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ANNUAL STATEMENT

For the Year Ended December 31, 2013

of the Condition and Affairs of the

OHIO NATIONAL LIFE ASSURANCE CORPORATION

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

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

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

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

OFFICERS

Name	Title	Name	Title
Gary Thomas Huffman	President, Chairman, & CEO	Therese Susan McDonough	Secretary
Joseph Richard Sander	Treasurer	Ronald John Dolan	Actuary, Vice Chairman & CRO

OTHER

Thomas Abdo Barefield #	Executive Vice President, Distribution	Howard Charles Becker	Executive Vice President & CAO
Richard Jerome Bodner	Senior Vice President	Christopher Allen Carlson	Executive Vice President & CIO
Harry Douglas Cooke, III	Senior Vice President	John Andrew DelPozzo #	Senior Vice President
Anthony Gerard Esposito	Senior Vice President	Paul Gerard #	Senior Vice President
Diane Sue Hagenbuch	Senior Vice President	Kristal Elaine Hambrick #	Executive Vice President & Chief Product Officer
Michael Francis Haverkamp	Senior Vice President	Ronald Gene Heibert	Senior Vice President & Chief Corporate Actuary
David Dale Herr, Jr.	Senior Vice President	Stephen Ray Murphy	Senior Vice President
Arthur James Roberts	Senior Vice President & CFO	James Clive Smith	Senior Vice President
Barbara Ann Turner #	Senior Vice President & CCO; President & CEO, ONESCO	Paul Joseph Twilling	Senior Vice President

DIRECTORS OR TRUSTEES

Thomas Abdo Barefield #	Ronald John Dolan	Michael Francis Haverkamp	Gary Thomas Huffman

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

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

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

Subscribed and sworn to before me
This ______ day of February, 2014

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

Roxanna S Henry, Notary Public
May 11, 2014

89206201343058100

DIRECT BUSINESS IN Other Alien #1 DURING THE YEAR

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

LIFE INSURANCE

NONE

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

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

NONE

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

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

ACCIDENT AND HEALTH INSURANCE

NONE

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

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

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DIRECT BUSINESS IN THE STATE OF ALASKA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	112,183	0	0	0	112,183
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	112,183	0	0	0	112,183
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	0	0	0	0	0
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	10,825	0	0	0	10,825
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	10,825	0	0	0	10,825

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	45	18,697,500	0	(a) 0	0	0	0	0	45	18,697,500
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(3)	(250,000)	0	0	0	0	0	0	(3)	(250,000)
23. In force December 31 of current year	42	18,447,500	0	(a) 0	0	0	0	0	42	18,447,500

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	2,650	2,653	0	0	0
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	2,650	2,653	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,650	2,653	0	0	0

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

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DIRECT BUSINESS IN THE STATE OF ALABAMA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	8,713,674	0	0	0	8,713,674
2. Annuity considerations	240	0	0	0	240
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	8,713,914	0	0	0	8,713,914
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	2,207,440	0	0	0	2,207,440
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	201,514	0	0	0	201,514
12. Surrender values and withdrawals for life contracts	1,034,003	0	0	0	1,034,003
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	3,442,957	0	0	0	3,442,957
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	5	1,594,058	0	0	0	0	0	0	5	1,594,058
17. Incurred during current year	15	2,193,141	0	0	0	0	0	0	15	2,193,141
Settled during current year:										
18.1 By payment in full	14	2,378,272	0	0	0	0	0	0	14	2,378,272
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	14	2,378,272	0	0	0	0	0	0	14	2,378,272
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	14	2,378,272	0	0	0	0	0	0	14	2,378,272
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	6	1,408,927	0	0	0	0	0	0	6	1,408,927
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	3,335	1,850,105,763	0	(a) 0	0	0	0	0	3,335	1,850,105,763
21. Issued during year	278	195,244,858	0	0	0	0	0	0	278	195,244,858
22. Other changes to in force (Net)	(251)	(165,701,641)	0	0	0	0	0	0	(251)	(165,701,641)
23. In force December 31 of current year	3,362	1,879,648,980	0	(a) 0	0	0	0	0	3,362	1,879,648,980

