765,844	0	0	336,765,844	0	XXX	XXX	XXX	380,125,653	0	0	10,929,813	336,765,844
0399999.	Total - General Account - Life and Annuity - Affiliates			336,765,844	0	0	336,765,844	0	XXX	XXX	XXX	380,125,653	0	0	10,929,813	336,765,844
General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates																
00000	AA-3190770	01/01/2006	Ace Tempest Life Reinsurance	547	0	0	547	547	121000248	1	Wells Fargo	0	0	0	0	547
00000	AA-3190770	01/01/2006	Ace Tempest Life Reinsurance	142,381	0	0	142,381	144,453	121000248	1	Wells Fargo	0	0	0	0	142,381
0599999.	Total - General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates			142,928	0	0	142,928	145,000	XXX	XXX	XXX	0	0	0	0	142,928
0699999.	Total - General Account - Life and Annuity - Non-Affiliates			142,928	0	0	142,928	145,000	XXX	XXX	XXX	0	0	0	0	142,928
0799999.	Total - General Account - Life and Annuity			336,908,772	0	0	336,908,772	145,000	XXX	XXX	XXX	380,125,653	0	0	10,929,813	336,908,772
1599999.	Total - General Account			336,908,772	0	0	336,908,772	145,000	XXX	XXX	XXX	380,125,653	0	0	10,929,813	336,908,772
2399999.	Total - U.S.			336,765,844	0	0	336,765,844	0	XXX	XXX	XXX	380,125,653	0	0	10,929,813	336,765,844
2499999.	Total - Non-U.S.			142,928	0	0	142,928	145,000	XXX	XXX	XXX	0	0	0	0	142,928
2599999.	Total			336,908,772	0	0	336,908,772	145,000	XXX	XXX	XXX	380,125,653	0	0	10,929,813	336,908,772

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 Federal ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 *
Members														
0704	Ohio National Mutual, Inc	0	31-1614095	0	0		Ohio National Mutual, Inc	OH	UIP		Ownership, Board of Directors, Management	0.00		0
0704	Ohio National Mutual, Inc	0	31-1614097	0	0		Ohio National Financial Sevices, Inc	OH	UIP	Ohio National Mutual, Inc	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc	0
0704	Ohio National Mutual, Inc	0	98-0602966	0	0		Sycamore Re, Ltd	BM	IA	Ohio National Financial Services, Inc	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc	0
0704	Ohio National Mutual, Inc	0	31-1702660	0	0		ON Global Holdings, LLC	OH	NIA	Sycamore Re LTD	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc	0
0704	Ohio National Mutual, Inc	0		0	0		Ohio National Sudamerica S.A.	CL	NIA	ON Global Holding, LLC	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc	0
0704	Ohio National Mutual, Inc	0		0	0		Ohio National Seguros de Vida S.A	CL	IA	Ohio National Sudamerica S.A	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc	0
0704	Ohio National Mutual, Inc	0	06-1187459	0	0		Fiduciary Capital Management, Inc	CT	NIA	Ohio National Financial Services, Inc	Ownership, Board of Directors, Management	60.80	Ohio National Mutual, Inc	0
0704	Ohio National Mutual, Inc	0	31-0397080	0	0		The Ohio National Life Insurance Company	OH	UDP	Ohio National Financial Services, Inc	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc	0
0704	Ohio National Mutual, Inc	0	31-0962495	0	0		Ohio National Life Assurance Coporation	OH		The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc	0
0704	Ohio National Mutual, Inc	0	13-2740556	0	0		National Security Life and Annuity Company	NY	IA	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc	0

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 Federal ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 *
0704	Ohio National Mutual, Inc.	0	26-37591519	0	0		Montgomery Re, Inc.	VT	IA	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0	27-3959024	0	0		Kenwood Re, Inc.	VT	NIA	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0	31-1454693	0	0		Ohio National Investments, Inc.	OH	NIA	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0	31-1454699	0	0		Ohio National Equities, Inc.	OH	NIA	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0	31-0742113	0	0		The O.N. Equity Sales Company	OH	NIA	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0	32-0071428	0	0		Ohio National Insurance Agency, Inc.	OH	NIA	The O.N. Equity Sales Company	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0	31-0784369	0	0		O.N. Investment Management Company	OH	NIA	The O.N. Equity Sales Company	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0	63-1202147	0	0		Ohio National insurance Agency of Alabama, Inc.	AL	NIA	The O.N. Equity Sales Company	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0	31-1684349	0	0		ON Flight, Inc.	OH	NIA	Ohio National Financial Services, Inc.	Ownership, Board of Directors, Management	100.00	Ohio National Mutual, Inc.	0

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 Federal ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 *
0704.....	Ohio National Mutual, Inc.....	0.....	26-4812790	0.....	0.....	.....	Financial Way Realty, Inc.....	OH.....	NIA.....	Ohio National Financial Services, Inc.....	Ownership, Board of Directors, Management	.....100.00	Ohio National Mutual, Inc.....	0.....
0704.....	Ohio National Mutual, Inc.....	0.....	03-0374493	0.....	0.....	.....	Suffolk Capital Management, LLC.....	NY.....	NIA.....	Ohio National Financial Services, Inc.....	Ownership, Board of Directors, Management	.....81.48	Ohio National Mutual, Inc.....	0.....