



69647201320100100

2013

Document Code: 201

ANNUAL STATEMENT
For the Year Ended December 31, 2013
OF THE CONDITION AND AFFAIRS OF THE
Catamaran Insurance of Ohio

| | | | | | | |
|---------------------------------------|--|------------------------|--|------------|----------------------|------------|
| NAIC Group Code | 4771 (Current Period) | 4771 (Prior Period) | NAIC Company Code | 69647 | Employer's ID Number | 31-0628424 |
| Organized under the Laws of | Ohio | | State of Domicile or Port of Entry | | Ohio | |
| Country of Domicile | United States of America | | | | | |
| Incorporated/Organized | 10/19/1948 | | Commenced Business | 12/05/1978 | | |
| Statutory Home Office | 50 W. Broad Street, Suite 1800 (Street and Number) | | Columbus, OH, US 43215 (City or Town, State, Country and Zip Code) | | | |
| Main Administrative Office | 1600 McConnor Parkway (Street and Number) | | Schaumburg, IL, US 60173-6801 (City or Town, State, Country and Zip Code) | | | |
| | | | (800)282-3232 (Area Code) (Telephone Number) | | | |
| Mail Address | 1600 McConnor Parkway (Street and Number or P.O. Box) | | Schaumburg, IL, US 60173-6801 (City or Town, State, Country and Zip Code) | | | |
| Primary Location of Books and Records | 1600 McConnor Parkway (Street and Number) | | Schaumburg, IL, US 60173-6801 (City or Town, State, Country and Zip Code) | | | |
| | | | (800)282-3232 (Area Code) (Telephone Number) | | | |
| Internet Website Address | www.catamaranrx.com | | | | | |
| Statutory Statement Contact | Mike Przybyla (Name) | | (224)231-1848 (Area Code)(Telephone Number)(Extension) | | | |
| | mike.przybyla@catamaranrx.com (E-Mail Address) | | (224)231-1915 (Fax Number) | | | |

OFFICERS

| Name | Title |
|------------------------|---------------------------------------|
| Mark Alan Thierer | Chairman & President |
| Jeffrey Gary Park | Executive VP Finance, CFO & Treasurer |
| Clifford Elliot Berman | Secretary |

OTHERS

DIRECTORS OR TRUSTEES

| | |
|------------------------|-------------------|
| Mark Alan Thierer | Jeffrey Gary Park |
| Clifford Elliot Berman | John Henry Romza |
| Joel Saban | |

State of Illinois
 County of DuPage ss

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

(Signature)
 Mark Alan Thierer
 (Printed Name)
 1.
 Chairman & President
 (Title)

(Signature)
 Jeffrey Gary Park
 (Printed Name)
 2.
 Executive VP Finance, CFO & Treasurer
 (Title)

(Signature)
 Clifford Elliot Berman
 (Printed Name)
 3.
 Secretary
 (Title)

Subscribed and sworn to before me this
 _____ day of _____, 2014

a. Is this an original filing?
 b. If no,
 1. State the amendment number
 2. Date filed
 3. Number of pages attached

Yes[X] No[]

(Notary Public Signature)



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF ALABAMA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total | | | | |
|--|-------------|---------------|--|-------------|-----------------------------|-------------|--------------------|-------------|-------------|--------------|
| 1. Life Insurance | | 5,543 | | | | 5,543 | | | | |
| 2. Annuity considerations | | | | | | | | | | |
| 3. Deposit-type contract funds | | | X X X | | | | | | | |
| 4. Other considerations | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 5,543 | | | | 5,543 | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | |
| Annuities: | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | 948 | | | | 948 | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | |
| 15. Totals | | 948 | | | | 948 | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | |
| 1301. | | | | | | | | | | |
| 1302. | | | | | | | | | | |
| 1303. | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
| | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | |
| 18.1 By payment in full | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | No. of Policies | | | |
| 20. In force December 31, prior year | 19 | 436,532 | (a)..... | | | | | | 19 | 436,532 |
| 21. Issued during year | | | | | | | | | | |
| 22. Other changes to in force (Net) | (2) | (9,613) | | | | | | | (2) | (9,613) |
| 23. In force December 31 of current year | 17 | 426,919 | (a)..... | | | | | | 17 | 426,919 |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|----------------------|-----------------------------|--|-------------------------|-----------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | |
| 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 products0, and number of persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF ALASKA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | | 4 Industrial | | 5 Total | | | | | | | | | |
|--|--|---------------|--|--|-------------|-----------------------------|-------------|-------------|-------------|-------------|--------------|--|--|--|--|--|--|
| 1. Life Insurance | | | | | | | | | | | | | | | | | |
| 2. Annuity considerations | | | | | | | | | | | | | | | | | |
| 3. Deposit-type contract funds | | | | XXX | | | | XXX | | | | | | | | | |
| 4. Other considerations | | | | | | | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | | | | | | | | | | | | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | | | | | | | | | | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | | | | | | | | |
| 15. Totals | | | | | | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | | | | | |
| 1301. | | | | | | | | | | | | | | | | | |
| 1302. | | | | | | | | | | | | | | | | | |
| 1303. | | | | | | | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | | | | | | | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount | | | | | | |
| 16. Unpaid December 31, prior year | | | | | | | | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | | | | | | | | |
| 18.1 Settled during current year: By payment in full | | | | | | | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | | | | | | | |
| 20. In force December 31, prior year | | | | (a) | | | | | | | | | | | | | |
| 21. Issued during year | | | | | | | | | | | | | | | | | |
| 22. Other changes to in force (Net) | | | | | | | | | | | | | | | | | |
| 23. In force December 31 of current year | | | | (a) | | | | | | | | | | | | | |

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

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | |
| 25.1 Other Individual Policies | | | | | | | |
| 25.2 Non-cancelable (b) | | | | | | | |
| 25.3 Guaranteed renewable (b) | | | | | | | |
| 25.4 Non-renewable for stated reasons only (b) | | | | | | | |
| 25.5 Other accident only | | | | | | | |
| 25.6 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF ARIZONA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | | 4 Industrial | | 5 Total | | | | | | | |
|--|----|---------------|--|--|-------------|-----------------------------|-------------|-------------|-------------|--|--|--|--|--|--|
| 1. Life Insurance | | 31,105 | | | | | | 31,105 | | | | | | | |
| 2. Annuity considerations | | 25,000 | | | | | | 25,000 | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 56,105 | | | | | | 56,105 | | | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | 138,307 | | | | | | 138,307 | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | 138,307 | | | | | | 138,307 | | | | | | | |
| 15. Totals | | | | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | | | |
| 1301. | | | | | | | | | | | | | | | |
| 1302. | | | | | | | | | | | | | | | |
| 1303. | | | | | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | | | | | | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | | | | | | |
| 16. Unpaid December 31, prior year | | | | | | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | | | | | | |
| 18.1 Settled during current year: By payment in full | | | | | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | | | | | |
| 20. In force December 31, prior year | 19 | 1,708,990 | | (a) | | | | 19 | | | | | | | |
| 21. Issued during year | 3 | 120,135 | | | | | | 3 | | | | | | | |
| 22. Other changes to in force (Net) | 22 | 1,829,125 | | (a) | | | | 22 | | | | | | | |

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

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | |
| 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 products0, and number of persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF ARKANSAS

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | | 4 Industrial | | 5 Total | | | | | | | |
|--|-----|---------------|--|--|-------------|-----------------------------|-------------|-------------|-------------|--|--|--|--|--|--|
| 1. Life Insurance | | 3,273 | | | | | | 3,273 | | | | | | | |
| 2. Annuity considerations | | | | | | | | | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 3,273 | | | | | | 3,273 | | | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | 3,610 | | | | | | 3,610 | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | 3,610 | | | | | | 3,610 | | | | | | | |
| 15. Totals | | | | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | | | |
| 1301. | | | | | | | | | | | | | | | |
| 1302. | | | | | | | | | | | | | | | |
| 1303. | | | | | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | | | | | | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | | | | | | |
| 16. Unpaid December 31, prior year | | | | | | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | | | | | | |
| 18.1 Settled during current year: By payment in full | | | | | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | | | | | |
| 20. In force December 31, prior year | 9 | 630,158 | | (a) | | | | 9 | | | | | | | |
| 21. Issued during year | (2) | (351,910) | | | | | | (2) | | | | | | | |
| 22. Other changes to in force (Net) | | | | | | | | | | | | | | | |
| 23. In force December 31 of current year | 7 | 278,248 | | (a) | | | | 7 | | | | | | | |

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

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | |
| 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF CALIFORNIA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total |
|---|---------|---------------|--|------------|-----------------|------------|
| 1. Life Insurance | 151,899 | | | | | 151,899 |
| 2. Annuity considerations | 1,040 | | | | | 1,040 |
| 3. Deposit-type contract funds | | XXX | | | XXX | |
| 4. Other considerations | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | 152,939 | | | | | 152,939 |

DIRECT DIVIDENDS TO POLICYHOLDERS

Life Insurance:

6.1 Paid in cash or left on deposit

6.2 Applied to pay renewal premiums

6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period

6.4 Other

6.5 Totals (sum of Lines 6.1 to 6.4)

Annuities:

7.1 Paid in cash or left on deposit

7.2 Applied to provide paid-up annuities

7.3 Other

7.4 Totals (sum of Lines 7.1 to 7.3)

8. Grand Totals (Lines 6.5 plus 7.4)

| DIRECT CLAIMS AND BENEFITS PAID | | 61,618 | | | | | | | |
|---|--|---------|--|--|--|--|--|--|---------|
| 9. Death benefits | | 61,618 | | | | | | | 61,618 |
| 10. Matured endowments | | | | | | | | | |
| 11. Annuity benefits | | 2,628 | | | | | | | 2,628 |
| 12. Surrender values and withdrawals for life contracts | | 175,957 | | | | | | | 175,957 |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | |
| 14. All other benefits, except accident and health | | 240,203 | | | | | | | 240,203 |
| 15. Totals | | | | | | | | | |

DETAILS OF WRITE-INS

| | | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--|
| 1301. | | | | | | | | | |
| 1302. | | | | | | | | | |
| 1303. | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | |

| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
|--|-------------|-------------|--|-------------|-----------------------------|-------------|-------------|-------------|-------------|--------------|
| | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | |
| 17. Incurred during current year | 2 | 61,618 | | | | | | | 2 | 61,618 |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full | 2 | 61,618 | | | | | | | 2 | 61,618 |
| 18.2 By payment on compromised claims | | | | | | | | | | |
| 18.3 Totals paid | 2 | 61,618 | | | | | | | 2 | 61,618 |
| 18.4 Reduction by compromise | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | |
| 18.6 Total settlements | 2 | 61,618 | | | | | | | 2 | 61,618 |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | |
| 20. In force December 31, prior year | 264 | 25,926,133 | (a) | | | | | | 264 | 25,926,133 |
| 21. Issued during year | | | | | | | | | | |
| 22. Other changes to in force (Net) | (26) | (2,960,402) | | | | | | | (26) | (2,960,402) |
| 23. In force December 31 of current year | 238 | 22,965,731 | (a) | | | | | | 238 | 22,965,731 |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|----------------------|-----------------------------|--|-------------------------|-----------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF COLORADO

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total | | | | |
|--|-------------|---------------|--|-------------|-----------------------------|-------------|--------------------|-------------|-------------|--------------|
| 1. Life Insurance | | 34,323 | | | | 34,323 | | | | |
| 2. Annuity considerations | | | | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 34,323 | | | | 34,323 | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | |
| Annuities: | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | |
| 9. Death benefits | | 26,132 | | | | 26,132 | | | | |
| 10. Matured endowments | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | 26,266 | | | | 26,266 | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | |
| 15. Totals | | 52,398 | | | | 52,398 | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | |
| 1301. | | | | | | | | | | |
| 1302. | | | | | | | | | | |
| 1303. | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
| | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | |
| 17. Incurred during current year | 1 | 26,132 | | | | | | | 1 | 26,132 |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full | 1 | 26,132 | | | | | | | 1 | 26,132 |
| 18.2 By payment on compromised claims | | | | | | | | | | |
| 18.3 Totals paid | 1 | 26,132 | | | | | | | 1 | 26,132 |
| 18.4 Reduction by compromise | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | |
| 18.6 Total settlements | 1 | 26,132 | | | | | | | 1 | 26,132 |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | No. of Policies | | | |
| 20. In force December 31, prior year | 18 | 1,232,674 | (a) | | | | | | 18 | 1,232,674 |
| 21. Issued during year | | | | | | | | | | |
| 22. Other changes to in force (Net) | (1) | (126,278) | | | | | | | (1) | (126,278) |
| 23. In force December 31 of current year | 17 | 1,106,396 | (a) | | | | | | 17 | 1,106,396 |

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

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|--|--|--|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF CONNECTICUT

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | | 2 Credit Life (Group and Individual) | | 3 Group | | 4 Industrial | | 5 Total | | | | | | | | | | | |
|--|--|---------------|--|--|--|-------------|--|-----------------------------|--|-------------|--|--|--|--|--|--|--|--|--|--|--|
| 1. Life Insurance | | 5,531 | | | | | | | | 5,531 | | | | | | | | | | | |
| 2. Annuity considerations | | | | | | | | | | | | | | | | | | | | | |
| 3. Deposit-type contract funds | | | | XXX | | | | | | XXX | | | | | | | | | | | |
| 4. Other considerations | | | | | | | | | | | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 5,531 | | | | | | | | 5,531 | | | | | | | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | | | | | | | | | | | | | | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | | | | | | | | | | | | |
| 15. Totals | | | | | | | | | | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | | | | | | | | | |
| 1301. | | | | | | | | | | | | | | | | | | | | | |
| 1302. | | | | | | | | | | | | | | | | | | | | | |
| 1303. | | | | | | | | | | | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | |
| Number | | Amount | | 3 No. of Ind.Pols & Group Certifs. | | 4 Amount | | 5 No. of Certificates | | 6 Amount | | | | | | | | | | | |
| 16. Unpaid December 31, prior year | | | | | | | | | | | | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | | | | | | | | | | | | |
| 18.1 Settled during current year: By payment in full | | | | | | | | | | | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | | | | | | | | | | | |
| 20. In force December 31, prior year | | 5 | | 550,000 | | (a) | | | | 5 | | | | | | | | | | | |
| 21. Issued during year | | | | | | | | | | | | | | | | | | | | | |
| 22. Other changes to in force (Net) | | | | | | | | | | | | | | | | | | | | | |
| 23. In force December 31 of current year | | 5 | | 550,000 | | (a) | | | | 5 | | | | | | | | | | | |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|--|----------------------|-----------------------------|--|-------------------------|-----------------------------|
| 24. Group Policies (b) | | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | | |
| 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF DELAWARE

