



LIFE AND ACCIDENT AND HEALTH COMPANIES — ASSOCIATION EDITION

ANNUAL STATEMENT
For the Year Ended December 31, 2012
OF THE CONDITION AND AFFAIRS OF THE
GRANGE LIFE INSURANCE COMPANY

NAIC Group Code 00267, 00267 NAIC Company Code 71218 Employer's ID Number 31-0739286
Organized under the Laws of Ohio, State of Domicile or Port of Entry Ohio
Country of Domicile United States
Incorporated/Organized 03/05/1968 Commenced Business 07/01/1968
Statutory Home Office 671 South High Street, Columbus, OH, 43206-1066
Main Administrative Office 671 South High Street, Columbus, OH, 43206-1066 614-445-2900
Mail Address P.O. Box 1218, Columbus, OH, 43216-1212
Primary Location of Books and Records 671 South High Street, Columbus, OH, 43206-1066 614-445-2900
Internet Web Site Address www.grangeinsurance.com
Statutory Statement Contact Theresa Marie Mason 614-449-5945
masont@grangeinsurance.com 614-445-2619

OFFICERS

Name Title Name Title
Michelle Renee Benz, President John Paul McCaffrey, Treasurer
LaVawn Dee Coleman #, Secretary Milliman #, Actuary

OTHER OFFICERS

Empty lines for other officers.

DIRECTORS OR TRUSTEES

DOUGLAS PAUL BUTH, GLENN EUGENE CORLETT, ELWOOD GORDON GEE, ROBERT ENLOW HOYT
JOHN PAUL MCCAFFREY, ROBERT JOHN O'BRIEN, MICHAEL VERNE PARROTT, MARY MARNETTE PERRY
MELVIN GEORGE PYE JR, THOMAS SIMRALL STEWART, THOMAS HOWARD WELCH, DAVID CHARLES WETMORE

State of OHIO
County of FRANKLIN

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.

Michelle Renee Benz
President

John Paul McCaffrey
Treasurer

LaVawn Dee Coleman
Secretary

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

Subscribed and sworn to before me this
22nd day of February, 2013

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

Sherry Thatcher, Notary Public
10/17/2015



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Alabama

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS.

Table with 10 columns: 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. Rows include DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include 24. Group policies (b) and 25. Other Individual Policies.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Alaska

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and Grand Totals.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 1-2 Ordinary (No., Amount), 3-4 Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), 5-6 Group (No. of Certifs., Amount), 7-8 Industrial (No., Amount), 9-10 Total (No., Amount). Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and Totals.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF American Samoa

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and Grand Totals.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 1-2 Ordinary (No., Amount), 3-4 Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), 5-6 Group (No. of Certifs., Amount), 7-8 Industrial (No., Amount), 9-10 Total (No., Amount). Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, Medicare Title XVIII, and Other Individual Policies.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Arizona

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS.

Table with 10 columns: 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. Rows include DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include 24. Group policies (b) and 26. Totals.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Arkansas

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and Grand Totals.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 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. Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and Totals.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF California

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS.

Table with 10 columns: 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. Rows include DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

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

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Canada

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	12,713				12,713
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	12,713	0	0	0	12,713
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					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
7.2 Applied to provide paid-up annuities					0
7.3 Other					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
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts					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
15. Totals	0	0	0	0	0
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										0
Settled during current year:										0
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	18	3,082,000	0	(a)	0	0	0	0	18	3,082,000
21. Issued during year									0	0
22. Other changes to in force (Net)	2	(430,000)							2	(430,000)
23. In force December 31 of current year	20	2,652,000	0	(a)	0	0	0	0	20	2,652,000

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
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

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Colorado

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and various dividend and claim categories.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 1-2 Ordinary (No., Amount), 3-4 Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), 5-6 Group (No. of Certifs., Amount), 7-8 Industrial (No., Amount), 9-10 Total (No., Amount). Rows include Unpaid December 31, Incurred during current year, and Policy Exhibit details.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and various individual policy types.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Connecticut

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and Grand Totals.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 1-2 Ordinary (No., Amount), 3-4 Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), 5-6 Group (No. of Certifs., Amount), 7-8 Industrial (No., Amount), 9-10 Total (No., Amount). Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and Totals.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Delaware

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	3,225				3,225
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	3,225	0	0	0	3,225
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					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
7.2 Applied to provide paid-up annuities					0
7.3 Other					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
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts					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
15. Totals	0	0	0	0	0
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	8	1,370,000	0	0	0	0	0	0	8	1,370,000
21. Issued during year									0	0
22. Other changes to in force (Net)	1	375,000							1	375,000
23. In force December 31 of current year	9	1,745,000	0	0	0	0	0	0	9	1,745,000

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
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

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF District of Columbia

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and Grand Totals.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, Ordinary (1, 2), Credit Life (3, 4), Group (5, 6), Industrial (7, 8), Total (9, 10). Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and Totals.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Florida

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	565,412				565,412
2. Annuity considerations	6,300				6,300
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	571,712	0	0	0	571,712
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	560				560
6.4 Other					0
6.5 Totals (Sum of Lines 6.1 to 6.4)	560	0	0	0	560
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					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)	560	0	0	0	560
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits	38,901				38,901
12. Surrender values and withdrawals for life contracts	85,610				85,610
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
15. Totals	124,511	0	0	0	124,511
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year	946	142,274,317	(a)	0	No. of Policies	0	0	0	946	142,274,317
21. Issued during year									0	0
22. Other changes to in force (Net)	19	(3,466,981)							19	(3,466,981)
23. In force December 31 of current year	965	138,807,336	(a)	0	0	0	0	0	965	138,807,336

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	4,488	4,488			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	4,488	4,488	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	4,488	4,488	0	0	0

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Georgia

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	6,109,980		35,262		6,145,242
2. Annuity considerations	97,310				97,310
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	6,207,290	0	35,262	0	6,242,552
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					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
7.2 Applied to provide paid-up annuities					0
7.3 Other					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	3,481,245		10,023		3,491,268
10. Matured endowments					0
11. Annuity benefits	139,385				139,385
12. Surrender values and withdrawals for life contracts	219,203				219,203
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
15. Totals	3,839,833	0	10,023	0	3,849,856
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	9	232,000	0	0	0	0	0	0	9	232,000
17. Incurred during current year	50	4,323,007			1	10,023			51	4,333,030
Settled during current year:										
18.1 By payment in full	53	3,481,245			1	10,023			54	3,491,268
18.2 By payment on compromised claims									0	0
18.3 Totals paid	53	3,481,245	0	0	1	10,023	0	0	54	3,491,268
18.4 Reduction by compromise									0	0
18.5 Amount rejected	1	16,262							1	16,262
18.6 Total settlements	54	3,497,507	0	0	1	10,023	0	0	55	3,507,530
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	5	1,057,500	0	0	0	0	0	0	5	1,057,500
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	9,456	1,601,522,069	0	0	0	0	0	0	9,456	1,601,522,069
21. Issued during year	999	198,301,364							999	198,301,364
22. Other changes to in force (Net)	(612)	(130,889,809)							(612)	(130,889,809)
23. In force December 31 of current year	9,843	1,668,933,624	0	0	0	0	0	0	9,843	1,668,933,624

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	32,342	32,199		21,300	21,300
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	32,342	32,199	0	21,300	21,300
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	32,342	32,199	0	21,300	21,300

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Guam

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and Grand Totals.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 1-2 Ordinary (No., Amount), 3-4 Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), 5-6 Group (No. of Certifs., Amount), 7-8 Industrial (No., Amount), 9-10 Total (No., Amount). Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, Medicare Title XVIII, and Other Individual Policies.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Hawaii

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and various dividend and claim categories.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 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. Rows include Unpaid December 31, Incurred during current year, and Policy Exhibit details.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and various individual policy types.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Idaho

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS.

Table with 10 columns: 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. Rows include DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include 24. Group policies (b) and 25. Other Individual Policies.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Illinois

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	2,240,831		26,598		2,267,429
2. Annuity considerations	114,586				114,586
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	2,355,417	0	26,598	0	2,382,015
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	366				366
6.4 Other					0
6.5 Totals (Sum of Lines 6.1 to 6.4)	366	0	0	0	366
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					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)	366	0	0	0	366
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	95,123				95,123
10. Matured endowments					0
11. Annuity benefits	221,552				221,552
12. Surrender values and withdrawals for life contracts	142,965				142,965
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
15. Totals	459,640	0	0	0	459,640
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	7	130,180							7	130,180
Settled during current year:										
18.1 By payment in full	4	95,123							4	95,123
18.2 By payment on compromised claims									0	0
18.3 Totals paid	4	95,123	0	0	0	0	0	0	4	95,123
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	4	95,123	0	0	0	0	0	0	4	95,123
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	3	35,057	0	0	0	0	0	0	3	35,057
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	3,258	553,752,778	0	0	0	0	0	0	3,258	553,752,778
21. Issued during year	511	108,791,383							511	108,791,383
22. Other changes to in force (Net)	(316)	(39,922,504)							(316)	(39,922,504)
23. In force December 31 of current year	3,453	622,621,657	0	0	0	0	0	0	3,453	622,621,657

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	5,453	5,453			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	5,453	5,453	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	5,453	5,453	0	0	0

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and Grand Totals.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, Ordinary (1, 2), Credit Life (3, 4), Group (5, 6), Industrial (7, 8), Total (9, 10). Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and Totals.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Iowa