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	364,333	364,845	0	392,926	487,650
25.2 Guaranteed renewable (b)	0	0	0	114	114
25.3 Non-renewable for stated reasons only (b)	8,020	8,031	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	372,353	372,876	0	393,040	487,764
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	372,353	372,876	0	393,040	487,764

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

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DIRECT BUSINESS IN THE STATE OF ARKANSAS DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	15,037,188	0	0	0	15,037,188
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	15,037,188	0	0	0	15,037,188
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	996,880	0	0	0	996,880
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	1,041	0	0	0	1,041
12. Surrender values and withdrawals for life contracts	837,534	0	0	0	837,534
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	1,835,455	0	0	0	1,835,455

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	1	300,000	0	0	0	0	0	0	1	300,000
17. Incurred during current year	3	925,000	0	0	0	0	0	0	3	925,000
Settled during current year:										
18.1 By payment in full	3	1,200,000	0	0	0	0	0	0	3	1,200,000
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	3	1,200,000	0	0	0	0	0	0	3	1,200,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	3	1,200,000	0	0	0	0	0	0	3	1,200,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	25,000	0	0	0	0	0	0	1	25,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	2,250	1,139,442,534	0	(a) 0	0	0	0	0	2,250	1,139,442,534
21. Issued during year	391	218,105,133	0	0	0	0	0	0	391	218,105,133
22. Other changes to in force (Net)	(174)	(116,647,528)	0	0	0	0	0	0	(174)	(116,647,528)
23. In force December 31 of current year	2,467	1,240,900,139	0	(a) 0	0	0	0	0	2,467	1,240,900,139

(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)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	61,722	61,809	0	0	0
25.2 Guaranteed renewable (b)	3,755	3,761	0	0	0
25.3 Non-renewable for stated reasons only (b)	1,160	1,162	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	66,637	66,732	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	66,637	66,732	0	0	0

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

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DIRECT BUSINESS IN AMERICAN SAMOA DURING THE YEAR

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

LIFE INSURANCE

NONE

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

NONE

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

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

ACCIDENT AND HEALTH INSURANCE

NONE

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

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

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DIRECT BUSINESS IN THE STATE OF ARIZONA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	5,257,535	0	0	0	5,257,535
2. Annuity considerations	300	0	0	0	300
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	5,257,835	0	0	0	5,257,835
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	705,320	0	0	0	705,320
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	17,448	0	0	0	17,448
12. Surrender values and withdrawals for life contracts	283,581	0	0	0	283,581
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	1,006,349	0	0	0	1,006,349
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	1	500,000	0	0	0	0	0	0	1	500,000
17. Incurred during current year	3	436,188	0	0	0	0	0	0	3	436,188
Settled during current year:										
18.1 By payment in full	4	936,188	0	0	0	0	0	0	4	936,188
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	4	936,188	0	0	0	0	0	0	4	936,188
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	4	936,188	0	0	0	0	0	0	4	936,188
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	(0)	0	0	0	0	0	0	0	(0)
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	3,310	2,117,916,291	0	(a) 0	0	0	0	0	3,310	2,117,916,291
21. Issued during year	522	354,464,123	0	0	0	0	0	0	522	354,464,123
22. Other changes to in force (Net)	(264)	(141,522,709)	0	0	0	0	0	0	(264)	(141,522,709)
23. In force December 31 of current year	3,568	2,330,857,705	0	(a) 0	0	0	0	0	3,568	2,330,857,705

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	94,191	94,323	0	58,847	53,757
25.2 Guaranteed renewable (b)	8,196	8,208	0	0	0
25.3 Non-renewable for stated reasons only (b)	8,145	8,156	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	110,532	110,687	0	58,847	53,757
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	110,532	110,687	0	58,847	53,757