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total | | | | |
|--|--|---------------|--|------------|------------------------|------------|--------------------|--------|--------|----------|
| 1. Life Insurance | | 600 | | | | 600 | | | | |
| 2. Annuity considerations | | | | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 600 | | | | 600 | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | |
| Annuities: | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | |
| 9. Death benefits | | 62,500 | | | | 62,500 | | | | |
| 10. Matured endowments | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | | | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | |
| 15. Totals | | 62,500 | | | | 62,500 | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | |
| 1301. | | | | | | | | | | |
| 1302. | | | | | | | | | | |
| 1303. | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | 2 Ordinary | 3 Credit Life (Group and Individual) | 4 | 5 Group | 6 | 7 Industrial | 8 | 9 | 10 |
| Number | | Amount | No. of Ind.Pols & Group Certifs. | Amount | No. of Certificates | Amount | Number | Amount | Number | Amount |
| 16. Unpaid December 31, prior year | | 1 | 62,500 | | | | | | 1 | 62,500 |
| 17. Incurred during current year | | 1 | 62,500 | | | | | | 1 | 62,500 |
| 18.1 By payment in full | | 1 | 62,500 | | | | | | 1 | 62,500 |
| 18.2 By payment on compromised claims | | | | | | | | | | |
| 18.3 Totals paid | | 1 | 62,500 | | | | | | 1 | 62,500 |
| 18.4 Reduction by compromise | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | |
| 18.6 Total settlements | | 1 | 62,500 | | | | | | 1 | 62,500 |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | No. of Policies | | | |
| 20. In force December 31, prior year | | 3 | 177,500 | (a) | | | | | 3 | 177,500 |
| 21. Issued during year | | (1) | (62,500) | | | | | | (1) | (62,500) |
| 22. Other changes to in force (Net) | | | | | | | | | | |
| 23. In force December 31 of current year | | 2 | 115,000 | (a) | | | | | 2 | 115,000 |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | |
| 25.1 Other Individual Policies | | | | | | | |
| 25.2 Non-cancelable (b) | | | | | | | |
| 25.3 Guaranteed renewable (b) | | | | | | | |
| 25.4 Non-renewable for stated reasons only (b) | | | | | | | |
| 25.5 Other accident only | | | | | | | |
| 25.6 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF DISTRICT OF COLUMBIA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | | 4 Industrial | | 5 Total | | | | | | | |
|--|--|---------------|--|--|-------------|-----------------------------|-------------|-------------|-------------|--|--|--|--|--|--|
| 1. Life Insurance | | | | | | | | | | | | | | | |
| 2. Annuity considerations | | | | | | | | | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | | | | | | | | |
| 4. Other considerations | | | | | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | | | | | | | | | | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | | | | | | | | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | | | | | | |
| 15. Totals | | | | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | | | |
| 1301. | | | | | | | | | | | | | | | |
| 1302. | | | | | | | | | | | | | | | |
| 1303. | | | | | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | | | | | | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | | | | | | |
| 16. Unpaid December 31, prior year | | | | | | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | | | | | | |
| 18.1 By payment in full | | | | | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | | | | | |
| 20. In force December 31, prior year | | | | (a) | | | | | | | | | | | |
| 21. Issued during year | | | | | | | | | | | | | | | |
| 22. Other changes to in force (Net) | | | | | | | | | | | | | | | |
| 23. In force December 31 of current year | | | | (a) | | | | | | | | | | | |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | |
| 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF FLORIDA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total | | | | | |
|--|--|---------------|--|--|-----------------|-----------------------------|--------------------|-------------|-------------|-------------|--------------|
| 1. Life Insurance | | 38,851 | | | | 38,851 | | | | | |
| 2. Annuity considerations | | 1,010 | | | | 1,010 | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | | | | |
| 4. Other considerations | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 39,861 | | | | 39,861 | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | |
| 9. Death benefits | | 1,268 | | | | 1,268 | | | | | |
| 10. Matured endowments | | | | | | | | | | | |
| 11. Annuity benefits | | 3,142 | | | | 3,142 | | | | | |
| 12. Surrender values and withdrawals for life contracts | | 91,710 | | | | 91,710 | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | | |
| 15. Totals | | 96,120 | | | | 96,120 | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | |
| 1301. | | | | | | | | | | | |
| 1302. | | | | | | | | | | | |
| 1303. | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount |
| 16. Unpaid December 31, prior year | | 1 | 1,268 | | | | | | | 1 | 1,268 |
| 17. Incurred during current year | | 1 | 1,268 | | | | | | | 1 | 1,268 |
| 18.1 By payment in full | | 1 | 1,268 | | | | | | | 1 | 1,268 |
| 18.2 By payment on compromised claims | | | | | | | | | | | |
| 18.3 Totals paid | | 1 | 1,268 | | | | | | | 1 | 1,268 |
| 18.4 Reduction by compromise | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | |
| 18.6 Total settlements | | 1 | 1,268 | | | | | | | 1 | 1,268 |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | No. of Policies | | | | |
| 20. In force December 31, prior year | | 77 | 4,675,884 | (a) | | | | | | 77 | 4,675,884 |
| 21. Issued during year | | | | | | | | | | | |
| 22. Other changes to in force (Net) | | (5) | (356,544) | | | | | | | (5) | (356,544) |
| 23. In force December 31 of current year | | 72 | 4,319,340 | (a) | | | | | | 72 | 4,319,340 |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|----------------------|-----------------------------|--|-------------------------|-----------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | |
| 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF GEORGIA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | | 2 Credit Life (Group and Individual) | | 3 Group | | 4 Industrial | | 5 Total | | | | | | | | | | | |
|--|--|---------------|--|--|--|-------------|--|-----------------------------|--|-------------|--|--|--|--|--|--|--|--|--|--|--|
| 1. Life Insurance | | 13,855 | | | | | | | | 13,855 | | | | | | | | | | | |
| 2. Annuity considerations | | | | | | | | | | | | | | | | | | | | | |
| 3. Deposit-type contract funds | | | | XXX | | | | XXX | | | | | | | | | | | | | |
| 4. Other considerations | | | | | | | | | | | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 13,855 | | | | | | | | 13,855 | | | | | | | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | | | | | | | | | | | |
| 9. Death benefits | | 100,059 | | | | | | | | 100,059 | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | 3,373 | | | | | | | | 3,373 | | | | | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | 103,432 | | | | | | | | 103,432 | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | | | | | | | | | |
| 1301. | | | | | | | | | | | | | | | | | | | | | |
| 1302. | | | | | | | | | | | | | | | | | | | | | |
| 1303. | | | | | | | | | | | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | |
| Number | | Amount | | 3 No. of Ind.Pols & Group Certifs. | | 4 Amount | | 5 No. of Certificates | | 6 Amount | | | | | | | | | | | |
| 16. Unpaid December 31, prior year | | 1 | | 100,059 | | | | | | | | | | | | | | | | | |
| 17. Incurred during current year | | 1 | | 100,059 | | | | | | 1 | | | | | | | | | | | |
| 18.1 By payment in full | | 1 | | 100,059 | | | | | | 1 | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | | | | | | | | | | | |
| 18.3 Totals paid | | 1 | | 100,059 | | | | | | 1 | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | | | | | | | | | | | |
| 18.6 Total settlements | | 1 | | 100,059 | | | | | | 1 | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | | | | | | | | | | | |
| 20. In force December 31, prior year | | 39 | | 1,920,847 | | (a)..... | | | | 39 | | | | | | | | | | | |
| 21. Issued during year | | (1) | | (218,365) | | | | | | (1) | | | | | | | | | | | |
| 22. Other changes to in force (Net) | | | | | | | | | | | | | | | | | | | | | |
| 23. In force December 31 of current year | | 38 | | 1,702,482 | | (a)..... | | | | 38 | | | | | | | | | | | |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|--|----------------------|-----------------------------|--|-------------------------|-----------------------------|
| 24. Group Policies (b) | | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | | |
| 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF HAWAII

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | | 2 Credit Life (Group and Individual) | | 3 Group | | 4 Industrial | | 5 Total | | | | | | | | | | | |
|--|--|---------------|--|--|--|------------|--|-----------------|--|------------|--|--|--|--|--|--|--|--|--|--|--|
| 1. Life Insurance | | 2,047 | | | | | | | | 2,047 | | | | | | | | | | | |
| 2. Annuity considerations | | | | | | | | | | | | | | | | | | | | | |
| 3. Deposit-type contract funds | | | | XXX | | | | | | XXX | | | | | | | | | | | |
| 4. Other considerations | | | | | | | | | | | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 2,047 | | | | | | | | 2,047 | | | | | | | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | | | | | | | | | | | | | | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | | | | | | | | | | | | |
| 15. Totals | | | | | | | | | | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | | | | | | | | | |
| 1301. | | | | | | | | | | | | | | | | | | | | | |
| 1302. | | | | | | | | | | | | | | | | | | | | | |
| 1303. | | | | | | | | | | | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | |
| 16. Unpaid December 31, prior year | | | | | | | | | | | | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | | | | | | | | | | | | |
| 18.1 Settled during current year: By payment in full | | | | | | | | | | | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | | | | | | | | | | | |
| 20. In force December 31, prior year | | 2 | | 113,518 | | (a) | | | | 2 | | | | | | | | | | | |
| 21. Issued during year | | | | | | | | | | | | | | | | | | | | | |
| 22. Other changes to in force (Net) | | | | 372 | | | | | | | | | | | | | | | | | |
| 23. In force December 31 of current year | | 2 | | 113,890 | | (a) | | | | 2 | | | | | | | | | | | |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|--|--|--|--|----------------------|-----------------------------|--|-------------------------|-----------------------------|
| 24. Group Policies (b) | | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | | |
| 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 .....0, and number of persons insured under indemnity only products .....0. | | | | | | | | |



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF IDAHO

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | | 4 Industrial | | 5 Total | | | | | | | |
|--|--|---------------|--|--|-------------|-----------------------------|-------------|-------------|-------------|--|--|--|--|--|--|
| 1. Life Insurance | | 2,415 | | | | | | 2,415 | | | | | | | |
| 2. Annuity considerations | | | | | | | | | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 2,415 | | | | | | 2,415 | | | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | | | | | | | | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | | | | | | |
| 15. Totals | | | | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | | | |
| 1301. | | | | | | | | | | | | | | | |
| 1302. | | | | | | | | | | | | | | | |
| 1303. | | | | | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | | | | | | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | | | | | | |
| 16. Unpaid December 31, prior year | | | | | | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | | | | | | |
| 18.1 Settled during current year: By payment in full | | | | | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | | | | | |
| 20. In force December 31, prior year | | 7 | 671,854 | (a) | | | | 7 | | | | | | | |
| 21. Issued during year | | | | | | | | | | | | | | | |
| 22. Other changes to in force (Net) | | (1) | (15,000) | | | | | (1) | | | | | | | |
| 23. In force December 31 of current year | | 6 | 656,854 | (a) | | | | 6 | | | | | | | |

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

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | |
| 25.1 Other Individual Policies | | | | | | | |
| 25.2 Non-cancelable (b) | | | | | | | |
| 25.3 Guaranteed renewable (b) | | | | | | | |
| 25.4 Non-renewable for stated reasons only (b) | | | | | | | |
| 25.5 Other accident only | | | | | | | |
| 25.6 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF ILLINOIS

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total | | | | |
|--|-------------|---------------|--|-------------|-----------------------------|-------------|--------------------|-------------|-------------|--------------|
| 1. Life Insurance | | 12,889 | | | | 12,889 | | | | |
| 2. Annuity considerations | | | | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 12,889 | | | | 12,889 | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | |
| Annuities: | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | 62,849 | | | | 62,849 | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | |
| 14. All other benefits, except accident and health | | 62,849 | | | | 62,849 | | | | |
| 15. Totals | | 62,849 | | | | 62,849 | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | |
| 1301. | | | | | | | | | | |
| 1302. | | | | | | | | | | |
| 1303. | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
| | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | No. of Policies | | | |
| 20. In force December 31, prior year | 36 | 1,550,170 | (a) | | | | | | 36 | 1,550,170 |
| 21. Issued during year | | | | | | | | | | |
| 22. Other changes to in force (Net) | (4) | (97,730) | | | | | | | (4) | (97,730) |
| 23. In force December 31 of current year | 32 | 1,452,440 | (a) | | | | | | 32 | 1,452,440 |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF INDIANA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total | | | | |
|--|-------------|---------------|--|-------------|-----------------------------|-------------|--------------------|-------------|-------------|--------------|
| 1. Life Insurance | | 20,478 | | | | 20,478 | | | | |
| 2. Annuity considerations | | | X X X | | X X X | | | | | |
| 3. Deposit-type contract funds | | | | | | | | | | |
| 4. Other considerations | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 20,478 | | | | 20,478 | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | |
| Annuities: | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | |
| 9. Death benefits | | 12,368 | | | | 12,368 | | | | |
| 10. Matured endowments | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | 55,511 | | | | 55,511 | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | |
| 15. Totals | | 67,879 | | | | 67,879 | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | |
| 1301. | | | | | | | | | | |
| 1302. | | | | | | | | | | |
| 1303. | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
| | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | |
| 17. Incurred during current year | 1 | 12,368 | | | | | | | 1 | 12,368 |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full | 1 | 12,368 | | | | | | | 1 | 12,368 |
| 18.2 By payment on compromised claims | | | | | | | | | | |
| 18.3 Totals paid | 1 | 12,368 | | | | | | | 1 | 12,368 |
| 18.4 Reduction by compromise | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | |
| 18.6 Total settlements | 1 | 12,368 | | | | | | | 1 | 12,368 |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | No. of Policies | | | |
| 20. In force December 31, prior year | 53 | 2,131,924 | (a) | | | | | | 53 | 2,131,924 |
| 21. Issued during year | | | | | | | | | | |
| 22. Other changes to in force (Net) | (4) | (151,774) | | | | | | | (4) | (151,774) |
| 23. In force December 31 of current year | 49 | 1,980,150 | (a) | | | | | | 49 | 1,980,150 |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|--|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF IOWA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total | | | | |
|--|-------------|---------------|--|-------------|-----------------------------|-------------|--------------------|-------------|-------------|--------------|
| 1. Life Insurance | | 5,723 | | | | 5,723 | | | | |
| 2. Annuity considerations | | | | | | | | | | |
| 3. Deposit-type contract funds | | | X X X | | | | | | | |
| 4. Other considerations | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 5,723 | | | | 5,723 | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | |
| Annuities: | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | |
| 9. Death benefits | | 14,850 | | | | 14,850 | | | | |
| 10. Matured endowments | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | | | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | |
| 15. Totals | | 14,850 | | | | 14,850 | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | |
| 1301. | | | | | | | | | | |
| 1302. | | | | | | | | | | |
| 1303. | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
| | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | |
| 17. Incurred during current year | 1 | 14,850 | | | | | | | 1 | 14,850 |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full | 1 | 14,850 | | | | | | | 1 | 14,850 |
| 18.2 By payment on compromised claims | | | | | | | | | | |
| 18.3 Totals paid | 1 | 14,850 | | | | | | | 1 | 14,850 |
| 18.4 Reduction by compromise | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | |
| 18.6 Total settlements | 1 | 14,850 | | | | | | | 1 | 14,850 |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | No. of Policies | | | |
| 20. In force December 31, prior year | 9 | 306,213 | | (a) | | | | | 9 | 306,213 |
| 21. Issued during year | | | | | | | | | | |
| 22. Other changes to in force (Net) | (1) | (14,406) | | | | | | | (1) | (14,406) |
| 23. In force December 31 of current year | 8 | 291,807 | | (a) | | | | | 8 | 291,807 |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|----------------------|-----------------------------|--|-------------------------|-----------------------------|
| 24. Group Policies (b) | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF KANSAS

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | | 2 Credit Life (Group and Individual) | | 3 Group | | 4 Industrial | | 5 Total | |
|--|-------|---------------|-------------|--|-------------|-----------------------------|-------------|-----------------|-------------|-------------|--------------|
| 1. Life Insurance | 3,795 | | | | | | | | | | 3,795 |
| 2. Annuity considerations | | | | | | | | | | | |
| 3. Deposit-type contract funds | | | | X X X | | | | | | | |
| 4. Other considerations | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | 3,795 | | | | | | | | | | 3,795 |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | | | | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | | |
| 15. Totals | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | |
| 1301. | | | | | | | | | | | |
| 1302. | | | | | | | | | | | |
| 1303. | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | | |
| Settled during current year: | | | | | | | | | | | |
| 18.1 By payment in full | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | |
| 20. In force December 31, prior year | 14 | 292,750 | | (a) | | | | | | 14 | 292,750 |
| 21. Issued during year | | | | | | | | | | | |
| 22. Other changes to in force (Net) | (1) | (23,611) | | | | | | | | (1) | (23,611) |
| 23. In force December 31 of current year | 13 | 269,139 | | (a) | | | | | | 13 | 269,139 |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|--|----------------------|-----------------------------|--|-------------------------|-----------------------------|
| 24. Group Policies (b) | | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF KENTUCKY

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total | | | | |
|--|--|---------------|--|------------|------------------------|-----------------|--------------------|--------|--------|-----------|
| 1. Life Insurance | | 52,505 | | | | 52,505 | | | | |
| 2. Annuity considerations | | 275 | | | | 275 | | | | |
| 3. Deposit-type contract funds | | | XXX | | XXX | | | | | |
| 4. Other considerations | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 52,780 | | | | 52,780 | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | |
| Annuities: | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | |
| 9. Death benefits | | 15,660 | | | | 15,660 | | | | |
| 10. Matured endowments | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | 126,110 | | | | 126,110 | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | |
| 15. Totals | | 141,770 | | | | 141,770 | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | |
| 1301. | | | | | | | | | | |
| 1302. | | | | | | | | | | |
| 1303. | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | 2 Ordinary | 3 Credit Life (Group and Individual) | 4 | 5 Group | 6 Industrial | 7 | 8 | 9 | 10 |
| Number | | Amount | No. of Ind.Pols & Group Certifs. | Amount | No. of Certificates | Amount | Number | Amount | Number | Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | |
| 17. Incurred during current year | | 3 | 15,660 | | | | | | 3 | 15,660 |
| 18.1 By payment in full | | 3 | 15,660 | | | | | | 3 | 15,660 |
| 18.2 By payment on compromised claims | | | | | | | | | | |
| 18.3 Totals paid | | 3 | 15,660 | | | | | | 3 | 15,660 |
| 18.4 Reduction by compromise | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | |
| 18.6 Total settlements | | 3 | 15,660 | | | | | | 3 | 15,660 |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | No. of Policies | | | |
| 20. In force December 31, prior year | | 206 | 5,013,538 | (a) | | | | | 206 | 5,013,538 |
| 21. Issued during year | | | | | | | | | | |
| 22. Other changes to in force (Net) | | (18) | (589,153) | | | | | | (18) | (589,153) |
| 23. In force December 31 of current year | | 188 | 4,424,385 | (a) | | | | | 188 | 4,424,385 |

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

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|-----|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | |
| 25.1 Non-cancelable (b) | | | | | | | |
| 25.2 Guaranteed renewable (b) | | 709 | | | | | |
| 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) | | 709 | | | | | |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) | | 709 | | | | | |

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF LOUISIANA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | | 2 Credit Life (Group and Individual) | | 3 Group | | 4 Industrial | | 5 Total | |
|--|--------|---------------|-------------|--|-------------|-----------------------------|-------------|-----------------|-------------|-------------|--------------|
| 1. Life Insurance | 14,316 | | | | | | | | | | 14,316 |
| 2. Annuity considerations | | | | | | | | | | | |
| 3. Deposit-type contract funds | | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | 14,316 | | | | | | | | | | 14,316 |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | 29 | | | | | | | | | | 29 |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | |
| 14. All other benefits, except accident and health | 29 | | | | | | | | | | 29 |
| 15. Totals | 29 | | | | | | | | | | 29 |
| DETAILS OF WRITE-INS | | | | | | | | | | | |
| 1301. | | | | | | | | | | | |
| 1302. | | | | | | | | | | | |
| 1303. | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | | |
| Settled during current year: | | | | | | | | | | | |
| 18.1 By payment in full | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | |
| 20. In force December 31, prior year | 73 | 1,675,594 | | (a)..... | | | | | | 73 | 1,675,594 |
| 21. Issued during year | | | | | | | | | | | |
| 22. Other changes to in force (Net) | (7) | (84,091) | | | | | | | | (7) | (84,091) |
| 23. In force December 31 of current year | 66 | 1,591,503 | | (a)..... | | | | | | 66 | 1,591,503 |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|--|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF MAINE

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total | | | | |
|--|--|---------------|--|------------|------------------------|-----------------|--------------------|--------|--------|--------|
| 1. Life Insurance | | 65 | | | | 65 | | | | |
| 2. Annuity considerations | | | | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 65 | | | | 65 | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | |
| Annuities: | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | | | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | |
| 15. Totals | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | |
| 1301. | | | | | | | | | | |
| 1302. | | | | | | | | | | |
| 1303. | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | 2 Ordinary | 3 Credit Life (Group and Individual) | 4 | 5 Group | 6 Industrial | 7 | 8 | 9 | 10 |
| Number | | Amount | No. of Ind.Pols & Group Certifs. | Amount | No. of Certificates | Amount | Number | Amount | Number | Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | |
| 18.1 By payment in full | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | No. of Policies | | | |
| 20. In force December 31, prior year | | 1 | 19,505 | (a)..... | | | | | 1 | 19,505 |
| 21. Issued during year | | | | | | | | | | |
| 22. Other changes to in force (Net) | | | | | | | | | | |
| 23. In force December 31 of current year | | 1 | 19,505 | (a)..... | | | | | 1 | 19,505 |