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	157,388				157,388
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	157,388	0	0	0	157,388
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					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
7.2 Applied to provide paid-up annuities					0
7.3 Other					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	10,036				10,036
10. Matured endowments					0
11. Annuity benefits	42,521				42,521
12. Surrender values and withdrawals for life contracts	678				678
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
15. Totals	53,235	0	0	0	53,235
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	1	10,036							1	10,036
Settled during current year:										
18.1 By payment in full	1	10,036							1	10,036
18.2 By payment on compromised claims									0	0
18.3 Totals paid	1	10,036	0	0	0	0	0	0	1	10,036
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	1	10,036	0	0	0	0	0	0	1	10,036
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	196	38,876,072	0	0	0	0	0	0	196	38,876,072
21. Issued during year	15	3,120,000							15	3,120,000
22. Other changes to in force (Net)	(8)	(1,240,000)							(8)	(1,240,000)
23. In force December 31 of current year	203	40,756,072	0	0	0	0	0	0	203	40,756,072

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
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

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Kansas

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and various dividend and claim categories.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 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. Rows include Unpaid December 31, Incurred during current year, and Policy Exhibit details.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and various individual policy types.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and Grand Totals.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 1-2 Ordinary (No., Amount), 3-4 Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), 5-6 Group (No. of Certifs., Amount), 7-8 Industrial (No., Amount), 9-10 Total (No., Amount). Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and Totals.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Louisiana

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	30,138				30,138
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	30,138	0	0	0	30,138
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					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
7.2 Applied to provide paid-up annuities					0
7.3 Other					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
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts					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
15. Totals	0	0	0	0	0
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	49	6,792,000	0	0	0	0	0	0	49	6,792,000
21. Issued during year									0	0
22. Other changes to in force (Net)	(5)	(645,000)							(5)	(645,000)
23. In force December 31 of current year	44	6,147,000	0	0	0	0	0	0	44	6,147,000

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
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

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF **Maine**

DURING THE YEAR **2012**

NAIC Group Code **00267**

LIFE INSURANCE

NAIC Company Code **71218**

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	5,013				5,013
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	5,013	0	0	0	5,013
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	440				440
6.4 Other					0
6.5 Totals (Sum of Lines 6.1 to 6.4)	440	0	0	0	440
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					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)	440	0	0	0	440
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	1,914				1,914
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
15. Totals	1,914	0	0	0	1,914
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year	15	1,173,935	0	(a)	0	0	0	0	15	1,173,935
21. Issued during year									0	0
22. Other changes to in force (Net)		(2,121)							0	(2,121)
23. In force December 31 of current year	15	1,171,814	0	(a)	0	0	0	0	15	1,171,814

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
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

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Maryland

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS.

Table with 10 columns: 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. Rows include DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include 24. Group policies (b) and 26. Totals.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Massachusetts

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and Grand Totals.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 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. Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

(a) Includes Individual Credit Life Insurance: prior year \$... current year \$... Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$... current year \$...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and Totals.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Michigan

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	3,546,721		43,272		3,589,993
2. Annuity considerations	147,014				147,014
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	3,693,735	0	43,272	0	3,737,007
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	900				900
6.4 Other					0
6.5 Totals (Sum of Lines 6.1 to 6.4)	900	0	0	0	900
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					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)	900	0	0	0	900
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	3,029,347				3,029,347
10. Matured endowments					0
11. Annuity benefits	291,308				291,308
12. Surrender values and withdrawals for life contracts	102,765				102,765
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
15. Totals	3,423,420	0	0	0	3,423,420
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	4	500,000	0	0	0	0	0	0	4	500,000
17. Incurred during current year	15	2,629,347							15	2,629,347
Settled during current year:										
18.1 By payment in full	18	3,029,347							18	3,029,347
18.2 By payment on compromised claims									0	0
18.3 Totals paid	18	3,029,347	0	0	0	0	0	0	18	3,029,347
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	18	3,029,347	0	0	0	0	0	0	18	3,029,347
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	1	100,000	0	0	0	0	0	0	1	100,000
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	5,039	1,110,792,155	0	0	0	0	0	0	5,039	1,110,792,155
21. Issued during year	840	190,938,643							840	190,938,643
22. Other changes to in force (Net)	(267)	(55,390,011)							(267)	(55,390,011)
23. In force December 31 of current year	5,612	1,246,340,787	0	0	0	0	0	0	5,612	1,246,340,787

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	2,738	2,738			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	2,738	2,738	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,738	2,738	0	0	0

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Minnesota

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS.

Table with 10 columns: 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. Rows include DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include 24. Group policies (b) and 25. Non-cancelable (b) through 25.6 Totals.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Mississippi

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS.

Table with 10 columns: 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. Rows include DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include 24. Group policies (b) and 25. Non-cancelable (b).

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS.

Table with 10 columns: 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. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24. Group policies (b), 24.1 Federal Employees Health Benefits Program premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees, 24.5 All other (b), 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Montana

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and Grand Totals.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 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. Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and Totals.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Nebraska

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and Grand Totals.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 1-2 Ordinary (No., Amount), 3-4 Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), 5-6 Group (No. of Certifs., Amount), 7-8 Industrial (No., Amount), 9-10 Total (No., Amount). Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and Totals.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Nevada

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS.

Table with 10 columns: 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. Rows include DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include 24. Group policies (b) and 26. Totals.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New Hampshire

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and various dividend and claim categories.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 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. Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and various individual policy types.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New Jersey

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS.

Table with 10 columns: 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. Rows include DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include 24. Group policies (b) and 26. Totals.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	7,372				7,372
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	7,372	0	0	0	7,372
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					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
7.2 Applied to provide paid-up annuities					0
7.3 Other					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
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts					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
15. Totals	0	0	0	0	0
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year	20	3,339,312	(a)	0	No. of Policies	0	0	0	20	3,339,312
21. Issued during year									0	0
22. Other changes to in force (Net)	(2)	(844,350)							(2)	(844,350)
23. In force December 31 of current year	18	2,494,962	(a)	0	0	0	0	0	18	2,494,962

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
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

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New York

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS.

Table with 10 columns: 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. Rows include DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include 24. Group policies (b) and 25. Non-cancelable (b).

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF North Carolina

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS.

Table with 10 columns: 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. Rows include DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include 24. Group policies (b), 25. Other Individual Policies, and 26. Totals.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS.

Table with 10 columns: 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. Rows include DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include 24. Group policies (b) and 25. Non-cancelable, 25.2 Guaranteed renewable, 25.3 Non-renewable for stated reasons only, 25.4 Other accident only, 25.5 All other (b), 25.6 Totals.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Northern Mariana Islands

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and Grand Totals.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 1-2 Ordinary (No., Amount), 3-4 Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), 5-6 Group (No. of Certifs., Amount), 7-8 Industrial (No., Amount), 9-10 Total (No., Amount). Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, Medicare Title XVIII, and Other Individual Policies.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and various dividend and claim categories.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, Ordinary (1, 2), Credit Life (3, 4), Group (5, 6), Industrial (7, 8), Total (9, 10). Rows include Unpaid December 31, Incurred during current year, and Policy Exhibit details.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and various accident types.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Oklahoma

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and various dividend and claim categories.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 1-2 Ordinary (No., Amount), 3-4 Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), 5-6 Group (No. of Certifs., Amount), 7-8 Industrial (No., Amount), 9-10 Total (No., Amount). Rows include Unpaid December 31, Incurred during current year, and Policy Exhibit details.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and various individual policy types.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Oregon

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and Grand Totals.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 1-2 Ordinary (No., Amount), 3-4 Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), 5-6 Group (No. of Certifs., Amount), 7-8 Industrial (No., Amount), 9-10 Total (No., Amount). Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and Totals.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Pennsylvania

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	823,576		12,901		836,477
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	823,576	0	12,901	0	836,477
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	650				650
6.4 Other					0
6.5 Totals (Sum of Lines 6.1 to 6.4)	650	0	0	0	650
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					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)	650	0	0	0	650
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits	0				0
12. Surrender values and withdrawals for life contracts	8,388				8,388
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
15. Totals	8,388	0	0	0	8,388
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	1,004	190,613,201	0	(a)	0	0	0	0	1,004	190,613,201
21. Issued during year	250	71,390,508							250	71,390,508
22. Other changes to in force (Net)	(117)	(18,051,135)							(117)	(18,051,135)
23. In force December 31 of current year	1,137	243,952,574	0	(a)	0	0	0	0	1,137	243,952,574

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
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

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Puerto Rico

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	794				794
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	794	0	0	0	794
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					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
7.2 Applied to provide paid-up annuities					0
7.3 Other					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
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts					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
15. Totals	0	0	0	0	0
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0	0	0	0

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

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
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

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Rhode Island

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	884				884
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	884	0	0	0	884
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					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
7.2 Applied to provide paid-up annuities					0
7.3 Other					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
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts					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
15. Totals	0	0	0	0	0
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year	5	1,702,000	(a)	0	No. of Policies	0		0	5	1,702,000
21. Issued during year									0	0
22. Other changes to in force (Net)	(3)	(1,450,000)							(3)	(1,450,000)
23. In force December 31 of current year	2	252,000	(a)	0	0	0	0	0	2	252,000

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
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

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF South Carolina

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and Grand Totals.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, Ordinary (1, 2), Credit Life (3, 4), Group (5, 6), Industrial (7, 8), Total (9, 10). Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and Totals.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and various dividend and claim categories.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 1-2 Ordinary (No., Amount), 3-4 Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), 5-6 Group (No. of Certifs., Amount), 7-8 Industrial (No., Amount), 9-10 Total (No., Amount). Rows include Unpaid December 31, Incurred during current year, and Policy Exhibit details.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and various individual policy types.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and Grand Totals.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 1-10 (Ordinary, Credit Life, Group, Industrial, Total). Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and Totals.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and Grand Totals.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 1-10 (Ordinary, Credit Life, Group, Industrial, Total). Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and Totals.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF U.S. Virgin Islands

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	335				335
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	335	0	0	0	335
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					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
7.2 Applied to provide paid-up annuities					0
7.3 Other					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
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts					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
15. Totals	0	0	0	0	0
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0	0	0	0

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

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
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

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Utah

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and Grand Totals.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 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. Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and Totals.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Vermont

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and various dividend and claim categories.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 1-2 Ordinary (No., Amount), 3-4 Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), 5-6 Group (No. of Certifs., Amount), 7-8 Industrial (No., Amount), 9-10 Total (No., Amount). Rows include Unpaid December 31, Incurred during current year, and Policy Exhibit details.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and various individual policy types.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Virginia

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and Grand Totals.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 1-2 Ordinary (No., Amount), 3-4 Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), 5-6 Group (No. of Certifs., Amount), 7-8 Industrial (No., Amount), 9-10 Total (No., Amount). Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and Totals.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Washington

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS.