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

DIRECT BUSINESS IN THE STATE OF CALIFORNIA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	58,242,820	0	0	0	58,242,820
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	58,242,820	0	0	0	58,242,820
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	21,150,473	0	0	0	21,150,473
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	45,729	0	0	0	45,729
12. Surrender values and withdrawals for life contracts	5,584,398	0	0	0	5,584,398
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	26,780,600	0	0	0	26,780,600
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	17	3,278,712	0	0	0	0	0	0	17	3,278,712
17. Incurred during current year	40	21,117,328	0	0	0	0	0	0	40	21,117,328
Settled during current year:										
18.1 By payment in full	45	23,385,114	0	0	0	0	0	0	45	23,385,114
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	45	23,385,114	0	0	0	0	0	0	45	23,385,114
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	45	23,385,114	0	0	0	0	0	0	45	23,385,114
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	12	1,010,926	0	0	0	0	0	0	12	1,010,926
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	20,750	15,008,865,414	0	(a) 0	0	0	0	0	20,750	15,008,865,414
21. Issued during year	2,705	2,135,405,921	0	0	0	0	0	0	2,705	2,135,405,921
22. Other changes to in force (Net)	(1,321)	(916,882,956)	0	0	0	0	0	0	(1,321)	(916,882,956)
23. In force December 31 of current year	22,134	16,227,388,379	0	(a) 0	0	0	0	0	22,134	16,227,388,379

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	1,530,613	1,532,764	0	5,110,454	5,176,127
25.2 Guaranteed renewable (b)	10,028	10,042	0	0	0
25.3 Non-renewable for stated reasons only (b)	30,404	30,447	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	1,571,045	1,573,253	0	5,110,454	5,176,127
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,571,045	1,573,253	0	5,110,454	5,176,127

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

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DIRECT BUSINESS IN THE STATE OF CANADA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	6,593	0	0	0	6,593
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	6,593	0	0	0	6,593
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	0	0	0	0	0
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	0	0	0	0	0

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	8	5,912,500	0	(a) 0	0	0	0	0	8	5,912,500
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	1	2,200,000	0	0	0	0	0	0	1	2,200,000
23. In force December 31 of current year	9	8,112,500	0	(a) 0	0	0	0	0	9	8,112,500

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

ACCIDENT AND HEALTH INSURANCE

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

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

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DIRECT BUSINESS IN THE STATE OF COLORADO DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	10,740,712	0	0	0	10,740,712
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	10,740,712	0	0	0	10,740,712
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	8,132,369	0	0	0	8,132,369
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	2,059	0	0	0	2,059
12. Surrender values and withdrawals for life contracts	1,166,096	0	0	0	1,166,096
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	9,300,524	0	0	0	9,300,524

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	7	3,810,000	0	0	0	0	0	0	7	3,810,000
17. Incurred during current year	20	8,632,369	0	0	0	0	0	0	20	8,632,369
Settled during current year:										
18.1 By payment in full	18	8,002,902	0	0	0	0	0	0	18	8,002,902
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	18	8,002,902	0	0	0	0	0	0	18	8,002,902
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	18	8,002,902	0	0	0	0	0	0	18	8,002,902
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	9	4,439,467	0	0	0	0	0	0	9	4,439,467
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	7,094	4,304,156,316	0	(a) 0	0	0	0	0	7,094	4,304,156,316
21. Issued during year	543	357,611,604	0	0	0	0	0	0	543	357,611,604
22. Other changes to in force (Net)	(567)	(359,007,798)	0	0	0	0	0	0	(567)	(359,007,798)
23. In force December 31 of current year	7,070	4,302,760,122	0	(a) 0	0	0	0	0	7,070	4,302,760,122

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	1,367,401	1,369,322	0	1,897,713	1,934,716
25.2 Guaranteed renewable (b)	19,145	19,172	0	5,200	4,867
25.3 Non-renewable for stated reasons only (b)	17,698	17,723	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	1,404,244	1,406,217	0	1,902,913	1,939,583
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,404,244	1,406,217	0	1,902,913	1,939,583