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

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | |
| 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 products0, and number of persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF MARYLAND

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | | 2 Credit Life (Group and Individual) | | 3 Group | | 4 Industrial | | 5 Total | |
|--|-------|---------------|-------------|--|-------------|-----------------------------|-------------|-----------------|-------------|-------------|--------------|
| 1. Life Insurance | 1,630 | | | | | | | | | | 1,630 |
| 2. Annuity considerations | | | | | | | | | | | |
| 3. Deposit-type contract funds | | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | 1,630 | | | | | | | | | | 1,630 |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | | | | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | | |
| 15. Totals | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | |
| 1301. | | | | | | | | | | | |
| 1302. | | | | | | | | | | | |
| 1303. | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | | |
| Settled during current year: | | | | | | | | | | | |
| 18.1 By payment in full | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | |
| 20. In force December 31, prior year | 5 | 178,085 | | (a) | | | | | | 5 | 178,085 |
| 21. Issued during year | | | | | | | | | | | |
| 22. Other changes to in force (Net) | | 304 | | | | | | | | | 304 |
| 23. In force December 31 of current year | 5 | 178,389 | | (a) | | | | | | 5 | 178,389 |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|--|----------------------|-----------------------------|--|-------------------------|-----------------------------|
| 24. Group Policies (b) | | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF MASSACHUSETTS

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | | 4 Industrial | | 5 Total | | | | | | | |
|--|---|---------------|--|--|-------------|-----------------------------|-------------|-------------|-------------|--|--|--|--|--|--|
| 1. Life Insurance | | 477 | | | | | | 477 | | | | | | | |
| 2. Annuity considerations | | | | | | | | | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 477 | | | | | | 477 | | | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | 33,397 | | | | | | 33,397 | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | 33,397 | | | | | | 33,397 | | | | | | | |
| 15. Totals | | | | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | | | |
| 1301. | | | | | | | | | | | | | | | |
| 1302. | | | | | | | | | | | | | | | |
| 1303. | | | | | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | | | | | | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | | | | | | |
| 16. Unpaid December 31, prior year | | | | | | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | | | | | | |
| 18.1 Settled during current year: By payment in full | | | | | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | | | | | |
| 20. In force December 31, prior year | 1 | 63,477 | | (a)..... | | | | 1..... | | | | | | | |
| 21. Issued during year | | | | | | | | | | | | | | | |
| 22. Other changes to in force (Net) | | | | | | | | | | | | | | | |
| 23. In force December 31 of current year | 1 | 63,477 | | (a)..... | | | | 1..... | | | | | | | |

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

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | |
| 25.1 Other Individual Policies | | | | | | | |
| 25.2 Non-cancelable (b) | | | | | | | |
| 25.3 Guaranteed renewable (b) | | | | | | | |
| 25.4 Non-renewable for stated reasons only (b) | | | | | | | |
| 25.5 Other accident only | | | | | | | |
| 25.6 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF MICHIGAN

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total | | | | |
|--|-------------|---------------|--|-------------|-----------------------------|-------------|--------------------|-------------|-------------|--------------|
| 1. Life Insurance | | 22,538 | | | | 22,538 | | | | |
| 2. Annuity considerations | | | XXX | | XXX | | | | | |
| 3. Deposit-type contract funds | | | | | | | | | | |
| 4. Other considerations | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 22,538 | | | | 22,538 | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | |
| Annuities: | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | |
| 9. Death benefits | | 169,636 | | | | 169,636 | | | | |
| 10. Matured endowments | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | 42,812 | | | | 42,812 | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | |
| 15. Totals | | 212,448 | | | | 212,448 | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | |
| 1301. | | | | | | | | | | |
| 1302. | | | | | | | | | | |
| 1303. | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
| | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | |
| 17. Incurred during current year | 2 | 169,636 | | | | | | | 2 | 169,636 |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full | 2 | 169,636 | | | | | | | 2 | 169,636 |
| 18.2 By payment on compromised claims | | | | | | | | | | |
| 18.3 Totals paid | 2 | 169,636 | | | | | | | 2 | 169,636 |
| 18.4 Reduction by compromise | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | |
| 18.6 Total settlements | 2 | 169,636 | | | | | | | 2 | 169,636 |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | No. of Policies | | | |
| 20. In force December 31, prior year | 55 | 2,992,166 | (a) | | | | | | 55 | 2,992,166 |
| 21. Issued during year | | | | | | | | | | |
| 22. Other changes to in force (Net) | (3) | (261,887) | | | | | | | (3) | (261,887) |
| 23. In force December 31 of current year | 52 | 2,730,279 | (a) | | | | | | 52 | 2,730,279 |

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

ACCIDENT AND HEALTH INSURANCE

| | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|--|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF MINNESOTA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | | 4 Industrial | | 5 Total | | | | | | | |
|--|-----|---------------|--|--|-------------|-----------------------------|-------------|-------------|-------------|--|--|--|--|--|--|
| 1. Life Insurance | | 1,899 | | | | | | 1,899 | | | | | | | |
| 2. Annuity considerations | | 200,000 | | | | | | 200,000 | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 201,899 | | | | | | 201,899 | | | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | 124,003 | | | | | | 124,003 | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | 124,003 | | | | | | 124,003 | | | | | | | |
| 15. Totals | | | | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | | | |
| 1301. | | | | | | | | | | | | | | | |
| 1302. | | | | | | | | | | | | | | | |
| 1303. | | | | | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | | | | | | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | | | | | | |
| 16. Unpaid December 31, prior year | | | | | | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | | | | | | |
| 18.1 Settled during current year: By payment in full | | | | | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | | | | | |
| 20. In force December 31, prior year | 16 | 366,656 | | (a) | | | | 16 | | | | | | | |
| 21. Issued during year | | | | | | | | | | | | | | | |
| 22. Other changes to in force (Net) | (1) | (40,000) | | | | | | (1) | | | | | | | |
| 23. In force December 31 of current year | 15 | 326,656 | | (a) | | | | 15 | | | | | | | |

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

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|----------------------|-----------------------------|--|-------------------------|-----------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | |
| 25.1 Other Individual Policies | | | | | | | |
| 25.2 Non-cancelable (b) | | | | | | | |
| 25.3 Guaranteed renewable (b) | | | | | | | |
| 25.4 Non-renewable for stated reasons only (b) | | | | | | | |
| 25.5 Other accident only | | | | | | | |
| 25.6 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF MISSISSIPPI

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total | | | | |
|--|-------------|---------------|--|-------------|-----------------------------|-------------|--------------------|-------------|-------------|--------------|
| 1. Life Insurance | | 6,687 | | | | 6,687 | | | | |
| 2. Annuity considerations | | | | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 6,687 | | | | 6,687 | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | |
| Annuities: | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | | | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | |
| 15. Totals | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | |
| 1301. | | | | | | | | | | |
| 1302. | | | | | | | | | | |
| 1303. | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
| | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | No. of Policies | | | |
| 20. In force December 31, prior year | 10 | 592,494 | (a)..... | | | | | | 10 | 592,494 |
| 21. Issued during year | | | | | | | | | | |
| 22. Other changes to in force (Net) | (1) | (7,233) | | | | | | | (1) | (7,233) |
| 23. In force December 31 of current year | 9 | 585,261 | (a)..... | | | | | | 9 | 585,261 |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|--|--|--|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF MISSOURI

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total | | | | |
|--|-------------|---------------|--|-------------|-----------------------------|-------------|--------------------|-------------|-------------|--------------|
| 1. Life Insurance | | 1,738 | | | | 1,738 | | | | |
| 2. Annuity considerations | | | XXX | | XXX | | | | | |
| 3. Deposit-type contract funds | | | | | | | | | | |
| 4. Other considerations | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 1,738 | | | | 1,738 | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | |
| Annuities: | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | 11,828 | | | | 11,828 | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | |
| 15. Totals | | 11,828 | | | | 11,828 | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | |
| 1301. | | | | | | | | | | |
| 1302. | | | | | | | | | | |
| 1303. | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
| | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | No. of Policies | | | |
| 20. In force December 31, prior year | 4 | 228,788 | (a) | | | | | | 4 | 228,788 |
| 21. Issued during year | | | | | | | | | | |
| 22. Other changes to in force (Net) | (1) | (3,788) | | | | | | | (1) | (3,788) |
| 23. In force December 31 of current year | 3 | 225,000 | (a) | | | | | | 3 | 225,000 |

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

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|--|--|--|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF MONTANA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total | | | | |
|--|--|---------------|--|------------|------------------------|-----------------|--------------------|--------|--------|--------|
| 1. Life Insurance | | | | | | | | | | |
| 2. Annuity considerations | | | | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | | | | | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | |
| Annuities: | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | |
| 9. Death benefits | | 22,228 | | | | 22,228 | | | | |
| 10. Matured endowments | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | | | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | |
| 15. Totals | | 22,228 | | | | 22,228 | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | |
| 1301. | | | | | | | | | | |
| 1302. | | | | | | | | | | |
| 1303. | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | 2 Ordinary | 3 Credit Life (Group and Individual) | 4 | 5 Group | 6 Industrial | 7 | 8 | 9 | 10 |
| Number | | Amount | No. of Ind.Pols & Group Certifs. | Amount | No. of Certificates | Amount | Number | Amount | Number | Amount |
| 16. Unpaid December 31, prior year | | 1 | 22,228 | | | | | | 1 | 22,228 |
| 17. Incurred during current year | | 1 | 22,228 | | | | | | 1 | 22,228 |
| 18.1 Settled during current year: By payment in full | | 1 | 22,228 | | | | | | 1 | 22,228 |
| 18.2 By payment on compromised claims | | | | | | | | | | |
| 18.3 Totals paid | | 1 | 22,228 | | | | | | 1 | 22,228 |
| 18.4 Reduction by compromise | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | |
| 18.6 Total settlements | | 1 | 22,228 | | | | | | 1 | 22,228 |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | No. of Policies | | | |
| 20. In force December 31, prior year | | | (a) | | | | | | | |
| 21. Issued during year | | | | | | | | | | |
| 22. Other changes to in force (Net) | | | | | | | | | | |
| 23. In force December 31 of current year | | | (a) | | | | | | | |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|----------------------|-----------------------------|--|-------------------------|-----------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | |
| 24.4.1 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 products0, and number of persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF NEBRASKA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | | 4 Industrial | | 5 Total | | | | | | | |
|--|--|---------------|--|--|-------------|-----------------------------|-------------|-------------|-------------|-------------|--------------|--|--|--|--|
| 1. Life Insurance | | 1,443 | | | | | | 1,443 | | | | | | | |
| 2. Annuity considerations | | | | | | | | | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | XXX | | | | | | | | | |
| 4. Other considerations | | | | | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 1,443 | | | | | | 1,443 | | | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | 423 | | | | | | 423 | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | | | | | | |
| 15. Totals | | 423 | | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | | | |
| 1301. | | | | | | | | | | | | | | | |
| 1302. | | | | | | | | | | | | | | | |
| 1303. | | | | | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | | | | | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount | | | | |
| 16. Unpaid December 31, prior year | | | | | | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | | | | | | |
| 18.1 Settled during current year: By payment in full | | | | | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | | | | | |
| 20. In force December 31, prior year | | 5 | 255,100 | (a)..... | | | | | | 5 | 255,100 | | | | |
| 21. Issued during year | | | | | | | | | | | | | | | |
| 22. Other changes to in force (Net) | | | | | | | | | | | | | | | |
| 23. In force December 31 of current year | | 5 | 255,100 | (a)..... | | | | | | 5 | 255,100 | | | | |

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

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|----------------------|-----------------------------|--|-------------------------|-----------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | |
| 25.1 Other Individual Policies | | | | | | | |
| 25.2 Non-cancellable (b) | | | | | | | |
| 25.3 Guaranteed renewable (b) | | | | | | | |
| 25.4 Non-renewable for stated reasons only (b) | | | | | | | |
| 25.5 Other accident only | | | | | | | |
| 25.6 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF NEVADA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total | | | | |
|--|-------------|---------------|--|-------------|-----------------------------|-------------|--------------------|-------------|-------------|--------------|
| 1. Life Insurance | | 5,117 | | | | 5,117 | | | | |
| 2. Annuity considerations | | | | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 5,117 | | | | 5,117 | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | |
| Annuities: | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | |
| 9. Death benefits | | 100,000 | | | | 100,000 | | | | |
| 10. Matured endowments | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | | | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | |
| 15. Totals | | 100,000 | | | | 100,000 | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | |
| 1301. | | | | | | | | | | |
| 1302. | | | | | | | | | | |
| 1303. | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
| | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | |
| 17. Incurred during current year | 1 | 100,000 | | | | | | | 1 | 100,000 |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full | 1 | 100,000 | | | | | | | 1 | 100,000 |
| 18.2 By payment on compromised claims | | | | | | | | | | |
| 18.3 Totals paid | 1 | 100,000 | | | | | | | 1 | 100,000 |
| 18.4 Reduction by compromise | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | |
| 18.6 Total settlements | 1 | 100,000 | | | | | | | 1 | 100,000 |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | No. of Policies | | | |
| 20. In force December 31, prior year | 15 | 897,144 | (a) | | | | | | 15 | 897,144 |
| 21. Issued during year | | | | | | | | | | |
| 22. Other changes to in force (Net) | (2) | (171,665) | | | | | | | (2) | (171,665) |
| 23. In force December 31 of current year | 13 | 725,479 | (a) | | | | | | 13 | 725,479 |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|--|--|--|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF NEW HAMPSHIRE

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | | 4 Industrial | | 5 Total | | | | | | | |
|--|---|---------------|--|--|-----------------------------|--|-------------------------|-----------------------------|-------------|--|--|--|--|--|--|
| 1. Life Insurance | | 524 | | | | | | 524 | | | | | | | |
| 2. Annuity considerations | | | | | | | | | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 524 | | | | | | 524 | | | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | | | | | | | | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | | | | | | |
| 15. Totals | | | | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | | | |
| 1301. | | | | | | | | | | | | | | | |
| 1302. | | | | | | | | | | | | | | | |
| 1303. | | | | | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | | | | | | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | | | | | | |
| 16. Unpaid December 31, prior year | | | | | | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | | | | | | |
| 18.1 Settled during current year: By payment in full | | | | | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | | | | | |
| 20. In force December 31, prior year | 2 | 110,144 | | (a) | | | | | 2 | | | | | | |
| 21. Issued during year | | 723 | | | | | | | 723 | | | | | | |
| 22. Other changes to in force (Net) | | | | | | | | | | | | | | | |
| 23. In force December 31 of current year | 2 | 110,867 | | (a) | | | | | 2 | | | | | | |
| ACCIDENT AND HEALTH INSURANCE | | | | | | | | | | | | | | | |
| | | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred | | | | | | | |
| 24. Group Policies (b) | | | | | | | | | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | | | | | | | | | |
| 25.1 Other Individual Policies | | | | | | | | | | | | | | | |
| 25.2 Non-cancelable (b) | | | | | | | | | | | | | | | |
| 25.3 Guaranteed renewable (b) | | | | | | | | | | | | | | | |
| 25.4 Non-renewable for stated reasons only (b) | | | | | | | | | | | | | | | |
| 25.5 Other accident only | | | | | | | | | | | | | | | |
| 25.6 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 .....0, and number of persons insured under indemnity only products .....0. | | | | | | | | | | | | | | | |



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF NEW JERSEY

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | | 4 Industrial | | 5 Total | | | | | | | |
|--|--|---------------|--|--|-------------|-----------------------------|-------------|-------------|-------------|-------------|--------------|--|--|--|--|
| 1. Life Insurance | | 415 | | | | | | 415 | | | | | | | |
| 2. Annuity considerations | | | | | | | | | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 415 | | | | | | 415 | | | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | | | | | |
| 11. Annuity benefits | | | 3,194 | | | | | 3,194 | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | | | | | | | | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | 3,194 | | | | | 3,194 | | | | | | | |
| 15. Totals | | | | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | | | |
| 1301. | | | | | | | | | | | | | | | |
| 1302. | | | | | | | | | | | | | | | |
| 1303. | | | | | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | | | | | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount | | | | |
| 16. Unpaid December 31, prior year | | | | | | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | | | | | | |
| 18.1 Settled during current year: By payment in full | | | | | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | | | | | |
| 20. In force December 31, prior year | | 2 | 240,250 | (a) | | | | | | 2 | 240,250 | | | | |
| 21. Issued during year | | | | | | | | | | | | | | | |
| 22. Other changes to in force (Net) | | | | | | | | | | | | | | | |
| 23. In force December 31 of current year | | 2 | 240,250 | (a) | | | | | | 2 | 240,250 | | | | |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | |
| 25.1 Other Individual Policies | | | | | | | |
| 25.2 Non-cancelable (b) | | | | | | | |
| 25.3 Guaranteed renewable (b) | | | | | | | |
| 25.4 Non-renewable for stated reasons only (b) | | | | | | | |
| 25.5 Other accident only | | | | | | | |
| 25.6 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF NEW MEXICO

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total | | | | | |
|--|--|---------------|--|--|-----------------|-----------------------------|-----------------|-------------|-------------|-------------|--------------|
| 1. Life Insurance | | 2,019 | | | | 2,019 | | | | | |
| 2. Annuity considerations | | | | | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | | | | |
| 4. Other considerations | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 2,019 | | | | 2,019 | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | | | | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | | |
| 15. Totals | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | |
| 1301. | | | | | | | | | | | |
| 1302. | | | | | | | | | | | |
| 1303. | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | 2 Ordinary | 3 Credit Life (Group and Individual) | 4 Group | 5 Industrial | 6 Total | | | | | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | | |
| 18.1 Settled during current year: By payment in full | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | No. of Policies | | | | |
| 20. In force December 31, prior year | | 9 | 339,385 | (a) | | | | | | 9 | 339,385 |
| 21. Issued during year | | | | | | | | | | | |
| 22. Other changes to in force (Net) | | | | | | | | | | | |
| 23. In force December 31 of current year | | 9 | 339,385 | (a) | | | | | | 9 | 339,385 |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|----------------------|-----------------------------|--|-------------------------|-----------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | |
| 24.4.1 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF NEW YORK