Table with 10 columns: 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. Rows include DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include 24. Group policies (b) and 25. Non-cancelable (b).

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF West Virginia

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	127,801				127,801
2. Annuity considerations	5,467				5,467
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	133,268	0	0	0	133,268
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	198				198
6.4 Other					0
6.5 Totals (Sum of Lines 6.1 to 6.4)	198	0	0	0	198
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					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)	198	0	0	0	198
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits	14,872				14,872
12. Surrender values and withdrawals for life contracts	48,131				48,131
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
15. Totals	63,003	0	0	0	63,003
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year	174	29,701,843	(a)	0	No. of Policies	0	0	0	174	29,701,843
21. Issued during year									0	0
22. Other changes to in force (Net)	(12)	(2,091,795)							(12)	(2,091,795)
23. In force December 31 of current year	162	27,610,048	(a)	0	0	0	0	0	162	27,610,048

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	630	630			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	630	630	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	630	630	0	0	0

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Wisconsin

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	996,884		6,145		1,003,029
2. Annuity considerations	10,250				10,250
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	1,007,134	0	6,145	0	1,013,279
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					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
7.2 Applied to provide paid-up annuities					0
7.3 Other					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	1,237,475				1,237,475
10. Matured endowments					0
11. Annuity benefits	87,398				87,398
12. Surrender values and withdrawals for life contracts	18,492				18,492
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
15. Totals	1,343,365	0	0	0	1,343,365
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	6	1,247,475							6	1,247,475
Settled during current year:										
18.1 By payment in full	5	1,237,475							5	1,237,475
18.2 By payment on compromised claims									0	0
18.3 Totals paid	5	1,237,475	0	0	0	0	0	0	5	1,237,475
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	5	1,237,475	0	0	0	0	0	0	5	1,237,475
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	1	10,000	0	0	0	0	0	0	1	10,000
POLICY EXHIBIT										
20. In force December 31, prior year	1,667	346,123,585	(a)	0	No. of Policies	0	0	0	1,667	346,123,585
21. Issued during year	153	33,502,028							153	33,502,028
22. Other changes to in force (Net)	(84)	(23,362,029)							(84)	(23,362,029)
23. In force December 31 of current year	1,736	356,263,584	(a)	0	0	0	0	0	1,736	356,263,584

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
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

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Wyoming

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS.

Table with 10 columns: 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. Rows include DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT.

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

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include 24. Group policies (b) and 25. Non-cancelable, 25.2 Guaranteed renewable, 25.3 Non-renewable for stated reasons only, 25.4 Other accident only, 25.5 All other (b), 25.6 Totals.

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Grand Aliens

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	993	0	0	0	993
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)	993	0	0	0	993
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.					
1302.					
1303.					
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
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 (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year	1	75,000	(a)	0	0	0	0	0	1	75,000
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	1	100,000	0	0	0	0	0	0	1	100,000
23. In force December 31 of current year	2	175,000	(a)	0	0	0	0	0	2	175,000

(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	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employees 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

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



ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Consolidated

DURING THE YEAR 2012

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, and various dividends.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 1-10 (Ordinary, Credit Life, Group, Industrial, Total). Rows include Unpaid December 31, Incurred during current year, and POLICY EXHIBIT.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group policies, Federal Employees Health Benefits Program, and various accident policies.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care 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	(440,614)
2. Current year's realized pre-tax capital gains/(losses) of \$703,967 transferred into the reserve net of taxes of \$	703,967
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)	263,353
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)	129,964
6. Reserve as of December 31, current year (Line 4 minus Line 5)	133,389

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 Current Year's Amortization (Cols. 1+2+3)
1. 2012	87,780	42,184	0	129,964
2. 2013	52,901	85,276	0	138,176
3. 2014	22,349	82,210	0	104,559
4. 2015	(5,311)	76,611	0	71,300
5. 2016	(27,208)	71,066	0	43,859
6. 2017	(32,072)	64,538	0	32,466
7. 2018	(37,305)	58,439	0	21,134
8. 2019	(42,598)	50,982	0	8,383
9. 2020	(46,468)	42,886	0	(3,582)
10. 2021	(48,029)	35,246	0	(12,783)
11. 2022	(51,534)	26,983	0	(24,551)
12. 2023	(60,333)	20,440	0	(39,892)
13. 2024	(60,428)	16,463	0	(43,964)
14. 2025	(51,025)	12,502	0	(38,522)
15. 2026	(40,671)	7,818	0	(32,853)
16. 2027	(27,072)	3,134	0	(23,938)
17. 2028	(10,338)	823	0	(9,514)
18. 2029	(6,030)	855	0	(5,175)
19. 2030	(12,491)	902	0	(11,589)
20. 2031	(15,320)	950	0	(14,370)
21. 2032	(13,463)	997	0	(12,465)
22. 2033	(11,224)	934	0	(10,290)
23. 2034	(7,016)	744	0	(6,272)
24. 2035	(732)	538	0	(194)
25. 2036	1,974	332	0	2,306
26. 2037	818	111	0	929
27. 2038	195	0	0	195
28. 2039	38	0	0	38
29. 2040	0	0	0	0
30. 2041	0	0	0	0
31. 2042 and Later	0	0	0	0
32. Total (Lines 1 to 31)	(440,614)	703,967	0	263,353

ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

ASSET VALUATION RESERVE

	Default Component			Equity Component			7 Total Amount (Cols. 3+6)
	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)	
1. Reserve as of December 31, prior year	1,236,524	.0	1,236,524	125	.0	125	1,236,649
2. Realized capital gains/(losses) net of taxes-General Account	22,920		22,920			.0	22,920
3. Realized capital gains/(losses) net of taxes-Separate Accounts .....			.0			.0	.0
4. Unrealized capital gains/(losses) net of deferred taxes-General Account .....			.0			.0	.0
5. Unrealized capital gains/(losses) net of deferred taxes-Separate Accounts .....			.0			.0	.0
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves .....			.0			.0	.0
7. Basic contribution	323,129	0	323,129	0	0	0	323,129
8. Accumulated balances (Lines 1 through 5 - 6 + 7).....	1,582,572	.0	1,582,572	125	.0	125	1,582,697
9. Maximum reserve	1,566,754	.0	1,566,754	997,408	.0	997,408	2,564,162
10. Reserve objective.....	1,116,506	0	1,116,506	997,408	0	997,408	2,113,914
11. 20% of (Line 10 - Line 8)	(93,213)	0	(93,213)	199,457	0	199,457	106,243
12. Balance before transfers (Lines 8 + 11)	1,489,359	.0	1,489,359	199,582	.0	199,582	1,688,940
13. Transfers .....			.0			.0	XXX
14. Voluntary contribution	77,395		77,395	797,826		797,826	.875,221
15. Adjustment down to maximum/up to zero			0			0	0
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	1,566,754	0	1,566,754	997,408	0	997,408	2,564,161

ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

**ASSET VALUATION RESERVE
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS
DEFAULT COMPONENT**

Line Number	NAIC Designation	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. 4x5)	7 Factor	8 Amount (Cols. 4x7)	9 Factor	10 Amount (Cols. 4x9)
LONG-TERM BONDS												
1		Exempt Obligations	20,364,764	XXX	XXX	20,364,764	0.0000	0	0.0000	0	0.0000	0
2	1	Highest Quality	199,527,497	XXX	XXX	199,527,497	0.0004	79,811	0.0023	458,913	0.0030	598,582
3	2	High Quality	39,043,185	XXX	XXX	39,043,185	0.0019	74,182	0.0058	226,450	0.0090	351,389
4	3	Medium Quality	6,093,449	XXX	XXX	6,093,449	0.0093	56,669	0.0230	140,149	0.0340	207,177
5	4	Low Quality	5,119,669	XXX	XXX	5,119,669	0.0213	109,049	0.0530	271,342	0.0750	383,975
6	5	Lower Quality		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
7	6	In or Near Default		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
8		Total Unrated Multi-class Securities Acquired by Conversion		XXX	XXX	0	XXX		XXX		XXX	
9		Total Bonds (Sum of Lines 1 through 8)	270,148,564	XXX	XXX	270,148,564	XXX	319,711	XXX	1,096,856	XXX	1,541,124
PREFERRED STOCK												
10	1	Highest Quality		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
11	2	High Quality		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
12	3	Medium Quality		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
13	4	Low Quality		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
14	5	Lower Quality		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
15	6	In or Near Default		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
16		Affiliated Life with AVR		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
17		Total Preferred Stocks (Sum of Lines 10 through 16)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
SHORT-TERM BONDS												
18		Exempt Obligations		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
19	1	Highest Quality	8,543,621	XXX	XXX	8,543,621	0.0004	3,417	0.0023	19,650	0.0030	25,631
20	2	High Quality		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
21	3	Medium Quality		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
22	4	Low Quality		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
23	5	Lower Quality		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
24	6	In or Near Default		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
25		Total Short-term Bonds (Sum of Lines 18 through 24)	8,543,621	XXX	XXX	8,543,621	XXX	3,417	XXX	19,650	XXX	25,631

ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

ASSET VALUATION RESERVE (Continued)
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS
DEFAULT COMPONENT

Line Number	NAIC Designation	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. 4x5)	7 Factor	8 Amount (Cols. 4x7)	9 Factor	10 Amount (Cols. 4x9)
DERIVATIVE INSTRUMENTS												
26		Exchange Traded		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
27	1	Highest Quality		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
28	2	High Quality		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
29	3	Medium Quality		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
30	4	Low Quality		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
31	5	Lower Quality		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
32	6	In or Near Default		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)	278,692,185	XXX	XXX	278,692,185	XXX	323,129	XXX	1,116,506	XXX	1,566,754
MORTGAGE LOANS												
In Good Standing:												
35		Farm Mortgages			XXX	0	0.0063 ^(a)	0	0.0120 ^(a)	0	0.0190 ^(a)	0
36		Residential Mortgages - Insured or Guaranteed			XXX	0	0.0003	0	0.0006	0	0.0010	0
37		Residential Mortgages - All Other			XXX	0	0.0013	0	0.0030	0	0.0040	0
38		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0003	0	0.0006	0	0.0010	0
39		Commercial Mortgages - All Other			XXX	0	0.0063 ^(a)	0	0.0120 ^(a)	0	0.0190 ^(a)	0
40		In Good Standing With Restructured Terms			XXX	0	0.2800 ^(b)	0	0.6200 ^(b)	0	1.0000 ^(b)	0
Overdue, Not in Process:												
41		Farm Mortgages			XXX	0	0.0420	0	0.0760	0	0.1200	0
42		Residential Mortgages - Insured or Guaranteed			XXX	0	0.0005	0	0.0012	0	0.0020	0
43		Residential Mortgages - All Other			XXX	0	0.0025	0	0.0058	0	0.0090	0
44		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0005	0	0.0012	0	0.0020	0
45		Commercial Mortgages - All Other			XXX	0	0.0420	0	0.0760	0	0.1200	0
In Process of Foreclosure:												
46		Farm Mortgages			XXX	0	0.0000	0	0.1700	0	0.1700	0
47		Residential Mortgages - Insured or Guaranteed			XXX	0	0.0000	0	0.0040	0	0.0040	0
48		Residential Mortgages - All Other			XXX	0	0.0000	0	0.0130	0	0.0130	0
49		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0000	0	0.0040	0	0.0040	0
50		Commercial Mortgages - All Other			XXX	0	0.0000	0	0.1700	0	0.1700	0
51		Total Schedule B Mortgages (Sum of Lines 35 through 50)	0	0	XXX	0	XXX	0	XXX	0	XXX	0
52		Schedule DA Mortgages			XXX	0	(c)	0	(c)	0	(c)	0
53		Total Mortgage Loans on Real Estate (Lines 51 + 52)	0	0	XXX	0	XXX	0	XXX	0	XXX	0

(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 Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Col. 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)
COMMON STOCK												
1		Unaffiliated Public		XXX	XXX	0	0.0000	0	0.1300 ^(d)	0	0.1300 ^(d)	0
2		Unaffiliated Private		XXX	XXX	0	0.0000	0	0.1600	0	0.1600	0
3		Federal Home Loan Bank		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	0.0000	0	0.1300 ^(d)	0	0.1300 ^(d)	0
13		Unaffiliated Common Stock Private				0	0.0000	0	0.1600	0	0.1600	0
14		Mortgage Loans				0	^(c)	0	^(c)	0	^(c)	0
15		Real Estate				0	^(e)	0	^(e)	0	^(e)	0
16		Affiliated-Certain Other (See SVO Purposes and Procedures Manual)		XXX	XXX	0	0.0000	0	0.1300	0	0.1300	0
17		Affiliated - All Other	6,233,798	XXX	XXX	6,233,798	0.0000	0	0.1600	997,408	0.1600	997,408
18		Total Common Stock (Sum of Lines 1 through 17)	6,233,798	0	0	6,233,798	XXX	0	XXX	997,408	XXX	997,408
REAL ESTATE												
19		Home Office Property (General Account only)				0	0.0000	0	0.0750	0	0.0750	0
20		Investment Properties				0	0.0000	0	0.0750	0	0.0750	0
21		Properties Acquired in Satisfaction of Debt				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		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
24	1	Highest Quality		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
25	2	High Quality		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
26	3	Medium Quality		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
27	4	Low Quality		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
28	5	Lower Quality		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
29	6	In or Near Default		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 Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Col. 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 PREFERRED STOCKS												
31	1	Highest Quality		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
32	2	High Quality		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
33	3	Medium Quality		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
34	4	Low Quality		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
35	5	Lower Quality		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
36	6	In or Near Default		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
37		Affiliated Life with AVR		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			XXX	0	0.0063 (a)	0	0.0120 (a)	0	0.0190 (a)	0
40		Residential Mortgages - Insured or Guaranteed			XXX	0	0.0003	0	0.0006	0	0.0010	0
41		Residential Mortgages - All Other		XXX	XXX	0	0.0013	0	0.0030	0	0.0040	0
42		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0003	0	0.0006	0	0.0010	0
43		Commercial Mortgages - All Other			XXX	0	0.0063 (a)	0	0.0120 (a)	0	0.0190 (a)	0
44		In Good Standing With Restructured Terms			XXX	0	0.2800 (b)	0	0.6200 (b)	0	1.0000 (b)	0
Overdue, Not in Process:												
45		Farm Mortgages			XXX	0	0.0420	0	0.0760	0	0.1200	0
46		Residential Mortgages - Insured or Guaranteed			XXX	0	0.0005	0	0.0012	0	0.0020	0
47		Residential Mortgages - All Other			XXX	0	0.0025	0	0.0058	0	0.0090	0
48		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0005	0	0.0012	0	0.0020	0
49		Commercial Mortgages - All Other			XXX	0	0.0420	0	0.0760	0	0.1200	0
In Process of Foreclosure:												
50		Farm Mortgages			XXX	0	0.0000	0	0.1700	0	0.1700	0
51		Residential Mortgages - Insured or Guaranteed			XXX	0	0.0000	0	0.0040	0	0.0040	0
52		Residential Mortgages - All Other			XXX	0	0.0000	0	0.0130	0	0.0130	0
53		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0000	0	0.0040	0	0.0040	0
54		Commercial Mortgages - All Other			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

ASSET VALUATION RESERVE (Continued)
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS
EQUITY AND OTHER INVESTED ASSET COMPONENT

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Col. 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 STOCKS												
56		Unaffiliated Public		XXX	XXX	0	0.0000	0	0.1300 ^(d)	0	0.1300 ^(d)	0
57		Unaffiliated Private		XXX	XXX	0	0.0000	0	0.1600	0	0.1600	0
58		Affiliated Life with AVR		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
59		Affiliated Certain Other (See SVO Purposes & Procedures Manual)		XXX	XXX	0	0.0000	0	0.1300	0	0.1300	0
60		Affiliated Other - All Other		XXX	XXX	0	0.0000	0	0.1600	0	0.1600	0
61		Total with Common Stock Characteristics (Sum of Lines 56 through 60)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE												
62		Home Office Property (General Account only)				0	0.0000	0	0.0750	0	0.0750	0
63		Investment Properties				0	0.0000	0	0.0750	0	0.0750	0
64		Properties Acquired in Satisfaction of Debt				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	0.0003	0	0.0006	0	0.0010	0
67		Non-guaranteed Federal Low Income Housing Tax Credit	0			0	0.0063	0	0.0120	0	0.0190	0
68		State Low Income Housing Tax Credit	0			0	0.0273	0	0.0600	0	0.0975	0
69		All Other Low Income Housing Tax Credit	0			0	0.0273	0	0.0600	0	0.0975	0
70		Total LIHTC	0	0	0	0	XXX	0	XXX	0	XXX	0
ALL OTHER INVESTMENTS												
71		Other Invested Assets - Schedule BA		XXX		0	0.0000	0	0.1300	0	0.1300	0
72		Other Short-term Invested Assets - Schedule DA		XXX		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 - Schedules BA & DA (Sum of Lines 30, 38, 55, 61, 65, 70 and 73)	0	0	0	0	XXX	0	XXX	0	XXX	0

(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.