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

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DIRECT BUSINESS IN THE STATE OF CONNECTICUT DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	16,291,341	0	0	0	16,291,341
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	16,291,341	0	0	0	16,291,341
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	1,183,680	0	0	0	1,183,680
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	8,257	0	0	0	8,257
12. Surrender values and withdrawals for life contracts	603,812	0	0	0	603,812
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	1,795,749	0	0	0	1,795,749

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	2	1,100,000	0	0	0	0	0	0	2	1,100,000
17. Incurred during current year	5	1,183,680	0	0	0	0	0	0	5	1,183,680
Settled during current year:										
18.1 By payment in full	6	1,283,680	0	0	0	0	0	0	6	1,283,680
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	6	1,283,680	0	0	0	0	0	0	6	1,283,680
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	6	1,283,680	0	0	0	0	0	0	6	1,283,680
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	1,000,000	0	0	0	0	0	0	1	1,000,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	3,475	2,167,039,716	0	(a) 0	0	0	0	0	3,475	2,167,039,716
21. Issued during year	541	315,450,550	0	0	0	0	0	0	541	315,450,550
22. Other changes to in force (Net)	(248)	(155,649,317)	0	0	0	0	0	0	(248)	(155,649,317)
23. In force December 31 of current year	3,768	2,326,840,949	0	(a) 0	0	0	0	0	3,768	2,326,840,949

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	98,211	98,349	0	0	0
25.2 Guaranteed renewable (b)	17,132	17,156	0	0	0
25.3 Non-renewable for stated reasons only (b)	6,639	6,648	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	121,982	122,153	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	121,982	122,153	0	0	0

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

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

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	693,764	0	0	0	693,764
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	693,764	0	0	0	693,764
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	25,000	0	0	0	25,000
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	1,057	0	0	0	1,057
12. Surrender values and withdrawals for life contracts	53,371	0	0	0	53,371
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	79,428	0	0	0	79,428

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	1	25,000	0	0	0	0	0	0	1	25,000
Settled during current year:										
18.1 By payment in full	1	25,000	0	0	0	0	0	0	1	25,000
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	1	25,000	0	0	0	0	0	0	1	25,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	1	25,000	0	0	0	0	0	0	1	25,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	293	321,875,255	0	(a) 0	0	0	0	0	293	321,875,255
21. Issued during year	55	57,031,883	0	0	0	0	0	0	55	57,031,883
22. Other changes to in force (Net)	(32)	(27,769,169)	0	0	0	0	0	0	(32)	(27,769,169)
23. In force December 31 of current year	316	351,137,969	0	(a) 0	0	0	0	0	316	351,137,969

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	33,584	33,631	0	0	0
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	1,933	1,936	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	35,517	35,567	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	35,517	35,567	0	0	0

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

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DIRECT BUSINESS IN THE STATE OF DELAWARE DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	615,320	0	0	0	615,320
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	615,320	0	0	0	615,320
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	25,000	0	0	0	25,000
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	10,711	0	0	0	10,711
12. Surrender values and withdrawals for life contracts	68,903	0	0	0	68,903
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	104,614	0	0	0	104,614

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	1	150,000	0	0	0	0	0	0	1	150,000
17. Incurred during current year	1	53,008	0	0	0	0	0	0	1	53,008
Settled during current year:										
18.1 By payment in full	2	203,008	0	0	0	0	0	0	2	203,008
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	2	203,008	0	0	0	0	0	0	2	203,008
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	2	203,008	0	0	0	0	0	0	2	203,008
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	462	231,187,265	0	(a) 0	0	0	0	0	462	231,187,265
21. Issued during year	40	28,500,000	0	0	0	0	0	0	40	28,500,000
22. Other changes to in force (Net)	(15)	(4,252,870)	0	0	0	0	0	0	(15)	(4,252,870)
23. In force December 31 of current year	487	255,434,395	0	(a) 0	0	0	0	0	487	255,434,395

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	23,276	23,309	0	0	0
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	23,276	23,309	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	23,276	23,309	0	0	0