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | | 4 Industrial | | 5 Total | | | | | | | |
|--|---|---------------|--|--|-------------|-----------------------------|-------------|-------------|-------------|--|--|--|--|--|--|
| 1. Life Insurance | | 143 | | | | | | 143 | | | | | | | |
| 2. Annuity considerations | | | | | | | | | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 143 | | | | | | 143 | | | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | | | | | | | | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | | | | | | |
| 15. Totals | | | | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | | | |
| 1301. | | | | | | | | | | | | | | | |
| 1302. | | | | | | | | | | | | | | | |
| 1303. | | | | | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | | | | | | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | | | | | | |
| 16. Unpaid December 31, prior year | | | | | | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | | | | | | |
| 18.1 Settled during current year: By payment in full | | | | | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | | | | | |
| 20. In force December 31, prior year | 1 | 22,396 | | (a) | | | | | 1 22,396 | | | | | | |
| 21. Issued during year | | | | | | | | | | | | | | | |
| 22. Other changes to in force (Net) | | | | | | | | | | | | | | | |
| 23. In force December 31 of current year | 1 | 22,396 | | (a) | | | | | 1 22,396 | | | | | | |

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

ACCIDENT AND HEALTH INSURANCE

| | | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|--|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | | |
| 25.1 Other Individual Policies | | | | | | | | |
| 25.2 Non-cancelable (b) | | | | | | | | |
| 25.3 Guaranteed renewable (b) | | | | | | | | |
| 25.4 Non-renewable for stated reasons only (b) | | | | | | | | |
| 25.5 Other accident only | | | | | | | | |
| 25.6 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF NORTH CAROLINA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total |
|---|--|---------------|--|------------|-----------------|------------|
| 1. Life Insurance | | 23,239 | | | | 23,239 |
| 2. Annuity considerations | | 5,900 | | | | 5,900 |
| 3. Deposit-type contract funds | | | XXX | | | |
| 4. Other considerations | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 29,139 | | | | 29,139 |

DIRECT DIVIDENDS TO POLICYHOLDERS

Life Insurance:

- 6.1 Paid in cash or left on deposit
- 6.2 Applied to pay renewal premiums
- 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period
- 6.4 Other
- 6.5 Totals (sum of Lines 6.1 to 6.4)

Annuities:

- 7.1 Paid in cash or left on deposit
- 7.2 Applied to provide paid-up annuities
- 7.3 Other
- 7.4 Totals (sum of Lines 7.1 to 7.3)

8. Grand Totals (Lines 6.5 plus 7.4)

| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | |
|---|--|---------|--|--|--|--|---------|
| 9. Death benefits | | 60,000 | | | | | 60,000 |
| 10. Matured endowments | | | | | | | |
| 11. Annuity benefits | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | 49,184 | | | | | 49,184 |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | |
| 15. Totals | | 109,184 | | | | | 109,184 |

DETAILS OF WRITE-INS

| | | | | | | | |
|---|--|--|--|--|--|--|--|
| 1301. | | | | | | | |
| 1302. | | | | | | | |
| 1303. | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | |

| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
|--|-------------|-------------|--|-------------|-----------------------------|-------------|-------------|-------------|-------------|--------------|
| | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | |
| 17. Incurred during current year | 2 | 60,000 | | | | | | | 2 | 60,000 |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full | 2 | 60,000 | | | | | | | 2 | 60,000 |
| 18.2 By payment on compromised claims | | | | | | | | | | |
| 18.3 Totals paid | 2 | 60,000 | | | | | | | 2 | 60,000 |
| 18.4 Reduction by compromise | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | |
| 18.6 Total settlements | 2 | 60,000 | | | | | | | 2 | 60,000 |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | |
| 20. In force December 31, prior year | 41 | 2,493,063 | | (a)..... | | | | | 41 | 2,493,063 |
| 21. Issued during year | | | | | | | | | | |
| 22. Other changes to in force (Net) | (3) | (56,315) | | | | | | | (3) | (56,315) |
| 23. In force December 31 of current year | 38 | 2,436,748 | | (a)..... | | | | | 38 | 2,436,748 |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|----------------------|-----------------------------|--|-------------------------|-----------------------------|
| 24. Group Policies (b) | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF NORTH DAKOTA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | | 4 Industrial | | 5 Total | | | | | | | |
|--|--|---------------|--|--|-----------------------------|--|----------------------------|--------------------------------|-------------|--|--|--|--|--|--|
| 1. Life Insurance | | 394 | | | | | | 394 | | | | | | | |
| 2. Annuity considerations | | | | | | | | | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 394 | | | | | | 394 | | | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | | | | | | | | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | | | | | | |
| 15. Totals | | | | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | | | |
| 1301. | | | | | | | | | | | | | | | |
| 1302. | | | | | | | | | | | | | | | |
| 1303. | | | | | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | | | | | | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | | | | | | |
| 16. Unpaid December 31, prior year | | | | | | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | | | | | | |
| 18.1 Settled during current year: By payment in full | | | | | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | | | | | |
| 20. In force December 31, prior year | | 2 | 41,008 | (a) | | | | | 2 | | | | | | |
| 21. Issued during year | | | | | | | | | | | | | | | |
| 22. Other changes to in force (Net) | | | | | | | | | | | | | | | |
| 23. In force December 31 of current year | | 2 | 41,008 | (a) | | | | | 2 | | | | | | |
| ACCIDENT AND HEALTH INSURANCE | | | | | | | | | | | | | | | |
| | | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred | | | | | | | |
| 24. Group Policies (b) | | | | | | | | | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | | | | | | | | | |
| 25.1 Other Individual Policies | | | | | | | | | | | | | | | |
| 25.2 Non-cancelable (b) | | | | | | | | | | | | | | | |
| 25.3 Guaranteed renewable (b) | | | | | | | | | | | | | | | |
| 25.4 Non-renewable for stated reasons only (b) | | | | | | | | | | | | | | | |
| 25.5 Other accident only | | | | | | | | | | | | | | | |
| 25.6 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF OHIO

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total |
|---|---------|---------------|--|------------|-----------------|------------|
| 1. Life Insurance | 351,111 | | | | | 351,111 |
| 2. Annuity considerations | 19,526 | | | | | 19,526 |
| 3. Deposit-type contract funds | | XXX | | | XXX | |
| 4. Other considerations | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | 370,637 | | | | | 370,637 |

DIRECT DIVIDENDS TO POLICYHOLDERS

Life Insurance:

- 6.1 Paid in cash or left on deposit
- 6.2 Applied to pay renewal premiums
- 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period
- 6.4 Other
- 6.5 Totals (sum of Lines 6.1 to 6.4)

Annuities:

- 7.1 Paid in cash or left on deposit
- 7.2 Applied to provide paid-up annuities
- 7.3 Other
- 7.4 Totals (sum of Lines 7.1 to 7.3)

8. Grand Totals (Lines 6.5 plus 7.4)

| DIRECT CLAIMS AND BENEFITS PAID | | 255,154 | | | | | | | |
|---|--|---------|--|--|--|--|--|--|---------|
| 9. Death benefits | | 255,154 | | | | | | | 255,154 |
| 10. Matured endowments | | | | | | | | | |
| 11. Annuity benefits | | 4,642 | | | | | | | 4,642 |
| 12. Surrender values and withdrawals for life contracts | | 455,505 | | | | | | | 455,505 |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | |
| 15. Totals | | 715,300 | | | | | | | 715,300 |

DETAILS OF WRITE-INS

| | | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--|
| 1301. | | | | | | | | | |
| 1302. | | | | | | | | | |
| 1303. | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | |

| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
|--|-------------|-------------|--|-------------|-----------------------------|-------------|-------------|-------------|-------------|--------------|
| | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | |
| 17. Incurred during current year | 20 | 255,154 | | | | | | | 20 | 255,154 |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full | 20 | 255,154 | | | | | | | 20 | 255,154 |
| 18.2 By payment on compromised claims | | | | | | | | | | |
| 18.3 Totals paid | 20 | 255,154 | | | | | | | 20 | 255,154 |
| 18.4 Reduction by compromise | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | |
| 18.6 Total settlements | 20 | 255,154 | | | | | | | 20 | 255,154 |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | |
| 20. In force December 31, prior year | 1,281 | 38,678,861 | | (a) | | | | | 1,281 | 38,678,861 |
| 21. Issued during year | | | | | | | | | | |
| 22. Other changes to in force (Net) | (102) | (3,293,900) | | | | | | | (102) | (3,293,900) |
| 23. In force December 31 of current year | 1,179 | 35,384,961 | | (a) | | | | | 1,179 | 35,384,961 |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|-----|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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) | | 808 | | | | | |
| 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) | | 808 | | | | | |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) | | 808 | | | | | |

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF OKLAHOMA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total | | | | |
|--|-------------|---------------|--|-------------|-----------------------------|-------------|--------------------|-------------|-------------|--------------|
| 1. Life Insurance | | 1,562 | | | | 1,562 | | | | |
| 2. Annuity considerations | | | | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 1,562 | | | | 1,562 | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | |
| Annuities: | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | | | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | |
| 15. Totals | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | |
| 1301. | | | | | | | | | | |
| 1302. | | | | | | | | | | |
| 1303. | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
| | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | No. of Policies | | | |
| 20. In force December 31, prior year | 4 | 351,470 | | (a)..... | | | | | 4 | 351,470 |
| 21. Issued during year | | | | | | | | | | |
| 22. Other changes to in force (Net) | | | | | | | | | | |
| 23. In force December 31 of current year | 4 | 351,470 | | (a)..... | | | | | 4 | 351,470 |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|--|--|--|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF OREGON

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | | 2 Credit Life (Group and Individual) | | 3 Group | | 4 Industrial | | 5 Total | |
|--|-------|---------------|-------------|--|-------------|-----------------------------|-------------|-----------------|-------------|-------------|--------------|
| 1. Life Insurance | 1,009 | | | | | | | | | | 1,009 |
| 2. Annuity considerations | | | | | | | | | | | |
| 3. Deposit-type contract funds | | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | 1,009 | | | | | | | | | | 1,009 |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | | | | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | | |
| 15. Totals | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | |
| 1301. | | | | | | | | | | | |
| 1302. | | | | | | | | | | | |
| 1303. | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | | |
| Settled during current year: | | | | | | | | | | | |
| 18.1 By payment in full | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | |
| 20. In force December 31, prior year | 7 | 286,276 | | (a) | | | | | | 7 | 286,276 |
| 21. Issued during year | | | | | | | | | | | |
| 22. Other changes to in force (Net) | | | | | | | | | | | |
| 23. In force December 31 of current year | 7 | 286,276 | | (a) | | | | | | 7 | 286,276 |

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

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 products0, and number of persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF PENNSYLVANIA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | | 4 Industrial | | 5 Total | | | | | | | |
|--|--|---------------|--|--|-------------|-----------------------------|-------------|-------------|-------------|-------------|--------------|--|--|--|--|
| 1. Life Insurance | | 2,600 | | | | | | 2,600 | | | | | | | |
| 2. Annuity considerations | | | | | | | | | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 2,600 | | | | | | 2,600 | | | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | | | | | |
| 9. Death benefits | | 54,827 | | | | | | 54,827 | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | 1,004 | | | | | | 1,004 | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | | | | | | |
| 15. Totals | | 55,831 | | | | | | 55,831 | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | | | |
| 1301. | | | | | | | | | | | | | | | |
| 1302. | | | | | | | | | | | | | | | |
| 1303. | | | | | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | | | | | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount | | | | |
| 16. Unpaid December 31, prior year | | 1 | 54,827 | | | | | | | 1 | 54,827 | | | | |
| 17. Incurred during current year | | 1 | 54,827 | | | | | | | 1 | 54,827 | | | | |
| 18.1 By payment in full | | 1 | 54,827 | | | | | | | 1 | 54,827 | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | | | | | |
| 18.3 Totals paid | | 1 | 54,827 | | | | | | | 1 | 54,827 | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | | | | | |
| 18.6 Total settlements | | 1 | 54,827 | | | | | | | 1 | 54,827 | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | | | | | |
| 20. In force December 31, prior year | | 11 | 188,277 | (a) | | | | | | 11 | 188,277 | | | | |
| 21. Issued during year | | | | | | | | | | | | | | | |
| 22. Other changes to in force (Net) | | (1) | (54,874) | | | | | | | (1) | (54,874) | | | | |
| 23. In force December 31 of current year | | 10 | 133,403 | (a) | | | | | | 10 | 133,403 | | | | |

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

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | |
| 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF RHODE ISLAND

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total | | | | |
|--|--|---------------|--|------------|------------------------|-----------------|--------------------|--------|--------|--------|
| 1. Life Insurance | | | | | | | | | | |
| 2. Annuity considerations | | | | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | | | | | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | |
| Annuities: | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | 113,049 | | | | 113,049 | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | |
| 14. All other benefits, except accident and health | | 113,049 | | | | 113,049 | | | | |
| 15. Totals | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | |
| 1301. | | | | | | | | | | |
| 1302. | | | | | | | | | | |
| 1303. | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | 2 Ordinary | 3 Credit Life (Group and Individual) | 4 | 5 Group | 6 Industrial | 7 | 8 | 9 | 10 |
| Number | | Amount | No. of Ind.Pols & Group Certifs. | Amount | No. of Certificates | Amount | Number | Amount | Number | Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | |
| 18.1 Settled during current year: By payment in full | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | No. of Policies | | | |
| 20. In force December 31, prior year | | | (a) | | | | | | | |
| 21. Issued during year | | | | | | | | | | |
| 22. Other changes to in force (Net) | | | | | | | | | | |
| 23. In force December 31 of current year | | | (a) | | | | | | | |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|----------------------|-----------------------------|--|-------------------------|-----------------------------|
| 24. Group Policies (b) | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | |
| 25.1 Other Individual Policies | | | | | | |
| 25.2 Non-cancelable (b) | | | | | | |
| 25.3 Guaranteed renewable (b) | | | | | | |
| 25.4 Non-renewable for stated reasons only (b) | | | | | | |
| 25.5 Other accident only | | | | | | |
| 25.6 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF SOUTH CAROLINA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | | 2 Credit Life (Group and Individual) | | 3 Group | | 4 Industrial | | 5 Total | |
|--|-------|---------------|-------------|--|-------------|-----------------------------|-------------|-----------------|-------------|-------------|--------------|
| 1. Life Insurance | 8,907 | | | | | | | | | | 8,907 |
| 2. Annuity considerations | | | | | | | | | | | |
| 3. Deposit-type contract funds | | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | 8,907 | | | | | | | | | | 8,907 |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | | | | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | | |
| 15. Totals | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | |
| 1301. | | | | | | | | | | | |
| 1302. | | | | | | | | | | | |
| 1303. | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | | |
| Settled during current year: | | | | | | | | | | | |
| 18.1 By payment in full | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | |
| 20. In force December 31, prior year | 16 | 388,885 | | (a) | | | | | | 16 | 388,885 |
| 21. Issued during year | | | | | | | | | | | |
| 22. Other changes to in force (Net) | (1) | (74,332) | | | | | | | | (1) | (74,332) |
| 23. In force December 31 of current year | 15 | 314,553 | | (a) | | | | | | 15 | 314,553 |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|--|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF SOUTH DAKOTA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | | 4 Industrial | | 5 Total | | | | | | | |
|--|--|---------------|--|--|-------------|-----------------------------|-------------|-------------|-------------|--|--|--|--|--|--|
| 1. Life Insurance | | 746 | | | | | | 746 | | | | | | | |
| 2. Annuity considerations | | | | | | | | | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 746 | | | | | | 746 | | | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | | | | | | | | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | | | | | | |
| 15. Totals | | | | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | | | |
| 1301. | | | | | | | | | | | | | | | |
| 1302. | | | | | | | | | | | | | | | |
| 1303. | | | | | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | | | | | | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | | | | | | |
| 16. Unpaid December 31, prior year | | | | | | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | | | | | | |
| 18.1 By payment in full | | | | | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | | | | | |
| 20. In force December 31, prior year | | 5 | 68,223 | (a) | | | | 5 | | | | | | | |
| 21. Issued during year | | | | | | | | | | | | | | | |
| 22. Other changes to in force (Net) | | | | | | | | | | | | | | | |
| 23. In force December 31 of current year | | 5 | 68,223 | (a) | | | | 5 | | | | | | | |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | |
| 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF TENNESSEE

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | | 4 Industrial | | 5 Total | | | | | | | |
|--|----|---------------|--|--|-------------|-----------------------------|-------------|-------------|-------------|--|--|--|--|--|--|
| 1. Life Insurance | | 8,625 | | | | | | 8,625 | | | | | | | |
| 2. Annuity considerations | | | | | | | | | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 8,625 | | | | | | 8,625 | | | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | 266 | | | | | | 266 | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | 266 | | | | | | 266 | | | | | | | |
| 15. Totals | | 266 | | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | | | |
| 1301. | | | | | | | | | | | | | | | |
| 1302. | | | | | | | | | | | | | | | |
| 1303. | | | | | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | | | | | | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | | | | | | |
| 16. Unpaid December 31, prior year | | | | | | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | | | | | | |
| 18.1 Settled during current year: By payment in full | | | | | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | | | | | |
| 20. In force December 31, prior year | 17 | 727,931 | | (a) | | | | 17 | | | | | | | |
| 21. Issued during year | 3 | 117,158 | | | | | | 3 | | | | | | | |
| 22. Other changes to in force (Net) | | | | | | | | | | | | | | | |
| 23. In force December 31 of current year | 20 | 845,089 | | (a) | | | | 20 | | | | | | | |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | |
| 25.1 Other Individual Policies | | | | | | | |
| 25.2 Non-cancelable (b) | | | | | | | |
| 25.3 Guaranteed renewable (b) | | | | | | | |
| 25.4 Non-renewable for stated reasons only (b) | | | | | | | |
| 25.5 Other accident only | | | | | | | |
| 25.6 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF TEXAS