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	2	3	4	5	6	7	8
Contract Numbers	Claim Numbers	State of Residence of Claimant	Year of Claim for Death or Disability	Amount Claimed	Amount Paid During the Year	Amount Resisted Dec. 31 of Current Year	Why Compromised or Resisted
Resisted Death Claims - Ordinary							
GL00490113	4737	TN	2011	600,000		600,000	Homicide.....
43281	5048	TN	2012	25,000		25,000	Accidental Death Resisted.....
2799999 - Resisted Death Claims - Ordinary				625,000	0	625,000	XXX
3199999 - Subtotals - Resisted - Death Claims				625,000	0	625,000	XXX
5299999 - Subtotals - Claims Resisted During Current Year				625,000	0	625,000	XXX
5399999 Totals				625,000	0	625,000	XXX

ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

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	136,391	XXX		XXX		XXX		XXX		XXX	136,391	XXX		XXX		XXX		XXX
2. Premiums earned	138,196	XXX		XXX		XXX		XXX		XXX	138,196	XXX		XXX		XXX		XXX
3. Incurred claims	153,256	110.9		0.0		0.0		0.0		0.0	153,256	110.9		0.0		0.0		0.0
4. Cost containment expenses	0	0.0		0.0		0.0		0.0		0.0	0	0.0		0.0		0.0		0.0
5. Incurred claims and cost containment expenses (Lines 3 and 4)	153,256	110.9	0	0.0	0	0.0	0	0.0	0	0.0	153,256	110.9	0	0.0	0	0.0	0	0.0
6. Increase in contract reserves	(3,880)	(2.8)	0	0.0	0	0.0	0	0.0	0	0.0	(3,880)	(2.8)	0	0.0	0	0.0	0	0.0
7. Commissions (a)	(12,599)	(9.1)		0.0		0.0		0.0		0.0	(12,599)	(9.1)		0.0		0.0		0.0
8. Other general insurance expenses	45,829	33.2		0.0		0.0		0.0		0.0	45,829	33.2		0.0		0.0		0.0
9. Taxes, licenses and fees	0	0.0		0.0		0.0		0.0		0.0	0	0.0		0.0		0.0		0.0
10. Total other expenses incurred	33,230	24.0	0	0.0	0	0.0	0	0.0	0	0.0	33,230	24.0	0	0.0	0	0.0	0	0.0
11. Aggregate write-ins for deductions	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
12. Gain from underwriting before dividends or refunds	(44,410)	(32.1)	0	0.0	0	0.0	0	0.0	0	0.0	(44,410)	(32.1)	0	0.0	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
14. Gain from underwriting after dividends or refunds	(44,410)	(32.1)	0	0.0	0	0.0	0	0.0	0	0.0	(44,410)	(32.1)	0	0.0	0	0.0	0	0.0
DETAILS OF WRITE-INS																		
1101.																		
1102.																		
1103.																		
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. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	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

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

ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

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 A&H (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	34,944					34,944			
2. Advance premiums	198					198			
3. Reserve for rate credits	0								
4. Total premium reserves, current year	35,142	0	0	0	0	35,142	0	0	0
5. Total premium reserves, prior year	36,804	0	0	0	0	36,804	0	0	0
6. Increase in total premium reserves	(1,662)	0	0	0	0	(1,662)	0	0	0
B. Contract Reserves:									
1. Additional reserves (a)	146,320					146,320			
2. Reserve for future contingent benefits	0								
3. Total contract reserves, current year	146,320	0	0	0	0	146,320	0	0	0
4. Total contract reserves, prior year	150,200	0	0	0	0	150,200	0	0	0
5. Increase in contract reserves	(3,880)	0	0	0	0	(3,880)	0	0	0
C. Claim Reserves and Liabilities:									
1. Total current year	191,043					191,043			
2. Total prior year	207,769	0	0	0	0	207,769	0	0	0
3. Increase	(16,726)	0	0	0	0	(16,726)	0	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	142,869					142,869			
1.2 On claims incurred during current year	27,113					27,113			
2. Claim reserves and liabilities, December 31, current year:									
2.1 On claims incurred prior to current year	133,730					133,730			
2.2 On claims incurred during current year	57,313					57,313			
3. Test:									
3.1 Lines 1.1 and 2.1	276,599	0	0	0	0	276,599	0	0	0
3.2 Claim reserves and liabilities, December 31 prior year	207,769	0	0	0	0	207,769	0	0	0
3.3 Line 3.1 minus Line 3.2	68,830	0	0	0	0	68,830	0	0	0

PART 4 - REINSURANCE									
A. Reinsurance Assumed:									
1. Premiums written	0								
2. Premiums earned	0								
3. Incurred claims	0								
4. Commissions	0								
B. Reinsurance Ceded:									
1. Premiums written	139,622					139,622			
2. Premiums earned	139,622					139,622			
3. Incurred claims	59,126					59,126			
4. Commissions	12,626					12,626			

(a) Includes \$ premium deficiency reserve.

SCHEDULE H - PART 5 - HEALTH CLAIMS

	1 Medical	2 Dental	3 Other	4 Total
A. Direct:				
1. Incurred Claims.....			212,382	212,382
2. Beginning Claim Reserves and Liabilities.....	0	0	590,895	590,895
3. Ending Claim Reserves and Liabilities.....			546,471	546,471
4. Claims Paid.....	0	0	256,806	256,806
B. Assumed Reinsurance:				
5. Incurred Claims.....				0
6. Beginning Claim Reserves and Liabilities.....	0	0	0	0
7. Ending Claim Reserves and Liabilities.....				0
8. Claims Paid.....	0	0	0	0
C. Ceded Reinsurance:				
9. Incurred Claims.....			59,126	59,126
10. Beginning Claim Reserves and Liabilities.....	0	0	383,126	383,126
11. Ending Claim Reserves and Liabilities.....			355,428	355,428
12. Claims Paid.....	0	0	86,824	86,824
D. Net:				
13. Incurred Claims.....	0	0	153,256	153,256
14. Beginning Claim Reserves and Liabilities.....	0	0	207,769	207,769
15. Ending Claim Reserves and Liabilities.....	0	0	191,043	191,043
16. Claims Paid.....	0	0	169,982	169,982
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred Claims and Cost Containment Expenses.....			153,256	153,256
18. Beginning Reserves and Liabilities.....	0	0	207,769	207,769
19. Ending Reserves and Liabilities.....			191,043	191,043
20. Paid Claims and Cost Containment Expenses	0	0	169,982	169,982

ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

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
NONE											
0999999 Total (Sum of 0399999 and 0699999)						0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