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

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DIRECT BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	31,254,056	0	0	0	31,254,056
2. Annuity considerations	17,168	0	0	0	17,168
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	31,271,224	0	0	0	31,271,224
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	11,987,739	0	0	0	11,987,739
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	110,766	0	0	0	110,766
12. Surrender values and withdrawals for life contracts	3,807,053	0	0	0	3,807,053
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	15,905,558	0	0	0	15,905,558
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	11	4,361,681	0	0	0	0	0	0	11	4,361,681
17. Incurred during current year	34	11,036,652	0	0	0	0	0	0	34	11,036,652
Settled during current year:										
18.1 By payment in full	38	10,050,504	0	0	0	0	0	0	38	10,050,504
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	38	10,050,504	0	0	0	0	0	0	38	10,050,504
18.4 Reduction by compromise	1	1,000,000	0	0	0	0	0	0	1	1,000,000
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	39	11,050,504	0	0	0	0	0	0	39	11,050,504
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	6	4,347,830	0	0	0	0	0	0	6	4,347,830
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	14,446	8,456,152,083	0	(a) 0	0	0	0	0	14,446	8,456,152,083
21. Issued during year	1,572	1,012,741,923	0	0	0	0	0	0	1,572	1,012,741,923
22. Other changes to in force (Net)	(1,017)	(568,231,930)	0	0	0	0	0	0	(1,017)	(568,231,930)
23. In force December 31 of current year	15,001	8,900,662,076	0	(a) 0	0	0	0	0	15,001	8,900,662,076

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	735,799	736,832	0	1,537,821	1,505,467
25.2 Guaranteed renewable (b)	11,689	11,705	0	0	0
25.3 Non-renewable for stated reasons only (b)	39,115	39,170	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	786,603	787,707	0	1,537,821	1,505,467
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	786,603	787,707	0	1,537,821	1,505,467

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

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DIRECT BUSINESS IN THE STATE OF GEORGIA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	27,100,684	0	0	0	27,100,684
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	27,100,684	0	0	0	27,100,684
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	9,536,884	0	0	0	9,536,884
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	30,668	0	0	0	30,668
12. Surrender values and withdrawals for life contracts	2,363,831	0	0	0	2,363,831
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	11,931,383	0	0	0	11,931,383
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	7	1,729,961	0	0	0	0	0	0	7	1,729,961
17. Incurred during current year	24	7,506,816	0	0	0	0	0	0	24	7,506,816
Settled during current year:										
18.1 By payment in full	26	8,041,156	0	0	0	0	0	0	26	8,041,156
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	26	8,041,156	0	0	0	0	0	0	26	8,041,156
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	26	8,041,156	0	0	0	0	0	0	26	8,041,156
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	5	1,195,622	0	0	0	0	0	0	5	1,195,622
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	9,184	5,255,500,479	0	(a) 0	0	0	0	0	9,184	5,255,500,479
21. Issued during year	734	452,758,630	0	0	0	0	0	0	734	452,758,630
22. Other changes to in force (Net)	(594)	(338,067,677)	0	0	0	0	0	0	(594)	(338,067,677)
23. In force December 31 of current year	9,324	5,370,191,432	0	(a) 0	0	0	0	0	9,324	5,370,191,432

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	347,830	348,319	0	484,332	484,484
25.2 Guaranteed renewable (b)	18,344	18,369	0	0	0
25.3 Non-renewable for stated reasons only (b)	9,929	9,943	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	376,103	376,631	0	484,332	484,484
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	376,103	376,631	0	484,332	484,484

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

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DIRECT BUSINESS IN GRAND TOTAL DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	556,415,418	0	0	0	556,415,418
2. Annuity considerations	244,138	0	0	0	244,138
3. Deposit-type contract funds	106,014	XXX	0	XXX	106,014
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	556,765,570	0	0	0	556,765,570
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	193,186,262	0	0	0	193,186,262
10. Matured endowments	36,928	0	0	0	36,928
11. Annuity benefits	4,135,491	0	0	0	4,135,491
12. Surrender values and withdrawals for life contracts	75,094,993	0	0	0	75,094,993
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	272,453,674	0	0	0	272,453,674