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | | 4 Industrial | | 5 Total | | | | | | | |
|--|--|---------------|--|--|-------------|-----------------------------|-------------|-------------|-------------|--|--|--|--|--|--|
| 1. Life Insurance | | 35,394 | | | | | | 35,394 | | | | | | | |
| 2. Annuity considerations | | 700 | | | | | | 700 | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 36,094 | | | | | | 36,094 | | | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | 76,207 | | | | | | 76,207 | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | 76,207 | | | | | | 76,207 | | | | | | | |
| 15. Totals | | | | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | | | |
| 1301. | | | | | | | | | | | | | | | |
| 1302. | | | | | | | | | | | | | | | |
| 1303. | | | | | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | | | | | | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | | | | | | |
| 16. Unpaid December 31, prior year | | | | | | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | | | | | | |
| 18.1 Settled during current year: By payment in full | | | | | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | | | | | |
| 20. In force December 31, prior year | | 77 | 5,934,404 | | | | | | | | | | | | |
| 21. Issued during year | | | | | | | | | | | | | | | |
| 22. Other changes to in force (Net) | | (6) | (494,240) | | | | | | | | | | | | |
| 23. In force December 31 of current year | | 71 | 5,440,164 | | | | | | | | | | | | |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|----------------------|-----------------------------|--|-------------------------|-----------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | |
| 25.1 Other Individual Policies | | | | | | | |
| 25.2 Non-cancelable (b) | | | | | | | |
| 25.3 Guaranteed renewable (b) | | | | | | | |
| 25.4 Non-renewable for stated reasons only (b) | | | | | | | |
| 25.5 Other accident only | | | | | | | |
| 25.6 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF UTAH

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total | | | | |
|--|--------|---------------|--|--------------------|-----------------------------|-------------|-------------|-------------|-------------|--------------|
| 1. Life Insurance | | 1,740 | | | | 1,740 | | | | |
| 2. Annuity considerations | | | | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 1,740 | | | | 1,740 | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | |
| Annuities: | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | 1,123 | | | | 1,123 | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | |
| 14. All other benefits, except accident and health | | 1,123 | | | | 1,123 | | | | |
| 15. Totals | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | |
| 1301. | | | | | | | | | | |
| 1302. | | | | | | | | | | |
| 1303. | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Number | Amount | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
| | | | 1 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | |
| POLICY EXHIBIT | | | | No. of Policies | | | | | | |
| 20. In force December 31, prior year | 5 | 482,000 | (a)..... | | | | | 5 | 482,000 | |
| 21. Issued during year | 1 | 69,386 | | | | | | 1 | 69,386 | |
| 22. Other changes to in force (Net) | | | | | | | | | | |
| 23. In force December 31 of current year | 6 | 551,386 | (a)..... | | | | | 6 | 551,386 | |

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

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|--|--|--|----------------------|-----------------------------|--|-------------------------|-----------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF VERNONT

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | | 4 Industrial | | 5 Total | | | | | | | | | |
|--|--|---------------|--|--|-------------|-----------------------------|-------------|-------------|-------------|--|--|--|--|--|--|--|--|
| 1. Life Insurance | | | | | | | | | | | | | | | | | |
| 2. Annuity considerations | | | | | | | | | | | | | | | | | |
| 3. Deposit-type contract funds | | | | XXX | | | | XXX | | | | | | | | | |
| 4. Other considerations | | | | | | | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | | | | | | | | | | | | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | | | | | | | | | | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | | | | | | | | |
| 15. Totals | | | | | | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | | | | | |
| 1301. | | | | | | | | | | | | | | | | | |
| 1302. | | | | | | | | | | | | | | | | | |
| 1303. | | | | | | | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | | | | | | | | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | | | | | | | | |
| 16. Unpaid December 31, prior year | | | | | | | | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | | | | | | | | |
| 18.1 Settled during current year: By payment in full | | | | | | | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | | | | | | | |
| 20. In force December 31, prior year | | | | (a) | | | | | | | | | | | | | |
| 21. Issued during year | | | | | | | | | | | | | | | | | |
| 22. Other changes to in force (Net) | | | | | | | | | | | | | | | | | |
| 23. In force December 31 of current year | | | | (a) | | | | | | | | | | | | | |

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

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | |
| 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF VIRGINIA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total |
|---|--------|---------------|--|------------|-----------------|------------|
| 1. Life Insurance | 26,692 | | | | | 26,692 |
| 2. Annuity considerations | 312 | | | | | 312 |
| 3. Deposit-type contract funds | | XXX | | | XXX | |
| 4. Other considerations | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | 27,004 | | | | | 27,004 |

DIRECT DIVIDENDS TO POLICYHOLDERS

Life Insurance:

- 6.1 Paid in cash or left on deposit
- 6.2 Applied to pay renewal premiums
- 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period
- 6.4 Other
- 6.5 Totals (sum of Lines 6.1 to 6.4)

Annuities:

- 7.1 Paid in cash or left on deposit
- 7.2 Applied to provide paid-up annuities
- 7.3 Other
- 7.4 Totals (sum of Lines 7.1 to 7.3)

8. Grand Totals (Lines 6.5 plus 7.4)

| DIRECT CLAIMS AND BENEFITS PAID | | 210,100 | | | | | | | | 210,100 |
|---|---------|---------|--|--|--|--|--|--|--|---------|
| 9. Death benefits | 210,100 | | | | | | | | | |
| 10. Matured endowments | 1,159 | | | | | | | | | 1,159 |
| 11. Annuity benefits | 257,681 | | | | | | | | | 257,681 |
| 12. Surrender values and withdrawals for life contracts | 257,681 | | | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | 468,939 | | | | | | | | | |
| 14. All other benefits, except accident and health | 468,939 | | | | | | | | | |
| 15. Totals | 468,939 | | | | | | | | | |

DETAILS OF WRITE-INS

| | | | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--|--|
| 1301. | | | | | | | | | | |
| 1302. | | | | | | | | | | |
| 1303. | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | |

| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
|--|-------------|-------------|--|-------------|-----------------------------|-------------|-------------|-------------|-------------|--------------|
| | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | |
| 17. Incurred during current year | 3 | 210,100 | | | | | | | 3 | 210,100 |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full | 3 | 210,100 | | | | | | | 3 | 210,100 |
| 18.2 By payment on compromised claims | | | | | | | | | | |
| 18.3 Totals paid | 3 | 210,100 | | | | | | | 3 | 210,100 |
| 18.4 Reduction by compromise | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | |
| 18.6 Total settlements | 3 | 210,100 | | | | | | | 3 | 210,100 |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | |
| 20. In force December 31, prior year | 47 | 4,090,650 | | (a) | | | | | 47 | 4,090,650 |
| 21. Issued during year | | | | | | | | | | |
| 22. Other changes to in force (Net) | (5) | (461,372) | | | | | | | (5) | (461,372) |
| 23. In force December 31 of current year | 42 | 3,629,278 | | (a) | | | | | 42 | 3,629,278 |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|----------------------|-----------------------------|--|-------------------------|-----------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 products0, and number of persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF WASHINGTON

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | | 4 Industrial | | 5 Total | | | | | | | |
|--|-----|---------------|--|--|-------------|-----------------------------|-------------|-------------|-------------|--|--|--|--|--|--|
| 1. Life Insurance | | 4,745 | | | | | | 4,745 | | | | | | | |
| 2. Annuity considerations | | | | | | | | | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | XXX | | | | | | | | | |
| 4. Other considerations | | | | | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 4,745 | | | | | | 4,745 | | | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | 280 | | | | | | 280 | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | | | | | | |
| 15. Totals | | 280 | | | | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | | | |
| 1301. | | | | | | | | | | | | | | | |
| 1302. | | | | | | | | | | | | | | | |
| 1303. | | | | | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | | | | | | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | | | | | | |
| 16. Unpaid December 31, prior year | | | | | | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | | | | | | |
| 18.1 Settled during current year: By payment in full | | | | | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | | | | | |
| 20. In force December 31, prior year | 12 | 1,071,523 | | (a) | | | | 12 | | | | | | | |
| 21. Issued during year | | | | | | | | | | | | | | | |
| 22. Other changes to in force (Net) | (1) | (180,000) | | | | | | (1) | | | | | | | |
| 23. In force December 31 of current year | 11 | 891,523 | | (a) | | | | 11 | | | | | | | |

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

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|----------------------|-----------------------------|--|-------------------------|-----------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | |
| 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF WEST VIRGINIA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | | 4 Industrial | | 5 Total | | | | | | | |
|--|--|---------------|--|--|-------------|-----------------------------|-------------|-------------|-------------|--|--|--|--|--|--|
| 1. Life Insurance | | 3,374 | | | | | | 3,374 | | | | | | | |
| 2. Annuity considerations | | | | | | | | | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | 3,374 | | | | | | 3,374 | | | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | | | | | |
| 9. Death benefits | | | 8,000 | | | | | 8,000 | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | | 1,268 | | | | | 1,268 | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | | | | | | |
| 15. Totals | | 9,268 | | | | | | 9,268 | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | | | | | | |
| 1301. | | | | | | | | | | | | | | | |
| 1302. | | | | | | | | | | | | | | | |
| 1303. | | | | | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | | | | | | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | | | | | | |
| 16. Unpaid December 31, prior year | | 1 | 8,000 | | | | | | | | | | | | |
| 17. Incurred during current year | | 1 | 8,000 | | | | | 1 | 8,000 | | | | | | |
| 18.1 By payment in full | | 1 | 8,000 | | | | | 1 | 8,000 | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | | | | | |
| 18.3 Totals paid | | 1 | 8,000 | | | | | 1 | 8,000 | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | | | | | |
| 18.6 Total settlements | | 1 | 8,000 | | | | | 1 | 8,000 | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | | | | | |
| 20. In force December 31, prior year | | 11 | 562,924 | (a) | | | | 11 | 562,924 | | | | | | |
| 21. Issued during year | | | | | | | | | | | | | | | |
| 22. Other changes to in force (Net) | | | 7,021 | | | | | | 7,021 | | | | | | |
| 23. In force December 31 of current year | | 11 | 569,945 | (a) | | | | 11 | 569,945 | | | | | | |

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

ACCIDENT AND HEALTH INSURANCE

| | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | | |
| 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF WISCONSIN

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | | 2 Credit Life (Group and Individual) | | 3 Group | | 4 Industrial | | 5 Total | |
|--|-------|---------------|-------------|--|-------------|-----------------------------|-------------|-----------------|-------------|-------------|--------------|
| 1. Life Insurance | 5,487 | | | | | | | | | | 5,487 |
| 2. Annuity considerations | | | | | | | | | | | |
| 3. Deposit-type contract funds | | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | 5,487 | | | | | | | | | | 5,487 |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | | |
| Annuities: | | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | 2,126 | | | | | | | | | 2,126 |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | | |
| 15. Totals | | 2,126 | | | | | | | | | 2,126 |
| DETAILS OF WRITE-INS | | | | | | | | | | | |
| 1301. | | | | | | | | | | | |
| 1302. | | | | | | | | | | | |
| 1303. | | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
| | | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | | |
| Settled during current year: | | | | | | | | | | | |
| 18.1 By payment in full | | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | | |
| 20. In force December 31, prior year | 18 | 685,641 | | (a) | | | | | | 18 | 685,641 |
| 21. Issued during year | | | | | | | | | | | |
| 22. Other changes to in force (Net) | (1) | (8,810) | | | | | | | | (1) | (8,810) |
| 23. In force December 31 of current year | 17 | 676,831 | | (a) | | | | | | 17 | 676,831 |

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

ACCIDENT AND HEALTH INSURANCE

| | | | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|--|--|----------------------|-----------------------------|--|-------------------------|-----------------------------|
| 24. Group Policies (b) | | | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 products0, and number of persons insured under indemnity only products0.



2013

Document Code: 430

DIRECT BUSINESS IN THE STATE OF WYOMING

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total | | | | |
|--|--|---------------|--|------------|------------------------|-----------------|--------------------|--------|--------|--------|
| 1. Life Insurance | | | | | | | | | | |
| 2. Annuity considerations | | | | | | | | | | |
| 3. Deposit-type contract funds | | | XXX | | | | | | | |
| 4. Other considerations | | | | | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | | | | | | | | | | |
| DIRECT DIVIDENDS TO POLICYHOLDERS | | | | | | | | | | |
| Life Insurance: | | | | | | | | | | |
| 6.1 Paid in cash or left on deposit | | | | | | | | | | |
| 6.2 Applied to pay renewal premiums | | | | | | | | | | |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period | | | | | | | | | | |
| 6.4 Other | | | | | | | | | | |
| 6.5 Totals (sum of Lines 6.1 to 6.4) | | | | | | | | | | |
| Annuities: | | | | | | | | | | |
| 7.1 Paid in cash or left on deposit | | | | | | | | | | |
| 7.2 Applied to provide paid-up annuities | | | | | | | | | | |
| 7.3 Other | | | | | | | | | | |
| 7.4 Totals (sum of Lines 7.1 to 7.3) | | | | | | | | | | |
| 8. Grand Totals (Lines 6.5 plus 7.4) | | | | | | | | | | |
| DIRECT CLAIMS AND BENEFITS PAID | | | | | | | | | | |
| 9. Death benefits | | | | | | | | | | |
| 10. Matured endowments | | | | | | | | | | |
| 11. Annuity benefits | | | | | | | | | | |
| 12. Surrender values and withdrawals for life contracts | | | | | | | | | | |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | | | | | |
| 14. All other benefits, except accident and health | | | | | | | | | | |
| 15. Totals | | | | | | | | | | |
| DETAILS OF WRITE-INS | | | | | | | | | | |
| 1301. | | | | | | | | | | |
| 1302. | | | | | | | | | | |
| 1303. | | | | | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | | | | | |
| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | | 2 Ordinary | 3 Credit Life (Group and Individual) | 4 | 5 Group | 6 Industrial | 7 | 8 | 9 | 10 |
| Number | | Amount | No. of Ind.Pols & Group Certifs. | Amount | No. of Certificates | Amount | Number | Amount | Number | Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | |
| 17. Incurred during current year | | | | | | | | | | |
| 18.1 Settled during current year: By payment in full | | | | | | | | | | |
| 18.2 By payment on compromised claims | | | | | | | | | | |
| 18.3 Totals paid | | | | | | | | | | |
| 18.4 Reduction by compromise | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | |
| 18.6 Total settlements | | | | | | | | | | |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | No. of Policies | | | |
| 20. In force December 31, prior year | | | | (a) | | | | | | |
| 21. Issued during year | | | | | | | | | | |
| 22. Other changes to in force (Net) | | | | | | | | | | |
| 23. In force December 31 of current year | | | | (a) | | | | | | |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|--|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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 | | | | | | |
| 25.1 Other Individual Policies | | | | | | |
| 25.2 Non-cancelable (b) | | | | | | |
| 25.3 Guaranteed renewable (b) | | | | | | |
| 25.4 Non-renewable for stated reasons only (b) | | | | | | |
| 25.5 Other accident only | | | | | | |
| 25.6 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 products0, and number of persons insured under indemnity only products0.



DIRECT BUSINESS IN THE STATE OF GRAND TOTAL

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2013

NAIC Company Code: 69647

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS | | 1 Ordinary | 2 Credit Life (Group and Individual) | 3 Group | 4 Industrial | 5 Total |
|---|-----------|---------------|--|------------|-----------------|------------|
| 1. Life Insurance | 919,469 | | | | | 919,469 |
| 2. Annuity considerations | 253,763 | | | | | 253,763 |
| 3. Deposit-type contract funds | | XXX | | | XXX | |
| 4. Other considerations | | | | | | |
| 5. Totals (sum of Lines 1 to 4) | 1,173,232 | | | | | 1,173,232 |

DIRECT DIVIDENDS TO POLICYHOLDERS

Life Insurance:

- 6.1 Paid in cash or left on deposit
- 6.2 Applied to pay renewal premiums
- 6.3 Applied to provide paid-up additions or shorten the endowment or premium - paying period
- 6.4 Other
- 6.5 Totals (sum of Lines 6.1 to 6.4)

Annuities:

- 7.1 Paid in cash or left on deposit
- 7.2 Applied to provide paid-up annuities
- 7.3 Other
- 7.4 Totals (sum of Lines 7.1 to 7.3)

8. Grand Totals (Lines 6.5 plus 7.4)

| DIRECT CLAIMS AND BENEFITS PAID | | | | | | |
|---|--|-----------|--|--|--|-----------|
| 9. Death benefits | | 1,174,399 | | | | 1,174,399 |
| 10. Matured endowments | | | | | | |
| 11. Annuity benefits | | 14,765 | | | | 14,765 |
| 12. Surrender values and withdrawals for life contracts | | 1,854,826 | | | | 1,854,826 |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid | | | | | | |
| 14. All other benefits, except accident and health | | | | | | |
| 15. Totals | | 3,043,990 | | | | 3,043,990 |

DETAILS OF WRITE-INS

| | | | | | | |
|---|--|--|--|--|--|--|
| 1301. | | | | | | |
| 1302. | | | | | | |
| 1303. | | | | | | |
| 1398. Summary of remaining write-ins for Line 13 from overflow page | | | | | | |
| 1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above) | | | | | | |

| 1 DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary | | Credit Life (Group and Individual) | | Group | | Industrial | | Total | |
|--|-------------|-------------|--|-------------|-----------------------------|-------------|-------------|-------------|-------------|--------------|
| | 1 Number | 2 Amount | 3 No. of Ind.Pols & Group Certifs. | 4 Amount | 5 No. of Certificates | 6 Amount | 7 Number | 8 Amount | 9 Number | 10 Amount |
| 16. Unpaid December 31, prior year | | | | | | | | | | |
| 17. Incurred during current year | 42 | 1,174,399 | | | | | | | 42 | 1,174,399 |
| Settled during current year: | | | | | | | | | | |
| 18.1 By payment in full | 42 | 1,174,399 | | | | | | | 42 | 1,174,399 |
| 18.2 By payment on compromised claims | | | | | | | | | | |
| 18.3 Totals paid | 42 | 1,174,399 | | | | | | | 42 | 1,174,399 |
| 18.4 Reduction by compromise | | | | | | | | | | |
| 18.5 Amount rejected | | | | | | | | | | |
| 18.6 Total settlements | 42 | 1,174,399 | | | | | | | 42 | 1,174,399 |
| 19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6) | | | | | | | | | | |
| POLICY EXHIBIT | | | | | | | | | | |
| 20. In force December 31, prior year | 2,533 | 111,371,005 | | (a) | | | | | 2,533 | 111,371,005 |
| 21. Issued during year | | | | | | | | | | |
| 22. Other changes to in force (Net) | (195) | (9,854,693) | | | | | | | (195) | (9,854,693) |
| 23. In force December 31 of current year | 2,338 | 101,516,312 | | (a) | | | | | 2,338 | 101,516,312 |

(a) Includes Individual Credit Life Insurance prior year \$.....0, current year \$.....0.