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 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Re- insurance Ceded	7 Amount in Force at End of Year	Reserve Credit Taken		10 Premiums	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
							8 Current Year	9 Prior Year		11 Current Year	12 Prior Year		
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates													
82627	06-0839705	07/01/1996	SWISS RE LIFE & HLTH AMER INC.	CT	YRT/G	227,906,000			810,871				
97071	13-3126819	03/01/1999	GENERALI USA LIFE REASSUR CO.	MO	YRT/I	4,800,000	14,580	13,358	17,146				
82627	06-0839705	04/01/1981	SWISS RE LIFE & HLTH AMER INC.	CT	YRT/I	4,809,432	18,626	20,144	7,440				
82627	06-0839705	01/01/3000	SWISS RE LIFE & HLTH AMER INC.	CT	YRT/I	55,048,219	206,946	229,578	192,213				
65676	35-0472300	07/01/1996	LINCOLN NATL LIFE INS CO.	IN	YRT/I	528,208,739	1,750,095	1,940,550	916,302				
97071	13-3126819	03/01/1999	GENERALI USA LIFE REASSUR CO.	MO	YRT/I	85,742,750	1,072,582	1,034,478	167,146				
60895	35-0145825	01/01/2000	AMERICAN UNITED LIFE INS CO.	IN	YRT/I	938,004,799	4,139,148	4,266,124	1,784,888				
60895	35-0145825	09/01/1977	AMERICAN UNITED LIFE INS CO.	IN	YRT/I	83,441,526	429,021	413,644	593,627				
88099	75-1608507	01/01/1992	OPTIMUM RE INS CO.	TX	YRT/I	174,631,162	869,529	830,305	784,244				
67121	95-1060502	05/21/2003	TRANSAMERICA OCCIDENTAL LIFE INS CO.	IA	CO/I	5,653,218,667	115,070,224	104,558,935	10,796,479				
67121	95-1060502	05/21/2003	TRANSAMERICA OCCIDENTAL LIFE INS CO.	IA	YRT/I	302,807,958	714,591	689,640	526,891				
67121	95-1060502	09/01/2007	TRANSAMERICA OCCIDENTAL LIFE INS CO.	IA	CO/I	3,137,019,109	24,940,238	18,533,195	6,310,741				
67121	95-1060502	09/01/2007	TRANSAMERICA OCCIDENTAL LIFE INS CO.	IA	YRT/I	213,740,139	279,672	271,510	180,133				
67121	95-1060502	08/01/2010	TRANSAMERICA OCCIDENTAL LIFE INS CO.	IA	CO/I	253,082,999	1,835,048	1,369,432	356,766				
67121	95-1060502	08/01/2010	TRANSAMERICA OCCIDENTAL LIFE INS CO.	IA	YRT/I	15,330,517	11,271	10,907	7,399				
80659	38-0397420	01/01/2012	US BUSINESS OF CANADA LIFE ASSUR CO.	MI	YRT/I	401,259,525	392,754	155,444	125				
86258	13-2572994	01/01/2012	GENERAL RE LIFE CORP.	CT	YRT/I	231,168,680	230,643		125				
88340	59-2859797	01/01/2012	HANNOVER LIFE REASSUR CO OF AMER.	FL	YRT/I	218,530,845	222,041		102,323				
82627	06-0839705	01/01/1992	SWISS RE LIFE & HLTH AMER INC.	CT	DIS/I	245,713	155,101		122,735				
86231	39-0989781	05/21/2003	TRANSAMERICA LIFE INS CO.	IA	CO/I	70,149,509	131,091	107,446	70,629				
86231	39-0989781	05/21/2003	TRANSAMERICA LIFE INS CO.	IA	YRT/I	63,785,072	175,404	42,737	96,234				
86231	39-0989781	09/01/2007	TRANSAMERICA LIFE INS CO.	IA	YRT/I	587,219,473	1,884,325	529,601	1,506,962				
86231	39-0989781	09/01/2007	TRANSAMERICA LIFE INS CO.	IA	YRT/I	18,649,404	38,859	17,818	56,083				
60895	35-0145825	10/15/1984	AMERICAN UNITED LIFE INS CO.	IN	CO/I	59,011,504			811,255				
60895	35-0145825	03/01/1999	AMERICAN UNITED LIFE INS CO.	IN	CO/I	48,494,706			171,094				
68276	48-1024691	01/01/2002	EMPLOYERS REASSUR CORP.	KS	CO/I	38,462,102			239,910				
80659	38-0397420	10/01/2011	US BUSINESS OF CANADA LIFE ASSUR CO.	MI	YRT/I	25,262,877			8,422				
88340	59-2859797	10/01/2011	HANNOVER LIFE REASSUR CO OF AMER.	FL	YRT/I	16,748,258			3,697				
86231	39-0989781	01/01/2009	TRANSAMERICA LIFE INS CO.	IA	YRT/I	199,291,679			679,725				
86231	39-0989781	01/01/2009	TRANSAMERICA LIFE INS CO.	IA	YRT/I	118,335,684			381,554				
0499999 - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates						13,774,407,047	154,581,789	135,034,844	27,703,158	0	0	0	0
0699999 - General Account - Authorized - Non-Affiliates - Total Authorized Non-Affiliates						13,774,407,047	154,581,789	135,034,844	27,703,158	0	0	0	0
0799999 - General Account - Authorized - Total General Account Authorized						13,774,407,047	154,581,789	135,034,844	27,703,158	0	0	0	0
General Account - Unauthorized - Affiliates - U.S. Affiliates													
14917	46-1454886	01/01/2012	GRANGE LIFE REINSURANCE COMPANY	VT	YRT/I	1,910,136,063	14,562,048		8,813,506				1,662,060
0899999 - General Account - Unauthorized - Affiliates - U.S. Affiliates						1,910,136,063	14,562,048	0	8,813,506	0	0	0	1,662,060
1099999 - General Account - Unauthorized - Affiliates - Total Unauthorized Affiliates						1,910,136,063	14,562,048	0	8,813,506	0	0	0	1,662,060
1499999 - General Account - Unauthorized - Total General Account Unauthorized						1,910,136,063	14,562,048	0	8,813,506	0	0	0	1,662,060
2299999 - General Account - Total General Account Authorized, Unauthorized and Certified						15,684,543,110	169,143,837	135,034,844	36,516,664	0	0	0	1,662,060
4599999 - Total U.S. (Sum of 0199999, 0499999, 0899999, 1199999, 1599999, 1899999, 2399999, 2699999, 3099999, 3399999, 3799999 and 4099999)						15,684,543,110	169,143,837	135,034,844	36,516,664	0	0	0	1,662,060
4799999 Total (Sum of 2299999 and 4499999)						15,684,543,110	169,143,837	135,034,844	36,516,664	0	0	0	1,662,060

ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

SCHEDULE S - PART 4

Reinsurance Ceded To Unauthorized Companies

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Reinsurer	5 Reserve Credit Taken	6 Paid and Unpaid Losses Recoverable (Debit)	7 Other Debits	8 Total (Cols. 5+6+7)	9 Letters of Credit	Letter of Credit Issuing or Confirming Bank (a)			13 Trust Agreements	14 Funds Deposited by and Withheld from Reinsurers	15 Other	16 Miscellaneous Balances (Credit)	17 Sum of Cols 9+13+14+15+16 But Not in Excess of Col. 8
									10 American Bankers Association (ABA) Routing Number	11 Letter of Credit Code	12 Bank Name					
General Account - Life and Annuity - Affiliates - U.S. Affiliates																
14917	46-1454886	01/01/2012	GRANGE LIFE REINSURANCE COMPANY	14,562,048	0		14,562,048	14,500,000	075000022	2	U.S. BANK NATIONAL ASSOCIATION	0	1,662,060			14,562,048
0199999 - General Account - Life and Annuity - Affiliates - U.S. Affiliates				14,562,048	0	0	14,562,048	14,500,000	XXX	XXX	XXX	0	1,662,060	0	0	14,562,048
0399999 - General Account - Life and Annuity - Affiliates - Total Affiliates				14,562,048	0	0	14,562,048	14,500,000	XXX	XXX	XXX	0	1,662,060	0	0	14,562,048
0799999 - General Account - Life and Annuity - Total Life and Annuity				14,562,048	0	0	14,562,048	14,500,000	XXX	XXX	XXX	0	1,662,060	0	0	14,562,048
1599999 - General Account - Total General Account				14,562,048	0	0	14,562,048	14,500,000	XXX	XXX	XXX	0	1,662,060	0	0	14,562,048
2399999 - Total U.S. (Sum of 0199999, 0499999, 0899999, 1199999, 1699999 and 1999999)				14,562,048	0	0	14,562,048	14,500,000	XXX	XXX	XXX	0	1,662,060	0	0	14,562,048
2599999 Total (Sum of 1599999 and 2299999)				14,562,048	0	0	14,562,048	14,500,000	XXX	XXX	XXX	0	1,662,060	0	0	14,562,048

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(a)

Code	American Bankers Association (ABA) Routing Number	Bank Name
.....
.....
.....

ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

SCHEDULE S - PART 5 (Continued)

Reinsurance Ceded to Certified Reinsurers as of December 31, Current Year (000 Omitted)

Line Number	25 Percent of Collateral Provided for Net Amount Recoverable from Reinsurer (Col. 24 / Col. 14)	26 Percent Credit Allowed on Net Amount Recoverable from Reinsurer (Col. 25 / Col. 8, not to exceed 100%)	27 Amount of Credit Allowed for Net Amount Recoverable from Reinsurer (Col. 14 x Col. 26)	28 Liability for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 14 - Col. 27)
NONE				
2599999	Total (Sum of 1599999 and 2299999)		0	0

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(a)

Code	American Bankers Association (ABA) Routing Number	Bank Name

SCHEDULE S - PART 6

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

	1 2012	2 2011	3 2010	4 2009	5 2008
A. OPERATIONS ITEMS					
1. Premiums and annuity considerations for life and accident and health contracts	36,656	28,979	28,981	27,882	26,680
2. Commissions and reinsurance expense allowances	11,858	5,286	6,111	6,699	7,607
3. Contract claims	21,827	24,107	17,906	16,637	12,386
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	0	0	0	0	0
B. BALANCE SHEET ITEMS					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected	2,504	2,589	2,740	2,476	2,382
9. Aggregate reserves for life and accident and health contracts	169,794	135,724	115,380	95,226	74,863
10. Liability for deposit-type contracts	0	0	0	0	0
11. Contract claims unpaid	2,780	5,267	3,205	2,231	4,102
12. Amounts recoverable on reinsurance	5,427	6,884	1,588	5,024	673
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 due	0	0	0	0	0
16. Unauthorized reinsurance offset	0	0	0	0	0
17. Offset for reinsurance with Certified Reinsurers	0	XXX	XXX	XXX	XXX
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
18. Funds deposited by and withheld from (F)	1,662	0	0	0	0
19. Letters of credit (L)	14,500	0	0	0	0
20. Trust agreements (T)	0	0	0	0	0
21. Other (O)	0	0	0	0	0
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
22. Multiple Beneficiary Trust	0	XXX	XXX	XXX	XXX
23. Funds deposited by and withheld from (F)	0	XXX	XXX	XXX	XXX
24. Letters of credit (L)	0	XXX	XXX	XXX	XXX
25. Trust agreements (T)	0	XXX	XXX	XXX	XXX
26. Other (O)	0	XXX	XXX	XXX	XXX

SCHEDULE S - PART 7

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)	300,936,942		300,936,942
2. Reinsurance (Line 16)	6,476,726	(6,476,726)	0
3. Premiums and considerations (Line 15)	31,791,254	2,504,464	34,295,718
4. Net credit for ceded reinsurance	XXX	186,625,662	186,625,662
5. All other admitted assets (balance)	8,415,375		8,415,375
6. Total assets excluding Separate Accounts (Line 26)	347,620,297	182,653,400	530,273,697
7. Separate Account assets (Line 27)	0		0
8. Total assets (Line 28)	347,620,297	182,653,400	530,273,697
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9. Contract reserves (Lines 1 and 2)	251,689,427	179,873,233	431,562,660
10. Liability for deposit-type contracts (Line 3)	601,817		601,817
11. Claim reserves (Line 4)	4,460,233	2,780,167	7,240,400
12. Policyholder dividends/reserves (Lines 5 through 7)	338,657		338,657
13. Premium & annuity considerations received in advance (Line 8)	120,560		120,560
14. Other contract liabilities (Line 9)	2,294,650		2,294,650
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount)	0	0	0
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount)	0	0	0
17. Reinsurance with Certified Reinsurers (Line 24.02 inset amount)	0		0
18. Funds held under reinsurance treaties with Certified Reinsurers (Line 24.03 inset amount)	0		0
19. All other liabilities (balance)	38,987,832		38,987,832
20. Total liabilities excluding Separate Accounts (Line 26)	298,493,176	182,653,400	481,146,576
21. Separate Account liabilities (Line 27)	0		0
22. Total liabilities (Line 28)	298,493,176	182,653,400	481,146,576
23. Capital & surplus (Line 38)	49,127,121	XXX	49,127,121
24. Total liabilities, capital & surplus (Line 39)	347,620,297	182,653,400	530,273,697
NET CREDIT FOR CEDED REINSURANCE			
25. Contract reserves	179,873,233		
26. Claim reserves	2,780,167		
27. Policyholder dividends/reserves	0		
28. Premium & annuity considerations received in advance	0		
29. Liability for deposit-type contracts	0		
30. Other contract liabilities	0		
31. Reinsurance ceded assets	6,476,726		
32. Other ceded reinsurance recoverables	0		
33. Total ceded reinsurance recoverables	189,130,126		
34. Premiums and considerations	2,504,464		
35. Reinsurance in unauthorized companies	0		
36. Funds held under reinsurance treaties with unauthorized reinsurers	0		
37. Reinsurance with Certified Reinsurers	0		
38. Funds held under reinsurance treaties with Certified Reinsurers	0		
39. Other ceded reinsurance payables/offsets	0		
40. Total ceded reinsurance payable/offsets	2,504,464		
41. Total net credit for ceded reinsurance	186,625,662		

ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

SCHEDULE T – PART 2
INTERSTATE COMPACT – EXHIBIT OF PREMIUMS WRITTEN

Allocated By States and Territories

States, Etc.		Direct Business Only					Totals
		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	
1. Alabama	AL	110,201	0			0	110,201
2. Alaska	AK	6,617	0			0	6,617
3. Arizona	AZ	99,713	0			0	99,713
4. Arkansas	AR	36,312	0			0	36,312
5. California	CA	95,650	0			0	95,650
6. Colorado	CO	53,759	0			0	53,759
7. Connecticut	CT	20,848	0			0	20,848
8. Delaware	DE	3,225	0			0	3,225
9. District of Columbia	DC	1,647	0			0	1,647
10. Florida	FL	565,412	6,300			0	571,712
11. Georgia	GA	6,145,242	97,310			0	6,242,552
12. Hawaii	HI	5,283	0			0	5,283
13. Idaho	ID	10,029	0			0	10,029
14. Illinois	IL	2,267,429	114,586			0	2,382,015
15. Indiana	IN	5,326,872	53,043			0	5,379,915
16. Iowa	IA	157,388	0			0	157,388
17. Kansas	KS	21,722	0			0	21,722
18. Kentucky	KY	9,016,900	331,730			0	9,348,630
19. Louisiana	LA	30,138	0			0	30,138
20. Maine	ME	5,013	0			0	5,013
21. Maryland	MD	44,000	0			0	44,000
22. Massachusetts	MA	31,052	0			0	31,052
23. Michigan	MI	3,589,993	147,014			0	3,737,007
24. Minnesota	MN	313,048	1,425			0	314,473
25. Mississippi	MS	110,794	150			0	110,944
26. Missouri	MO	107,596	0			0	107,596
27. Montana	MT	8,884	0			0	8,884
28. Nebraska	NE	4,467	0			0	4,467
29. Nevada	NV	28,059	0			0	28,059
30. New Hampshire	NH	6,388	0			0	6,388
31. New Jersey	NJ	24,682	0			0	24,682
32. New Mexico	NM	7,372	0			0	7,372
33. New York	NY	44,377	0			0	44,377
34. North Carolina	NC	193,068	0			0	193,068
35. North Dakota	ND	2,559	0			0	2,559
36. Ohio	OH	33,437,915	2,632,524			0	36,070,439
37. Oklahoma	OK	18,462	0			0	18,462
38. Oregon	OR	12,450	0			0	12,450
39. Pennsylvania	PA	836,477	0			0	836,477
40. Rhode Island	RI	884	0			0	884
41. South Carolina	SC	710,844	1,200			0	712,044
42. South Dakota	SD	6,825	0			0	6,825
43. Tennessee	TN	7,794,976	173,393			0	7,968,369
44. Texas	TX	159,400	0			0	159,400
45. Utah	UT	17,330	0			0	17,330
46. Vermont	VT	4,842	0			0	4,842
47. Virginia	VA	332,519	7,427			0	339,946
48. Washington	WA	18,751	0			0	18,751
49. West Virginia	WV	127,801	5,467			0	133,268
50. Wisconsin	WI	1,003,029	10,250			0	1,013,279
51. Wyoming	WY	4,536	0			0	4,536
52. American Samoa	AS	0	0			0	0
53. Guam	GU	0	0			0	0
54. Puerto Rico	PR	794	0			0	794
55. US Virgin Islands	VI	335	0			0	335
56. Northern Mariana Islands	MP	0	0			0	0
57. Canada	CAN	12,713	0			0	12,713
58. Aggregate Other Alien	OT	993	0			0	993
59. Totals		72,997,615	3,581,819	0	0	0	76,579,434

ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

**SCHEDULE Y
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Name of Parent Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/ Person(s)	*
00267	GRANGE MUTUAL CASUALTY GROUP	14060	31-4192970				GRANGE MUTUAL CASUALTY COMPANY	.OH	UDP	GRANGE MUTUAL CASUALTY COMPANY	BOARD	0.0	GRANGE MUTUAL CASUALTY COMPANY	.0
00267	GRANGE MUTUAL CASUALTY GROUP	71218	31-0739286				GRANGE LIFE INSURANCE COMPANY	.OH	.OTH	GRANGE MUTUAL CASUALTY COMPANY	OWNERSHIP	79.2	GRANGE MUTUAL CASUALTY COMPANY	.1
00267	GRANGE MUTUAL CASUALTY GROUP	71218	31-0739286				GRANGE LIFE INSURANCE COMPANY	.OH	.OTH	INTEGRITY MUTUAL INSURANCE COMPANY	OWNERSHIP	20.8	GRANGE MUTUAL CASUALTY COMPANY	.1
00267	GRANGE MUTUAL CASUALTY GROUP	40118	41-1405571				TRUSTGARD INSURANCE COMPANY	.OH	.IA	GRANGE MUTUAL CASUALTY COMPANY	OWNERSHIP	100.0	GRANGE MUTUAL CASUALTY COMPANY	.0
00267	GRANGE MUTUAL CASUALTY GROUP	10322	31-1432675				GRANGE INDEMNITY INSURANCE COMPANY	.OH	.IA	GRANGE MUTUAL CASUALTY COMPANY	OWNERSHIP	100.0	GRANGE MUTUAL CASUALTY COMPANY	.0
00267	GRANGE MUTUAL CASUALTY GROUP	11136	31-1769414				GRANGE INSURANCE COMPANY OF MICHIGAN	.OH	.IA	GRANGE MUTUAL CASUALTY COMPANY	OWNERSHIP	100.0	GRANGE MUTUAL CASUALTY COMPANY	.0
00267	GRANGE MUTUAL CASUALTY GROUP	14303	39-0367560				INTEGRITY MUTUAL INSURANCE COMPANY	.WI	UDP	GRANGE MUTUAL CASUALTY COMPANY	BOARD	0.0	GRANGE MUTUAL CASUALTY COMPANY	.0
00267	GRANGE MUTUAL CASUALTY GROUP	11982	42-1610213				GRANGE PROPERTY & CASUALTY INSURANCE COMPANY	.OH	.IA	GRANGE MUTUAL CASUALTY COMPANY	OWNERSHIP	100.0	GRANGE MUTUAL CASUALTY COMPANY	.0
00267	GRANGE MUTUAL CASUALTY GROUP	12986	41-2236417				INTEGRITY PROPERTY & CASUALTY INSURANCE COMPANY	.WI	.IA	INTEGRITY MUTUAL INSURANCE COMPANY	OWNERSHIP	100.0	GRANGE MUTUAL CASUALTY COMPANY	.0
00267	GRANGE MUTUAL CASUALTY GROUP	14917	46-1454886				GRANGE LIFE REINSURANCE COMPANY	.VT	.DS	GRANGE LIFE INSURANCE COMPANY	OWNERSHIP	100.0	GRANGE MUTUAL CASUALTY COMPANY	.0
		00000	31-1145043				GRANGEAMERICA	.OH	.NIA	GRANGE MUTUAL CASUALTY COMPANY	OWNERSHIP	100.0	GRANGE MUTUAL CASUALTY COMPANY	.0
		00000	31-1193707				NORTHVIEW INSURANCE AGENCY	.OH	.DS	GRANGE LIFE INSURANCE COMPANY	OWNERSHIP	100.0	GRANGE MUTUAL CASUALTY COMPANY	.0
		00000	35-1958976				T.G. INSURANCE AGENCY	.OH	.NIA	TRUSTGARD INSURANCE COMPANY	OWNERSHIP	100.0	GRANGE MUTUAL CASUALTY COMPANY	.0
												0.0		.0
												0.0		.0

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Asterisk	Explanation
1	Reporting Entity

ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
14060	31-4192970	GRANGE MUTUAL CASUALTY COMPANY					41,647,487		*		41,647,487	(332,310,874)
71218	31-0739286	GRANGE LIFE INSURANCE COMPANY		(3,250,000)			(11,265,181)	(240,637)	*		(14,755,818)	0
40118	41-1405571	TRUSTGARD INSURANCE COMPANY					(8,250,890)		*		(8,250,890)	89,207,076
10322	31-1432675	GRANGE INDEMNITY INSURANCE COMPANY					(9,345,007)		*		(9,345,007)	7,513,914
11136	31-1769414	GRANGE INSURANCE COMPANY OF MICHIGAN					(5,855,001)		*		(5,855,001)	74,727,210
14303	39-0367560	INTEGRITY MUTUAL INSURANCE COMPANY					(5,069,908)		*		(5,069,908)	65,370,390
11982	42-1610213	GRANGE PROPERTY & CASUALTY INS. CO.					(4,700,101)		*		(4,700,101)	69,049,306
12986	41-2236417	INTEGRITY PROPERTY & CASUALTY INSURANCE					0		*		0	26,442,978
14917	46-1454886	GRANGE LIFE REINSURANCE COMPANY		3,250,000			2,838,601	240,637	*		6,329,238	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.