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0, current year \$.....0.

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.....0, current year \$.....0.

ACCIDENT AND HEALTH INSURANCE

| | 1 Direct Premiums | 2 Direct Premiums Earned | 3 Dividends Paid Or Credited On Direct Business | 4 Direct Losses Paid | 5 Direct Losses Incurred |
|---|----------------------|-----------------------------|--|----------------------------|--------------------------------|
| 24. Group Policies (b) | | | | | |
| 24.1 Federal Employees Health Benefits Plan 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) | | 1,517 | | | |
| 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) | | 1,517 | | | |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) | | 1,517 | | | |

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0, and number of persons insured under indemnity only products0.

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

INTEREST MAINTENANCE RESERVE

| | 1 Amount |
|---|-------------|
| 1. Reserve as of December 31, Prior Year | 152,009 |
| 2. Current Year's Realized Pre-Tax capital gains/(losses) of \$.....0 Transferred into the Reserve Net of Taxes of \$.....0 | |
| 3. Adjustment for current year's liability gains/(losses) released from the reserve | |
| 4. Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3) | 152,009 |
| 5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4) | 18,573 |
| 6. Reserve as of December 31, current year (Line 4 minus Line 5) | 133,436 |

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 (Columns 1 + 2 + 3) |
|---------------------------------|--|--|--|---|
| 1. 2013 | 18,573 | | | 18,573 |
| 2. 2014 | 19,624 | | | 19,624 |
| 3. 2015 | 11,788 | | | 11,788 |
| 4. 2016 | 11,525 | | | 11,525 |
| 5. 2017 | 10,023 | | | 10,023 |
| 6. 2018 | 10,612 | | | 10,612 |
| 7. 2019 | 11,980 | | | 11,980 |
| 8. 2020 | 12,703 | | | 12,703 |
| 9. 2021 | 10,019 | | | 10,019 |
| 10. 2022 | 8,182 | | | 8,182 |
| 11. 2023 | 6,311 | | | 6,311 |
| 12. 2024 | 4,817 | | | 4,817 |
| 13. 2025 | 3,946 | | | 3,946 |
| 14. 2026 | 2,799 | | | 2,799 |
| 15. 2027 | 1,890 | | | 1,890 |
| 16. 2028 | 1,666 | | | 1,666 |
| 17. 2029 | 1,457 | | | 1,457 |
| 18. 2030 | 1,229 | | | 1,229 |
| 19. 2031 | 1,001 | | | 1,001 |
| 20. 2032 | 794 | | | 794 |
| 21. 2033 | 587 | | | 587 |
| 22. 2034 | 362 | | | 362 |
| 23. 2035 | 121 | | | 121 |
| 24. 2036 | | | | |
| 25. 2037 | | | | |
| 26. 2038 | | | | |
| 27. 2039 | | | | |
| 28. 2040 | | | | |
| 29. 2041 | | | | |
| 30. 2042 | | | | |
| 31. 2043 and later | | | | |
| 32. TOTAL (Lines 1 to 31) | 152,009 | | | 152,009 |

ASSET VALUATION RESERVE

| | Default Component | | | Equity Component | | | 7 |
|---|--------------------------------------|------------------------|-------------------------------|----------------------|--|-------------------------------|----------|
| | 1 Other than Mortgage Loans | 2 Mortgage Loans | 3 Total (Columns 1 + 2) | 4 Common Stock | 5 Real Estate and Other Invested Assets | 6 Total (Columns 4 + 5) | |
| 1. Reserve as of December 31, prior year | 19,485 | | 19,485 | 756 | | 756 | 20,240 |
| 2. Realized Capital Gains/(Losses) Net of Taxes - General Account | | | | | | | |
| 3. Realized Capital Gains/(Losses) Net of Taxes - Separate Accounts | | | | | | | |
| 4. Unrealized Capital Gains/(Losses) Net of Deferred Taxes - General Account | | | | | | | |
| 5. Unrealized Capital Gains/(Losses) Net of Deferred Taxes - Separate Accounts | | | | | | | |
| 6. Capital gains credited/(losses charged) to contract benefits, payments or reserves | | | | | | | |
| 7. Basic Contribution | 233 | | 233 | | | | 233 |
| 8. Accumulated Balances (Lines 1 through 5 minus 6 plus 7) | 19,718 | | 19,718 | 756 | | 756 | 20,473 |
| 9. Maximum Reserve | 1,750 | | 1,750 | 60,472 | | 60,472 | 62,222 |
| 10. Reserve Objective | 1,342 | | 1,342 | 60,472 | | 60,472 | 61,814 |
| 11. 20% of (Line 10 - Line 8) | (3,675) | | (3,675) | 11,943 | | 11,943 | 8,268 |
| 12. Balance Before Transfers (Lines 8 + 11) | 16,043 | | 16,043 | 12,699 | | 12,699 | 28,742 |
| 13. Transfers | | | | | | | X X X |
| 14. Voluntary Contribution | | | | | | | |
| 15. Adjustment down to Maximum/up to Zero | (14,293) | | (14,293) | | | | (14,293) |
| 16. Reserve as of December 31, Current Year (Lines 12 + 13 + 14 + 15) | 1,750 | | 1,750 | 12,699 | | 12,699 | 14,449 |

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 (Columns 1 + 2 + 3) | Basic Contribution | | Reserve Objective | | Maximum Reserve | |
|-------------------------|------------------|---|-----------------------------------|--|-----------------------------------|---|--------------------|-----------------------------|-------------------|-----------------------------|-----------------|------------------------------|
| | | | | | | | 5 Factor | 6 Amount (Columns 4 x 5) | 7 Factor | 8 Amount (Columns 4 x 7) | 9 Factor | 10 Amount (Columns 4 x 9) |
| LONG-TERM BONDS | | | | | | | | | | | | |
| 1. | | Exempt Obligations | 3,494,301 | XXX | XXX | 3,494,301 | 0.0000 | | 0.0000 | | 0.0000 | |
| 2. | 1 | Highest Quality | | XXX | XXX | | 0.0004 | | 0.0023 | | 0.0030 | |
| 3. | 2 | High Quality | | XXX | XXX | | 0.0019 | | 0.0058 | | 0.0090 | |
| 4. | 3 | Medium Quality | | XXX | XXX | | 0.0093 | | 0.0230 | | 0.0340 | |
| 5. | 4 | Low Quality | | XXX | XXX | | 0.0213 | | 0.0530 | | 0.0750 | |
| 6. | 5 | Lower Quality | | XXX | XXX | | 0.0432 | | 0.1100 | | 0.1700 | |
| 7. | 6 | In or Near Default | | XXX | XXX | | 0.0000 | | 0.2000 | | 0.2000 | |
| 8. | | TOTAL Unrated Multi-class Securities Acquired by Conversion | | XXX | XXX | | XXX | | XXX | | XXX | |
| 9. | | TOTAL Bonds (sum of Lines 1 through 8) | 3,494,301 | XXX | XXX | 3,494,301 | XXX | | XXX | | XXX | |
| PREFERRED STOCKS | | | | | | | | | | | | |
| 10. | 1 | Highest Quality | | XXX | XXX | | 0.0004 | | 0.0023 | | 0.0030 | |
| 11. | 2 | High Quality | | XXX | XXX | | 0.0019 | | 0.0058 | | 0.0090 | |
| 12. | 3 | Medium Quality | | XXX | XXX | | 0.0093 | | 0.0230 | | 0.0340 | |
| 13. | 4 | Low Quality | | XXX | XXX | | 0.0213 | | 0.0530 | | 0.0750 | |
| 14. | 5 | Lower Quality | | XXX | XXX | | 0.0432 | | 0.1100 | | 0.1700 | |
| 15. | 6 | In or Near Default | | XXX | XXX | | 0.0000 | | 0.2000 | | 0.2000 | |
| 16. | | Affiliated Life with AVR | | XXX | XXX | | 0.0000 | | 0.0000 | | 0.0000 | |
| 17. | | TOTAL Preferred Stocks (sum of Lines 10 through 16) | | XXX | XXX | | XXX | | XXX | | XXX | |
| SHORT-TERM BONDS | | | | | | | | | | | | |
| 18. | | Exempt Obligations | 440,294 | XXX | XXX | 440,294 | 0.0000 | | 0.0000 | | 0.0000 | |
| 19. | 1 | Highest Quality | 583,369 | XXX | XXX | 583,369 | 0.0004 | 233 | 0.0023 | 1,342 | 0.0030 | |
| 20. | 2 | High Quality | | XXX | XXX | | 0.0019 | | 0.0058 | | 0.0090 | |
| 21. | 3 | Medium Quality | | XXX | XXX | | 0.0093 | | 0.0230 | | 0.0340 | |
| 22. | 4 | Low Quality | | XXX | XXX | | 0.0213 | | 0.0530 | | 0.0750 | |
| 23. | 5 | Lower Quality | | XXX | XXX | | 0.0432 | | 0.1100 | | 0.1700 | |
| 24. | 6 | In or Near Default | | XXX | XXX | | 0.0000 | | 0.2000 | | 0.2000 | |
| 25. | | TOTAL Short-term Bonds (sum of Lines 18 through 24) | 1,023,663 | XXX | XXX | 1,023,663 | XXX | 233 | XXX | 1,342 | XXX | |

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 (Columns 1 + 2 + 3) | Basic Contribution | | Reserve Objective | | Maximum Reserve | |
|-------------------------------|------------------|---|--------------------------------|---|--------------------------------|--|--------------------|--------------------------|-------------------|--------------------------|-----------------|---------------------------|
| | | | | | | | 5 Factor | 6 Amount (Columns 4 x 5) | 7 Factor | 8 Amount (Columns 4 x 7) | 9 Factor | 10 Amount (Columns 4 x 9) |
| DERIVATIVE INSTRUMENTS | | | | | | | | | | | | |
| 26. | | Exchange Traded | | XXX | XXX | | 0.0004 | | 0.0023 | | 0.0030 | |
| 27. | 1 | Highest Quality | | XXX | XXX | | 0.0004 | | 0.0023 | | 0.0030 | |
| 28. | 2 | High Quality | | XXX | XXX | | 0.0019 | | 0.0058 | | 0.0090 | |
| 29. | 3 | Medium Quality | | XXX | XXX | | 0.0093 | | 0.0230 | | 0.0340 | |
| 30. | 4 | Low Quality | | XXX | XXX | | 0.0213 | | 0.0530 | | 0.0750 | |
| 31. | 5 | Lower Quality | | XXX | XXX | | 0.0432 | | 0.1100 | | 0.1700 | |
| 32. | 6 | In or Near Default | | XXX | XXX | | 0.0000 | | 0.2000 | | 0.2000 | |
| 33. | | TOTAL Derivative Instruments | | XXX | XXX | | XXX | | XXX | | XXX | |
| 34. | | TOTAL (Lines 9 + 17 + 25 + 33) | 4,517,964 | XXX | XXX | 4,517,964 | XXX | 233 | XXX | 1,342 | XXX | |
| MORTGAGE LOANS | | | | | | | | | | | | |
| In Good Standing: | | | | | | | | | | | | |
| 35. | | Farm Mortgages | | | XXX | | 0.0035 | | 0.0100 | | 0.0130 | |
| 36. | | Residential Mortgages - Insured or Guaranteed | | | XXX | | 0.0003 | | 0.0006 | | 0.0010 | |
| 37. | | Residential Mortgages - All Other | | | XXX | | 0.0013 | | 0.0030 | | 0.0040 | |
| 38. | | Commercial Mortgages - Insured or Guaranteed | | | XXX | | 0.0003 | | 0.0006 | | 0.0010 | |
| 39. | | Commercial Mortgages - All Other | | | XXX | | 0.0035 | | 0.0100 | | 0.0130 | |
| 40. | | In Good Standing With Restructured Terms | | | XXX | | 0.0035 | | 0.0100 | | 0.0130 | |
| Overdue, Not in Process: | | | | | | | | | | | | |
| 41. | | Farm Mortgages | | | XXX | | 0.0420 | | 0.0760 | | 0.1200 | |
| 42. | | Residential Mortgages - Insured or Guaranteed | | | XXX | | 0.0005 | | 0.0012 | | 0.0020 | |
| 43. | | Residential Mortgages - All Other | | | XXX | | 0.0025 | | 0.0058 | | 0.0090 | |
| 44. | | Commercial Mortgages - Insured or Guaranteed | | | XXX | | 0.0005 | | 0.0012 | | 0.0020 | |
| 45. | | Commercial Mortgages - All Other | | | XXX | | 0.0420 | | 0.0760 | | 0.1200 | |
| In Process of Foreclosure: | | | | | | | | | | | | |
| 46. | | Farm Mortgages | | | XXX | | 0.0000 | | 0.1700 | | 0.1700 | |
| 47. | | Residential Mortgages - Insured or Guaranteed | | | XXX | | 0.0000 | | 0.0040 | | 0.0040 | |
| 48. | | Residential Mortgages - All Other | | | XXX | | 0.0000 | | 0.0130 | | 0.0130 | |
| 49. | | Commercial Mortgages - Insured or Guaranteed | | | XXX | | 0.0000 | | 0.0040 | | 0.0040 | |
| 50. | | Commercial Mortgages - All Other | | | XXX | | 0.0000 | | 0.1700 | | 0.1700 | |
| 51. | | TOTAL Schedule B Mortgages (sum of Lines 35 through 50) | | | XXX | | XXX | | XXX | | XXX | |
| 52. | | Schedule DA Mortgages | | | XXX | | 0.0030 | | 0.0100 | | 0.0130 | |
| 53. | | TOTAL Mortgage Loans on Real Estate (Lines 51 + 52) | | | XXX | | XXX | | XXX | | XXX | |

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 (Columns 1 + 2 + 3) | Basic Contribution | | Reserve Objective | | Maximum Reserve | |
|---|------------------|---|-----------------------------------|--|-----------------------------------|--|--------------------|--------------------------------|-------------------|--------------------------------|-----------------|---------------------------------|
| | | | | | | | 5 Factor | 6 Amount (Columns 4 x 5) | 7 Factor | 8 Amount (Columns 4 x 7) | 9 Factor | 10 Amount (Columns 4 x 9) |
| COMMON STOCK | | | | | | | | | | | | |
| 1. | | Unaffiliated Public | 302,360 | XXX | XXX | 302,360 | 0.0000 | | 0.2000 (a) | 60,472 | 0.2000 (a) | 60,472 |
| 2. | | Unaffiliated Private | | XXX | XXX | | 0.0000 | | 0.1600 | | 0.1600 | |
| 3. | | Federal Home Loan Bank | | XXX | XXX | | | | 0.0050 | | 0.0080 | |
| 4. | | Affiliated Life with AVR | | XXX | XXX | | 0.0000 | | 0.0000 | | 0.0000 | |
| 5. | | Affiliated Investment Subsidiary: | | | | | | | | | | |
| 6. | | Fixed Income Exempt Obligations | | | | | XXX | | XXX | | XXX | |
| 7. | | Fixed Income Highest Quality | | | | | XXX | | XXX | | XXX | |
| 8. | | Fixed Income High Quality | | | | | XXX | | XXX | | XXX | |
| 9. | | Fixed Income Medium Quality | | | | | XXX | | XXX | | XXX | |
| 10. | | Fixed Income Low Quality | | | | | XXX | | XXX | | XXX | |
| 11. | | Fixed Income Lower Quality | | | | | XXX | | XXX | | XXX | |
| 12. | | Fixed Income In/Near Default | | | | | XXX | | XXX | | XXX | |
| 13. | | Unaffiliated Common Stock Public | | | | | | | (a) | | | (a) |
| 14. | | Unaffiliated Common Stock Private | | | | | | 0.1600 | | 0.1600 | | |
| 15. | | Mortgage Loans | | | | | 0.0030 | | 0.0100 | | 0.0130 | |
| 16. | | Real Estate | | | | | (b) | | (b) | | | (b) |
| 17. | | Affiliated-Certain Other (See SVO Purposes and Procedures Manual) | | XXX | XXX | | | | 0.1300 | | 0.1300 | |
| 18. | | Affiliated-All Other | | XXX | XXX | | | | 0.1600 | | 0.1600 | |
| | | TOTAL Common Stock (sum of Lines 1 through 17) | 302,360 | | | 302,360 | XXX | | XXX | 60,472 | XXX | 60,472 |
| REAL ESTATE | | | | | | | | | | | | |
| 19. | | Home Office Property (General Account Only) | | | | | | | 0.0750 | | 0.0750 | |
| 20. | | Investment Properties | | | | | | | 0.0750 | | 0.0750 | |
| 21. | | Properties Acquired in Satisfaction of Debt | | | | | | | 0.1100 | | 0.1100 | |
| 22. | | TOTAL Real Estate (sum of Lines 19 through 21) | | | | | XXX | | XXX | | XXX | |
| OTHER INVESTED ASSETS | | | | | | | | | | | | |
| INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS | | | | | | | | | | | | |
| 23. | | Exempt Obligations | | XXX | XXX | | 0.0000 | | 0.0000 | | 0.0000 | |
| 24. | | Highest Quality | | XXX | XXX | | 0.0004 | | 0.0023 | | 0.0030 | |
| 25. | | High Quality | | XXX | XXX | | 0.0019 | | 0.0058 | | 0.0090 | |
| 26. | | Medium Quality | | XXX | XXX | | 0.0093 | | 0.0230 | | 0.0340 | |
| 27. | | Low Quality | | XXX | XXX | | 0.0213 | | 0.0530 | | 0.0750 | |
| 28. | | Lower Quality | | XXX | XXX | | 0.0432 | | 0.1100 | | 0.1700 | |
| 29. | | In or Near Default | | XXX | XXX | | | | 0.2000 | | 0.2000 | |
| 30. | | TOTAL with Bond characteristics (sum of Lines 23 through 29) | | XXX | XXX | | XXX | | XXX | | XXX | |