MARCH FILING

Responses

- 1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?WAIVED.....
- 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 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 the state of domicile and the NAIC by April 1?YES.....
- 8. Will the Supplemental Investment Risks 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 annual 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?YES.....
- 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?SEE EXPLANATION.....
- 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?NO.....
- 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.....

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

- 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 partner 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 with 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?NO.....
- 47. Will the regulator only (non-public) Supplemental Health Care Exhibit's Allocation Report be filed with the state of domicile and the NAIC by April 1?NO.....

AUGUST FILING

- 48. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?NO.....

Explanation:

- 12.
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SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2012 OF THE GRANGE LIFE INSURANCE COMPANY

SCHEDULE O SUPPLEMENT

FOR THE YEAR ENDED DECEMBER 31, 2012

(To Be Filed By March 1)

Of The GRANGE LIFE INSURANCE COMPANY

Address (City, State and Zip Code)

NAIC Group Code NAIC Company Code Employer's ID Number

SUPPLEMENTAL SCHEDULE O - PART 1

Development of Incurred Losses (\$000 OMITTED)

Section A-Group Accident and Health

Table for Section A-Group Accident and Health with columns for years 2004-2012 and a 'NONE' watermark.

Section B-Other Accident and Health

Table for Section B-Other Accident and Health with numerical data for years 2008-2012.

Section C-Credit Accident and Health

Table for Section C-Credit Accident and Health with a 'NONE' watermark.

Section D -

Table for Section D - with a 'NONE' watermark.

Section E -

Table for Section E - with a 'NONE' watermark.

Section F-

Table for Section F- with a 'NONE' watermark.

Section G-

Table for Section G- with a 'NONE' watermark.

(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 2008	2 2009	3 2010	4 2011	5 2012
1. Prior.....			0	0	0
2. 2008.....	0		0	0	0
3. 2009.....	XXX	0	0	0	0
4. 2010.....	XXX	XXX	0	0	0
5. 2011.....	XXX	XXX	XXX	0	0
6. 2012.....	XXX	XXX	XXX	XXX	

Section B - Other Accident and Health

1. Prior.....			0	0	0
2. 2008.....	0		0	0	0
3. 2009.....	XXX	0	0	0	0
4. 2010.....	XXX	XXX	0	0	0
5. 2011.....	XXX	XXX	XXX	0	0
6. 2012.....	XXX	XXX	XXX	XXX	

Section C - Credit Accident and Health

1. Prior.....			0	0	0
2. 2008.....	0		0	0	0
3. 2009.....	XXX	0	0	0	0
4. 2010.....	XXX	XXX	0	0	0
5. 2011.....	XXX	XXX	XXX	0	0
6. 2012.....	XXX	XXX	XXX	XXX	

Section D-

1. Prior.....			0	0	0
2. 2008.....	0		0	0	0
3. 2009.....	XXX	0	0	0	0
4. 2010.....	XXX	XXX	0	0	0
5. 2011.....	XXX	XXX	XXX	0	0
6. 2012.....	XXX	XXX	XXX	XXX	

Section E-

1. Prior.....			0	0	0
2. 2008.....	0		0	0	0
3. 2009.....	XXX	0	0	0	0
4. 2010.....	XXX	XXX	0	0	0
5. 2011.....	XXX	XXX	XXX	0	0
6. 2012.....	XXX	XXX	XXX	XXX	

Section F-

1. Prior.....			0	0	0
2. 2008.....	0		0	0	0
3. 2009.....	XXX	0	0	0	0
4. 2010.....	XXX	XXX	0	0	0
5. 2011.....	XXX	XXX	XXX	0	0
6. 2012.....	XXX	XXX	XXX	XXX	

Section G-

1. Prior.....			0	0	0
2. 2008.....	0		0	0	0
3. 2009.....	XXX	0	0	0	0
4. 2010.....	XXX	XXX	0	0	0
5. 2011.....	XXX	XXX	XXX	0	0
6. 2012.....	XXX	XXX	XXX	XXX	

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 2008	2 2009	3 2010	4 2011	5 2012
1. 2008	0		0	XXX	XXX
2. 2009		0			XXX
3. 2010	XXX	XXX	0	0	
4. 2011	XXX	XXX	XXX	0	
5. 2012	XXX	XXX	XXX	XXX	

Section B - Other Accident and Health

1. 2008	346	179	19	XXX	XXX
2. 2009	XXX	381	76	56	XXX
3. 2010	XXX	XXX	159	119	(13,094)
4. 2011	XXX	XXX	XXX	213	44,219
5. 2012	XXX	XXX	XXX	XXX	159,060

Section C - Credit Accident and Health

1. 2008	0	0	0	XXX	XXX
2. 2009	XXX	0	0	0	XXX
3. 2010	XXX	XXX	0	0	
4. 2011	XXX	XXX	XXX	0	
5. 2012	XXX	XXX	XXX	XXX	

Section D-

1. 2008	0	0	0	XXX	XXX
2. 2009	XXX	0	0	0	XXX
3. 2010	XXX	XXX	0	0	
4. 2011	XXX	XXX	XXX	0	
5. 2012	XXX	XXX	XXX	XXX	

Section E-

1. 2008	0	0	0	XXX	XXX
2. 2009	XXX	0	0	0	XXX
3. 2010	XXX	XXX	0	0	
4. 2011	XXX	XXX	XXX	0	
5. 2012	XXX	XXX	XXX	XXX	

Section F-

1. 2008	0	0	0	XXX	XXX
2. 2009	XXX	0	0	0	XXX
3. 2010	XXX	XXX	0	0	
4. 2011	XXX	XXX	XXX	0	
5. 2012	XXX	XXX	XXX	XXX	

Section G-

1. 2008	0	0	0	XXX	XXX
2. 2009	XXX	0	0	0	XXX
3. 2010	XXX	XXX	0	0	
4. 2011	XXX	XXX	XXX	0	
5. 2012	XXX	XXX	XXX	XXX	

SCHEDULE O SUPPLEMENT
SUPPLEMENTAL SCHEDULE O – PART 4

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, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at the End of Year				
	1 2008	2 2009	3 2010	4 2011	5 2012
1. 2008	.0	.0	.0	.0	.0
2. 2009	XXX	XXX	.0	.0	.0
3. 2010	XXX	XXX	.0	.0	.0
4. 2011	XXX	XXX	XXX	.0	.0
5. 2012	XXX	XXX	XXX	XXX	.0

Section B – Other Accident and Health

1. 2008	345	179	19	.5	(10,714)
2. 2009	XXX	381	.76	.56	17,745
3. 2010	XXX	XXX	159	.118	(13,094)
4. 2011	XXX	XXX	XXX	.213	46,173
5. 2012	XXX	XXX	XXX	XXX	163,620

Section C - Credit Accident and Health

1. 2008	.0	.0	.0	.0	.0
2. 2009	XXX	XXX	.0	.0	.0
3. 2010	XXX	XXX	.0	.0	.0
4. 2011	XXX	XXX	XXX	.0	.0
5. 2012	XXX	XXX	XXX	XXX	.0

Section D-

1. 2008	.0	.0	.0	.0	.0
2. 2009	XXX	XXX	.0	.0	.0
3. 2010	XXX	XXX	.0	.0	.0
4. 2011	XXX	XXX	XXX	.0	.0
5. 2012	XXX	XXX	XXX	XXX	.0

Section E-

1. 2008	.0	.0	.0	.0	.0
2. 2009	XXX	XXX	.0	.0	.0
3. 2010	XXX	XXX	.0	.0	.0
4. 2011	XXX	XXX	XXX	.0	.0
5. 2012	XXX	XXX	XXX	XXX	.0

Section F-

1. 2008	.0	.0	.0	.0	.0
2. 2009	XXX	XXX	.0	.0	.0
3. 2010	XXX	XXX	.0	.0	.0
4. 2011	XXX	XXX	XXX	.0	.0
5. 2012	XXX	XXX	XXX	XXX	.0

Section G-

1. 2008	.0	.0	.0	.0	.0
2. 2009	XXX	XXX	.0	.0	.0
3. 2010	XXX	XXX	.0	.0	.0
4. 2011	XXX	XXX	XXX	.0	.0
5. 2012	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	Other	4,413
2. Ordinary life		
3. Individual annuity		
4. Supplementary contracts		
5. Credit life		
6. Group life	Other	.9
7. Group annuities		
8. Group accident and health		
9. Credit accident and health		
10. Other accident and health	Development	.191
11. Total		4,613

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