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 (Columns 1 + 2 + 3) | Basic Contribution | | Reserve Objective | | Maximum Reserve | |
|-------------|------------------|---|-----------------------------------|--|-----------------------------------|--|--------------------|--------------------------------|-------------------|--------------------------------|-----------------|---------------------------------|
| | | | | | | | 5 Factor | 6 Amount (Columns 4 x 5) | 7 Factor | 8 Amount (Columns 4 x 7) | 9 Factor | 10 Amount (Columns 4 x 9) |
| 31. | 1 | INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS | | | | | | | | | | |
| | | Highest Quality | | XXX | XXX | | 0.0004 | | 0.0023 | | 0.0030 | |
| | | High Quality | | XXX | XXX | | 0.0019 | | 0.0058 | | 0.0090 | |
| | | Medium Quality | | XXX | XXX | | 0.0093 | | 0.0230 | | 0.0340 | |
| | | Low Quality | | XXX | XXX | | 0.0213 | | 0.0530 | | 0.0750 | |
| | | Lower Quality | | XXX | XXX | | 0.0432 | | 0.1100 | | 0.1700 | |
| | | In or Near Default | | XXX | XXX | | 0.0000 | | 0.2000 | | 0.2000 | |
| | | Affiliated Life with AVR | | XXX | XXX | | 0.0000 | | 0.0000 | | 0.0000 | |
| 38. | | Total with Preferred Stock characteristics (sum of Lines 31 through 37) | | XXX | XXX | | XXX | | XXX | | XXX | |
| | | | | | | | | | | | | |
| 33 | | INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS | | | | | | | | | | |
| | | In Good Standing: | | | | | | | | | | |
| | | Farm Mortgages | | | XXX | | 0.0030 | | 0.0100 | | 0.0130 | |
| | | Residential Mortgages - Insured or Guaranteed | | | XXX | | 0.0003 | | 0.0006 | | 0.0010 | |
| | | Residential Mortgages - All Other | | XXX | XXX | | 0.0013 | | 0.0030 | | 0.0040 | |
| | | Commercial Mortgages - Insured or Guaranteed | | | XXX | | 0.0003 | | 0.0006 | | 0.0010 | |
| | | Commercial Mortgages - All Other | | | XXX | | 0.0030 | | 0.0100 | | 0.0130 | |
| | | In Good Standing With Restructured Terms | | | XXX | | 0.0030 | | 0.0100 | | 0.0130 | |
| | | Overdue, Not in Process: | | | | | | | | | | |
| | | Farm Mortgages | | | XXX | | 0.0420 | | 0.0760 | | 0.1200 | |
| | | Residential Mortgages - Insured or Guaranteed | | | XXX | | 0.0005 | | 0.0012 | | 0.0020 | |
| | | Residential Mortgages - All Other | | | XXX | | 0.0025 | | 0.0058 | | 0.0090 | |
| | | Commercial Mortgages - Insured or Guaranteed | | | XXX | | 0.0005 | | 0.0012 | | 0.0020 | |
| | | Commercial Mortgages - All Other | | | XXX | | 0.0420 | | 0.0760 | | 0.1200 | |
| | | In Process of Foreclosure: | | | | | | | | | | |
| | | Farm Mortgages | | | XXX | | 0.0000 | | 0.1700 | | 0.1700 | |
| | | Residential Mortgages - Insured or Guaranteed | | | XXX | | 0.0000 | | 0.0040 | | 0.0040 | |
| | | Residential Mortgages - All Other | | | XXX | | 0.0000 | | 0.0130 | | 0.0130 | |
| | | Commercial Mortgages - Insured or Guaranteed | | | XXX | | 0.0000 | | 0.0040 | | 0.0040 | |
| | | Commercial Mortgages - All Other | | | XXX | | 0.0000 | | 0.1700 | | 0.1700 | |
| | | Total with Mortgage Loan characteristics (sum of Lines 39 through 54) | | | XXX | | XXX | | XXX | | XXX | |

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 (Columns 1 + 2 + 3) | Basic Contribution | | Reserve Objective | | Maximum Reserve | |
|-------------|------------------|--|-----------------------------------|--|-----------------------------------|--|--------------------|--------------------------------|-------------------|--------------------------------|-----------------|---------------------------------|
| | | | | | | | 5 Factor | 6 Amount (Columns 4 x 5) | 7 Factor | 8 Amount (Columns 4 x 7) | 9 Factor | 10 Amount (Columns 4 x 9) |
| 56. | | INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK | | | | | | | | | | |
| 56. | | Unaffiliated Public | | XXX | XXX | | 0.0000 | | (a) | | (a) | |
| 57. | | Unaffiliated Private | | XXX | XXX | | 0.0000 | | 0.1600 | | 0.1600 | |
| 58. | | Affiliated Life with AVR | | XXX | XXX | | 0.0000 | | | | | |
| 59. | | Affiliated Certain Other (See SVO Purposes and Procedures Manual) | | XXX | XXX | | 0.0000 | | 0.1300 | | 0.1300 | |
| 60. | | Affiliated Other - All Other | | XXX | XXX | | 0.0000 | | 0.1600 | | 0.1600 | |
| 61. | | TOTAL with Common Stock characteristics (sum of Lines 56 through 60) | | XXX | XXX | | XXX | | XXX | | XXX | |
| 62. | | INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE | | | | | | | | | | |
| 62. | | Home Office Property (General Account Only) | | | | | 0.0000 | | 0.0750 | | 0.0750 | |
| 63. | | Investment Properties | | | | | 0.0000 | | 0.0750 | | 0.0750 | |
| 64. | | Properties Acquired in Satisfaction of Debt | | | | | 0.0000 | | 0.1100 | | 0.1100 | |
| 65. | | TOTAL with Real Estate characteristics (Lines 62 through 64) | | | | | XXX | | XXX | | XXX | |
| 66. | | LOW INCOME HOUSING TAX CREDIT INVESTMENTS | | | | | | | | | | |
| 66. | | Guaranteed Federal Low Income Housing Tax Credit | | | | | 0.0003 | | 0.0006 | | 0.0010 | |
| 67. | | Non-guaranteed Federal Low Income Housing Tax Credit | | | | | 0.0063 | | 0.0120 | | 0.0190 | |
| 68. | | Guaranteed State Low Income Housing Tax Credit | | | | | 0.0003 | | 0.0006 | | 0.0010 | |
| 69. | | Non-guaranteed State Low Income Housing Tax Credit | | | | | 0.0063 | | 0.0120 | | 0.0190 | |
| 70. | | All Other Low Income Housing Tax Credit | | | | | 0.0273 | | 0.0600 | | 0.0975 | |
| 71. | | Total LIHTC | | | | | XXX | | XXX | | XXX | |
| 72. | | ALL OTHER INVESTMENTS | | | | | | | | | | |
| 72. | | NAIC 1 Working Capital Finance Investments | | XXX | | | 0.0000 | | 0.0037 | | 0.0037 | |
| 73. | | NAIC 2 Working Capital Finance Investments | | XXX | | | 0.0000 | | 0.0120 | | 0.0120 | |
| 74. | | Other Invested Assets - Schedule BA | | XXX | | | 0.0000 | | 0.1300 | | 0.1300 | |
| 75. | | Other Short-Term Invested Assets - Schedule DA | | XXX | | | 0.0000 | | 0.1300 | | 0.1300 | |
| 76. | | Total All Other (sum of Lines 72, 73, 74 and 75) | | XXX | | | XXX | | XXX | | XXX | |
| 77. | | Total Other Invested Assets - Schedules BA & DA (sum of Lines 30, 38, 55, 61, 65, 71 and 76) | | | | | XXX | | XXX | | XXX | |

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

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

| | | |
|----|--|------|
| 35 | Asset Valuation Reserve - Replications | NONE |
| 36 | Schedule F | NONE |
| 37 | Schedule H Part 1 A & H Exhibit | NONE |
| 38 | Schedule H Parts 2, 3 & 4 - A & H Exh Cont | NONE |
| 39 | Schedule H Part 5 Health Claims | NONE |
| 40 | Schedule S - Part 1 - Section 1 | NONE |
| 41 | Schedule S - Part 1 - Section 2 | NONE |

SCHEDULE S - PART 2**Reinsurance Recoverable on Paid and Unpaid Losses Listed by
Reinsuring Company as of December 31, Current Year**

| 1 NAIC Company Code | 2 ID Number | 3 Effective Date | 4 Name of Company | 5 Domiciliary Jurisdiction | 6 Paid Losses | 7 Unpaid Losses |
|--|-------------------|------------------------|------------------------------|----------------------------------|------------------|--------------------|
| Life and Annuity - Non-Affiliates - U.S. Non-Affiliates | | | | | | |
| 68136 | 63-0169720 | 04/01/1997 | PROTECTIVE LIFE INS CO | TN ..... | ..... | 123,000 |
| 0899999 Subtotal - Life and Annuity - Non-Affiliates - U.S. Non-Affiliates | | | | | | 123,000 |
| 1099999 Total - Life and Annuity - Non-Affiliates | | | | | | 123,000 |
| 1199999 Total - Life and Annuity | | | | | | 123,000 |
| 2299999 Total - Accident and Health ..... |  |  |  |  |  | ..... |
| 2399999 Total U.S. (Sum of 0399999, 0899999, 1499999 and 1999999) | | | | | | 123,000 |
| 9999999 Total (Sum of 1199999 and 2299999) | | | | | | 123,000 |

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 ID Number | 3 Effective Date | 4 Name of Company | 5 Domiciliary Jurisdiction | 6 Type of Reinsurance 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 | | | | | | | | | | | | | |
| 68136 | 63-0169720 | 04/01/1997 | PROTECTIVE LIFE INS CO | TN | CO/I | 101,516,312 | 21,823,523 | 22,680,491 | 1,173,232 | | | | |
| 0899999 | Subtotal - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates | | | | | 101,516,312 | 21,823,523 | 22,680,491 | 1,173,232 | | | | |
| 1099999 | Total - General Account - Authorized - Non-Affiliates | | | | | 101,516,312 | 21,823,523 | 22,680,491 | 1,173,232 | | | | |
| 1199999 | Total - General Account - Authorized | | | | | 101,516,312 | 21,823,523 | 22,680,491 | 1,173,232 | | | | |
| 3499999 | Total - General Account - Authorized, Unauthorized and Certified | | | | | 101,516,312 | 21,823,523 | 22,680,491 | 1,173,232 | | | | |
| 5699999 | Total - Separate Accounts - Unauthorized | | | | | | | | | | | | |
| 6699999 | Total - Separate Accounts - Certified - Non-Affiliates | | | | | | | | | | | | |
| 6799999 | Total - Separate Accounts - Certified | | | | | | | | | | | | |
| 6899999 | Total - Separate Accounts - Authorized, Unauthorized and Certified | | | | | | | | | | | | |
| 6999999 | Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3799999, 4299999, 4899999, 5399999, 5999999 and 6499999) | | | | | 101,516,312 | 21,823,523 | 22,680,491 | 1,173,232 | | | | |
| 9999999 | Total (Sum of 3499999 and 6899999) | | | | | 101,516,312 | 21,823,523 | 22,680,491 | 1,173,232 | | | | |

SCHEDULE S - PART 3 - SECTION 2

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

| 1 NAIC Company Code | 2 ID Number | 3 Effective Date | 4 Name of Company | 5 Domiciliary Jurisdiction | 6 Type | 7 Premiums | 8 Unearned Premiums (Estimated) | 9 Reserve Credit Taken Other than for Unearned Premiums | Outstanding Surplus Relief | | 12 Modified Coinsurance Reserve | 13 Funds Withheld Under Coinsurance |
|---|-------------------|------------------------|------------------------|----------------------------------|-----------|---------------|--|--|----------------------------|----|--|---|
| | | | | | | | | | 10 | 11 | | |
| General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates | | | | | | | | | | | | |
| 68136 | 63-0169720 | 04/01/1997 | PROTECTIVE LIFE INS CO | TN | CO/I | 1,517 | | | | | | |
| 0899999 Subtotal - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates | | | | | | 1,517 | | | | | | |
| 1099999 Total - General Account - Authorized - Non-Affiliates | | | | | | 1,517 | | | | | | |
| 1199999 Total - General Account Authorized | | | | | | 1,517 | | | | | | |
| 3499999 Total - General Account - Authorized, Unauthorized and Certified | | | | | | 1,517 | | | | | | |
| 5699999 Total - Separate Accounts - Unauthorized | | | | | | | | | | | | |
| 6699999 Total - Separate Accounts - Certified - Non-Affiliates | | | | | | | | | | | | |
| 6799999 Total - Separate Accounts - Certified | | | | | | | | | | | | |
| 6899999 Total - Separate Accounts - Authorized, Unauthorized and Certified | | | | | | | | | | | | |
| 6999999 Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599993, 3099999, 3799999, 4299999, 4899999, 5399999, 5999999 and 6499999) | | | | | | 1,517 | | | | | | |
| 9999999 Total (Sum of 3499999 and 6899999) | | | | | | 1,517 | | | | | | |

45 Schedule S - Part 4 **NONE**

46 Schedule S - Part 5 **NONE**

SCHEDULE S - PART 6**Five-Year Exhibit of Reinsurance Ceded Business****(000 Omitted)**

| | 1 2013 | 2 2012 | 3 2011 | 4 2010 | 5 2009 |
|--|-----------|-----------|-----------|-----------|-----------|
| A. OPERATIONS ITEMS: | | | | | |
| 1. Premiums and annuity considerations for life and accident and health contracts | 1,175 | 1,366 | 1,054 | 1,110 | 1,171 |
| 2. Commissions and reinsurance expense allowances | | | | | |
| 3. Contract claims | 1,215 | 147 | (31) | 143 | 235 |
| 4. Surrender benefits and withdrawals for life contracts | | | | | |
| 5. Dividends to policyholders | | | | | |
| 6. Reserve adjustments on reinsurance ceded | | | | | |
| 7. Increase in aggregate reserves for life and accident and health contracts | (567) | (924) | (1,253) | (825) | (1,880) |
| B. BALANCE SHEETS ITEMS | | | | | |
| 8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected | | | | | |
| 9. Aggregate reserves for life and accident and health contracts | 21,592 | 22,680 | 23,604 | 24,857 | 25,682 |
| 10. Liability for deposit-type contracts | | | | | |
| 11. Contract claims unpaid | 188 | 147 | 135 | 166 | 23 |
| 12. Amounts recoverable on reinsurance | | | | | |
| 13. Experience rating refunds due or unpaid | | | | | |
| 14. Policyholders' dividends (not included in Line 10) | | | | | |
| 15. Commissions and reinsurance expense allowances due | | | | | |
| 16. Unauthorized reinsurance offset | | | | | |
| 17. Offset for reinsurance with Certified Reinsurers | | | XXX | XXX | XXX |
| C. UNAUTHORIZED REINSURANCE | | | | | |
| (Deposits By and Funds Withheld From) | | | | | |
| 18. Funds deposited by and withheld from (F) | | | | | |
| 19. Letters of credit (L) | | | | | |
| 20. Trust agreements (T) | | | | | |
| 21. Other (O) | | | | | |
| D. REINSURANCE WITH CERTIFIED REINSURERS | | | | | |
| (Deposits By and Funds Withheld From) | | | | | |
| 22. Multiple Beneficiary Trust | | | XXX | XXX | XXX |
| 23. Funds deposited by and withheld from (F) | | | XXX | XXX | XXX |
| 24. Letters of credit (L) | | | XXX | XXX | XXX |
| 25. Trust agreements (T) | | | XXX | XXX | XXX |
| 26. Other (O) | | | 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, Column 3) | | | |
| 1. Cash and invested assets (Line 12) | 8,908,611 | ..... | 8,908,611 |
| 2. Reinsurance (Line 16) ..... | ..... | ..... | ..... |
| 3. Premiums and considerations (Line 15) ..... | ..... | ..... | ..... |
| 4. Net credit for ceded reinsurance | X X X ..... | ..... | ..... |
| 5. All other admitted assets (balance) | 300,579 | ..... | 300,579 |
| 6. TOTAL assets excluding Separate Accounts (Line 26) | 9,209,190 | ..... | 9,209,190 |
| 7. Separate Account assets (Line 27) ..... | ..... | ..... | ..... |
| 8. TOTAL assets (Line 28) | 9,209,190 | ..... | 9,209,190 |
| LIABILITIES, CAPITAL AND SURPLUS (Page 3) | | | |
| 9. Contract reserves (Lines 1 and 2) | 0 | ..... | 0 |
| 10. Liability for deposit-type contracts (Line 3) ..... | ..... | ..... | ..... |
| 11. Claim reserves (Line 4) | 0 | ..... | 0 |
| 12. Policyholder dividends/reserves (Lines 5 through 7) ..... | ..... | ..... | ..... |
| 13. Premium & annuity considerations received in advance (Line 8) ..... | ..... | ..... | ..... |
| 14. Other contract liabilities (Line 9) | 133,436 | ..... | 133,436 |
| 15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount) ..... | ..... | ..... | ..... |
| 16. Funds held under reinsurance with unauthorized reinsurers (Line 24.03 minus inset amount) ..... | ..... | ..... | ..... |
| 17. Reinsurance with Certified Reinsurers (Line 24.02 inset amount) ..... | ..... | ..... | ..... |
| 18. Funds held under reinsurance treaties with Certified Reinsurers (Line 24.03 inset amount) ..... | ..... | ..... | ..... |
| 19. All other liabilities (balance) | 183,866 | ..... | 183,866 |
| 20. TOTAL Liabilities excluding Separate Accounts (Line 26) | 317,302 | ..... | 317,302 |
| 21. Separate Account liabilities (Line 27) ..... | ..... | ..... | ..... |
| 22. TOTAL liabilities (Line 28) | 317,302 | ..... | 317,302 |
| 23. Capital & surplus (Line 38) | 8,891,888 | X X X | 8,891,888 |
| 24. TOTAL liabilities, capital and surplus (Line 39) | 9,209,190 | ..... | 9,209,190 |
| NET CREDIT FOR CEDED REINSURANCE | | | |
| 25. Contract reserves ..... | ..... | ..... | ..... |
| 26. Claim reserves ..... | ..... | ..... | ..... |
| 27. Policyholder dividends/reserves ..... | ..... | ..... | ..... |
| 28. Premium & annuity considerations received in advance ..... | ..... | ..... | ..... |
| 29. Liability for deposit-type contracts ..... | ..... | ..... | ..... |
| 30. Other contract liabilities ..... | ..... | ..... | ..... |
| 31. Reinsurance ceded assets ..... | ..... | ..... | ..... |
| 32. Other ceded reinsurance recoverables ..... | ..... | ..... | ..... |
| 33. TOTAL ceded reinsurance recoverables ..... | ..... | ..... | ..... |
| 34. Premiums and considerations ..... | ..... | ..... | ..... |
| 35. Reinsurance in unauthorized companies ..... | ..... | ..... | ..... |
| 36. Funds held under reinsurance treaties with unauthorized reinsurers ..... | ..... | ..... | ..... |
| 37. Reinsurance with Certified Reinsurers ..... | ..... | ..... | ..... |
| 38. Funds held under reinsurance treaties with certified reinsurers ..... | ..... | ..... | ..... |
| 39. Other ceded reinsurance payables/offsets ..... | ..... | ..... | ..... |
| 40. TOTAL ceded reinsurance payable/offsets ..... | ..... | ..... | ..... |
| 41. TOTAL net credit for ceded reinsurance ..... | ..... | ..... | ..... |

SCHEDULE T - PART 2
INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN
ALLOCATED BY STATES AND TERRITORIES

| States, Etc. | 1 Life (Group and Individual) | Direct Business only | | | | | 6 Totals |
|---|--|---|--|---|--------------------------------|--|-------------|
| | | 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) | 5,543 | | | | | | 5,543 |
| 2. Alaska (AK) | | | | | | | |
| 3. Arizona (AZ) | 31,105 | 25,000 | | | | | 56,105 |
| 4. Arkansas (AR) | 3,273 | | | | | | 3,273 |
| 5. California (CA) | 151,899 | 1,040 | | | | | 152,939 |
| 6. Colorado (CO) | 34,323 | | | | | | 34,323 |
| 7. Connecticut (CT) | 5,531 | | | | | | 5,531 |
| 8. Delaware (DE) | 600 | | | | | | 600 |
| 9. District of Columbia (DC) | | | | | | | |
| 10. Florida (FL) | 38,851 | 1,010 | | | | | 39,861 |
| 11. Georgia (GA) | 13,855 | | | | | | 13,855 |
| 12. Hawaii (HI) | 2,047 | | | | | | 2,047 |
| 13. Idaho (ID) | 2,415 | | | | | | 2,415 |
| 14. Illinois (IL) | 12,889 | | | | | | 12,889 |
| 15. Indiana (IN) | 20,478 | | | | | | 20,478 |
| 16. Iowa (IA) | 5,723 | | | | | | 5,723 |
| 17. Kansas (KS) | 3,795 | | | | | | 3,795 |
| 18. Kentucky (KY) | 52,505 | 275 | | | | | 52,780 |
| 19. Louisiana (LA) | 14,316 | | | | | | 14,316 |
| 20. Maine (ME) | 65 | | | | | | 65 |
| 21. Maryland (MD) | 1,630 | | | | | | 1,630 |
| 22. Massachusetts (MA) | 477 | | | | | | 477 |
| 23. Michigan (MI) | 22,538 | | | | | | 22,538 |
| 24. Minnesota (MN) | 1,899 | 200,000 | | | | | 201,899 |
| 25. Mississippi (MS) | 6,687 | | | | | | 6,687 |
| 26. Missouri (MO) | 1,738 | | | | | | 1,738 |
| 27. Montana (MT) | | | | | | | |
| 28. Nebraska (NE) | 1,443 | | | | | | 1,443 |
| 29. Nevada (NV) | 5,117 | | | | | | 5,117 |
| 30. New Hampshire (NH) | 524 | | | | | | 524 |
| 31. New Jersey (NJ) | 415 | | | | | | 415 |
| 32. New Mexico (NM) | 2,019 | | | | | | 2,019 |
| 33. New York (NY) | 143 | | | | | | 143 |
| 34. North Carolina (NC) | 23,239 | 5,900 | | | | | 29,139 |
| 35. North Dakota (ND) | 394 | | | | | | 394 |
| 36. Ohio (OH) | 351,111 | 19,526 | | | | | 370,637 |
| 37. Oklahoma (OK) | 1,562 | | | | | | 1,562 |
| 38. Oregon (OR) | 1,009 | | | | | | 1,009 |
| 39. Pennsylvania (PA) | 2,600 | | | | | | 2,600 |
| 40. Rhode Island (RI) | | | | | | | |
| 41. South Carolina (SC) | 8,907 | | | | | | 8,907 |
| 42. South Dakota (SD) | 746 | | | | | | 746 |
| 43. Tennessee (TN) | 8,625 | | | | | | 8,625 |
| 44. Texas (TX) | 35,394 | 700 | | | | | 36,094 |
| 45. Utah (UT) | 1,740 | | | | | | 1,740 |
| 46. Vermont (VT) | | | | | | | |
| 47. Virginia (VA) | 26,692 | 312 | | | | | 27,004 |
| 48. Washington (WA) | 4,745 | | | | | | 4,745 |
| 49. West Virginia (WV) | 3,374 | | | | | | 3,374 |
| 50. Wisconsin (WI) | 5,487 | | | | | | 5,487 |
| 51. Wyoming (WY) | | | | | | | |
| 52. American Samoa (AS) | | | | | | | |
| 53. Guam (GU) | | | | | | | |
| 54. Puerto Rico (PR) | | | | | | | |
| 55. U.S. Virgin Islands (VI) | | | | | | | |
| 56. Northern Mariana Islands (MP) | | | | | | | |
| 57. Canada (CAN) | | | | | | | |
| 58. Aggregate other alien (OT) | | | | | | | |
| 59. TOTALS | 919,469 | 253,763 | | | | | 1,173,232 |

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 Comp- any Code | Federal ID Number | FEDERAL RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Name of Parent, Subsidiaries or Affiliates | Domic- iliary Loca- tion | Rela- tion- ship to Report- ing 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) | * |
| 4771 | 52 | 00000 | 98-0167449 | | 0001363851 | Nasdaq, Tsx | Catamaran Corporation | CA | UIP | Catamaran Corporation | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 75-2578509 | | | | Catamaran Inc. | TX | UIP | Catamaran Corporation | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 11-2581812 | | | | Catamaran PBM of Illinois, Inc. | DE | NIA | Catamaran Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 11-3647935 | | | | NMHCRX Mail Order, Inc. | DE | NIA | Catamaran PBM of Illinois, Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 20-2719823 | | | | SaveDirectRx, Inc. | TX | NIA | NMHCRX Mail Order, Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 01-0516051 | | | | BriovaRx of Maine, Inc. | ME | NIA | Catamaran PBM of Illinois, Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 55-0824381 | | | | BriovaRx, LLC | AL | NIA | BriovaRx of Maine, Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 26-3878957 | | | | AssuranceRx, LLC | AL | NIA | BriovaRx of Maine, Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 27-1930321 | | | | BriovaRx of Georgia, LLC | AL | NIA | BriovaRx, LLC | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 73-1730988 | | | | Bayou State Pharmacy, LLC | LA | NIA | BriovaRx, LLC | Ownership | 100.0 | Catamaran Corporation | |
| | | 12630 | 74-3166208 | | | | Catamaran Insurance of Delaware, Inc. | DE | IA | Catamaran PBM of Illinois, Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 01-0487320 | | | | Portland Professional Pharmacy | ME | NIA | Catamaran PBM of Illinois, Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 20-2447772 | | | | PCN DE Corp. | DE | NIA | Catamaran PBM of Illinois, Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 68-0044962 | | | | Pharmaceutical Care Network | CA | NIA | PCN DE Corp. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 14-1799106 | | | | Catamaran IPA, Inc. | NY | NIA | Catamaran PBM of Illinois, Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 27-2348504 | | | | BriovaRx of Hawaii, LLC | HI | NIA | Catamaran PBM of Illinois, Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 27-3331130 | | | | BriovaRx of Massachusetts, LLC | MA | NIA | Catamaran PBM of Illinois, Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 45-2532834 | | | | BriovaRx of Nevada, LLC | NV | NIA | Catamaran PBM of Illinois, Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 20-3233533 | | | | Catamaran PBM of Texas, Inc. | TX | NIA | Catamaran PBM of Illinois, Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 31-1728846 | | | | Catamaran PBM of Colorado, LLC | DE | NIA | Catamaran PBM of Illinois, Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 20-4467352 | | | | HT Three, LLC | CO | NIA | Catamaran PBM of Colorado, LLC | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 45-3304915 | | | | Catamaran Access, LLC | CO | NIA | Catamaran PBM of Colorado, LLC | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 61-1651797 | | | | Catamaran PBM of Massachusetts, Inc. | CO | NIA | Catamaran PBM of Illinois, Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 90-0434375 | | | | SXC Comet LLC | DE | NIA | Catamaran Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 01-0930154 | | | | SXC Acquisition Corp. | DE | NIA | Catamaran Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 46-0666840 | | | | Catamaran TPA, LLC | DE | NIA | Catamaran Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 75-3229286 | | | | IRX Financing I LLC | DE | UIP | Catamaran Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 20-0212381 | | | | Catamaran Health Solutions, LLC | NY | NIA | Catamaran Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 26-0543382 | | | | Catamaran IPA II, Inc. | DE | NIA | Catamaran Health Solutions, LLC | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 88-0482274 | | | | Catamaran Hospice Services, LLC | AL | NIA | Catamaran Hospice Services, LLC | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 88-0373347 | | | | Catamaran Senior Services, LLC | NY | NIA | Catamaran Hospice Services, LLC | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 88-0361447 | | | | InPharmative, Inc. | DE | UIP | Catamaran Health Solutions, LLC | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 27-4130133 | | | | Catalyst Consultants | NV | NIA | Catamaran Health Solutions, LLC | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | | | | | Catamaran PBM of Maryland, Inc. | NV | UDP | Catamaran Health Solutions, LLC | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | | | | | HealthExtras, LLC | DE | NIA | Catamaran PBM of Maryland, Inc. | Ownership | 100.0 | Catamaran Corporation | |

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) | * |
| 52.1 | 4771 | 00000 | 36-4049815 | | | Catamaran PBM of Illinois II, Inc. | | IL | NIA | Catamaran PBM of Maryland, Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 20-0218027 | | | Catamaran IPA III, Inc. | | NY | NIA | Catamaran PBM of Illinois II, Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 26-3633484 | | | Catamaran Rebate Management, Inc. | | NV | NIA | Catamaran PBM of Maryland, Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 61-1485410 | | | Catamaran PD of Maryland, Inc. | | NV | NIA | Catamaran PBM of Maryland, Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 26-1424534 | | | Catamaran PBM of Puerto Rico, LLC | | NV | NIA | Catamaran PBM of Maryland, Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 26-1438879 | | | Catamaran PD of Puerto Rico, LLC | | NV | NIA | Catamaran PBM of Maryland, Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 27-4131015 | | | Catalyst Plan Services, Inc. | | MI | NIA | Catamaran PBM of Maryland, Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 69647 | 31-0628424 | | | Catamaran Insurance of Ohio, Inc. | | OH | UDP | Catamaran PBM of Maryland, Inc. | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 27-3419292 | | | Catamaran of Pennsylvania, LLC | | DE | NIA | Catamaran Health Solutions, LLC | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 03-0592263 | | | Catamaran PBM of Pennsylvania, LLC | | PA | NIA | Catamaran of Pennsylvania, LLC | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 16-1767416 | | | Catamaran PD of Pennsylvania, LLC | | PA | NIA | Catamaran of Pennsylvania, LLC | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 27-1193028 | | | Coalition for Advanced Pharmacy Services, LLC | | DE | NIA | Catamaran Health Solutions, LLC | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 26-4106571 | | | First Rx Specialty & Mail Services, LLC | | DE | NIA | Catamaran Health Solutions, LLC | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 34-1472211 | | | Immediate Pharmaceutical Services, Inc. | | OH | NIA | First Rx Specialty & Mail Services, LLC | Ownership | 100.0 | Catamaran Corporation | |
| | | 00000 | 27-4241298 | | | Catamaran Mail, LLC | | DE | NIA | Catamaran Health Solutions, LLC | Ownership | 100.0 | Catamaran Corporation | |

| Asterisk | Explanation |
|----------|-------------|
| 0000001 | |

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/(Disburse- ments) 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) |
| 9999999 Control Totals | | | | | | | | | | XXX | | |

Schedule Y Part 2 Explanation:

SUPPLEMENTAL EXHIBITS AND SCHEDULES

INTERROGATORIES

Response

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

| | |
|--|-----|
| 1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1? | Yes |
| 2. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1? | Yes |
| 3. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1? | Yes |
| 4. Will an Actuarial opinion be filed 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 it is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING

| | |
|---|-----|
| 12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? | No |
| 13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1? | No |
| 14. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1? | No |
| 15. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1? | No |
| 16. Will the actuarial opinion on non-guaranteed elements as required in Interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1? | Yes |
| 17. Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1? | No |
| 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? | No |
| 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 |
| 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 Certification 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? | No |
| 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? | No |
| 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 electronically with the NAIC by March 1? | No |

APRIL FILING

| | |
|--|----|
| 40. Will the Long-Term Care Experience Reporting Forms be file 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? | No |
| 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? | No |
| 44. Will the Analysis of Annuity Operations by Line of Business be filed with the state of domicile and the NAIC by April 1? | No |
| 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? | No |
| 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 Expense Allocation Report be filed with the state of domicile and the NAIC by April 1? | No |

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE **Catamaran Insurance of Ohio**
AUGUST FILING

48. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?

No

Explanations:

Bar Codes:

Schedule SIS



6964720134200000 2013 Document Code: 420

Medicare Supplement Insurance Experience Exhibit



6964720133600000 2013 Document Code: 360

Trusted Surplus Statement



6964720134900000 2013 Document Code: 490

Actuarial Opinion on Participating and Non-Participating Policies



6964720133710000 2013 Document Code: 371

Actuarial Opinion on X-Factors



6964720134420000 2013 Document Code: 442

Separate Accounts Funding Guaranteed Minimum Benefits Actuarial Opinion



6964720134430000 2013 Document Code: 443

Synthetic Guaranteed Investment Contracts Actuarial Opinion



6964720134400000 2013 Document Code: 444

Reasonableness 1 - Assumptions



6964720134450000 2013 Document Code: 445

Reasonableness 2 - Consistency



6964720134460000 2013 Document Code: 446

Reasonableness 3 - Implied Guarantee



6964720134470000 2013 Document Code: 447

Reasonableness 4 - Ave. Market Value



6964720134480000 2013 Document Code: 448

Reasonableness 5 - Market Value



6964720134490000 2013 Document Code: 449

C-3 RBC Certifications required under C-3 Phase I



6964720134500000 2013 Document Code: 450

C-3 RBC Certifications required under C-3 Phase II



6964720134510000 2013 Document Code: 451

Actuarial Certifications related to Annuity Nonforeiture Ongoing Compliance



6964720134520000 2013 Document Code: 452

Actuarial Opin required by the Modified Guaranteed Annuity Model Reg



6964720134530000 2013 Document Code: 453

Act Cert Rel to Hedging req by Actuarial Guideline XLIII



6964720134360000 2013 Document Code: 436

Fin Off Cert Rel to Clearly Def Hedging Strat req by Act Guid XLIII



6964720134370000 2013 Document Code: 437

Mgt Cert That the Val Reflects Mgt's Intent req by Act Guid XLIII



6964720134380000 2013 Document Code: 438

Act Cert Related to the Reserves required by Actuarial Guideling XLIII



6964720134390000 2013 Document Code: 439

Actuarial Certification regarding the use of 2001 Preferred Class Tables



6964720134540000 2013 Document Code: 454

Worker's Compensation Carve-out Supplement



6964720134950000 2013 Document Code: 495

Supplemental Schedule O



6964720134650000 2013 Document Code: 465

Medicare Part D Coverage Supplement



6964720133650000 2013 Document Code: 365

Approval for Relief related to five-year rotation for lead Audit Partner



6964720132240000 2013 Document Code: 224

Approval for Relief related to one-year cooling off period for inde. CPA



6964720132250000 2013 Document Code: 225

Approval for Relief related to Require. for Audit Committees



6964720132260000 2013 Document Code: 226

LTC Supplemental Interrogatories



6964720133060000 2013 Document Code: 306

Interest Sensitive Life Insurance Products Report



6964720132800000 2013 Document Code: 280

Credit Insurance Exhibit



6964720132300000 2013 Document Code: 230

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Accident and Health Policy Experience Exhibit



6964720132100000

2013

Document Code: 210

Analysis of Increase in Annuity Reserves During the Year



69647201351500000

2013

Document Code: 515

Supplemental Health Care Exhibit's Expense Allocation Report



69647201321700000

2013

Document Code: 217

Analysis of Annuity Operations by Lines of Business



6964720135100000

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Supplemental Health Care Exhibit



69647201321600000

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69647201322300000

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