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	202	37,412,948	0	0	0	0	0	0	202	37,412,948
17. Incurred during current year	737	189,951,667	0	0	0	0	0	0	737	189,951,667
Settled during current year:										
18.1 By payment in full	776	191,200,054	0	0	0	0	0	0	776	191,200,054
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	776	191,200,054	0	0	0	0	0	0	776	191,200,054
18.4 Reduction by compromise	2	3,900,000	0	0	0	0	0	0	2	3,900,000
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	778	195,100,054	0	0	0	0	0	0	778	195,100,054
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	161	32,264,562	0	0	0	0	0	0	161	32,264,562
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	249,909	133,438,808,579	0	(a)0	0	0	0	0	249,909	133,438,808,579
21. Issued during year	23,709	15,731,162,699	0	0	0	0	0	0	23,709	15,731,162,699
22. Other changes to in force (Net)	(16,568)	(8,693,120,171)	0	0	0	0	0	0	(16,568)	(8,693,120,171)
23. In force December 31 of current year	257,050	140,476,851,107	0	(a)0	0	0	0	0	257,050	140,476,851,107

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	15,380,097	15,401,703	0	20,104,007	19,277,346
25.2 Guaranteed renewable (b)	724,321	725,341	0	229,359	279,929
25.3 Non-renewable for stated reasons only (b)	521,459	522,190	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	16,625,877	16,649,234	0	20,333,366	19,557,275
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	16,625,877	16,649,234	0	20,333,366	19,557,275

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

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DIRECT BUSINESS IN GUAM DURING THE YEAR

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

LIFE INSURANCE

NONE

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

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

NONE

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

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

ACCIDENT AND HEALTH INSURANCE

NONE

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

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

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DIRECT BUSINESS IN THE STATE OF HAWAII DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	111,570	0	0	0	111,570
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	111,570	0	0	0	111,570
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	0	0	0	0	0
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	150	0	0	0	150
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	150	0	0	0	150
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	1	590,169	0	0	0	0	0	0	1	590,169
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	590,169	0	0	0	0	0	0	1	590,169
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	54	37,650,000	0	(a) 0	0	0	0	0	54	37,650,000
21. Issued during year	6	3,550,000	0	0	0	0	0	0	6	3,550,000
22. Other changes to in force (Net)	10	6,475,000	0	0	0	0	0	0	10	6,475,000
23. In force December 31 of current year	70	47,675,000	0	(a) 0	0	0	0	0	70	47,675,000

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	12,016	12,033	0	37,800	36,332
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	12,016	12,033	0	37,800	36,332
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	12,016	12,033	0	37,800	36,332

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

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DIRECT BUSINESS IN THE STATE OF IOWA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	4,957,344	0	0	0	4,957,344
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	4,957,344	0	0	0	4,957,344
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	3,578,729	0	0	0	3,578,729
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	26,894	0	0	0	26,894
12. Surrender values and withdrawals for life contracts	2,674,923	0	0	0	2,674,923
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	6,280,546	0	0	0	6,280,546
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	7	321,188	0	0	0	0	0	0	7	321,188
17. Incurred during current year	25	3,938,131	0	0	0	0	0	0	25	3,938,131
Settled during current year:										
18.1 By payment in full	19	3,460,605	0	0	0	0	0	0	19	3,460,605
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	19	3,460,605	0	0	0	0	0	0	19	3,460,605
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	19	3,460,605	0	0	0	0	0	0	19	3,460,605
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	13	798,714	0	0	0	0	0	0	13	798,714
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	4,335	1,173,898,922	0	(a) 0	0	0	0	0	4,335	1,173,898,922
21. Issued during year	166	87,711,000	0	0	0	0	0	0	166	87,711,000
22. Other changes to in force (Net)	(269)	(81,832,963)	0	0	0	0	0	0	(269)	(81,832,963)
23. In force December 31 of current year	4,232	1,179,776,959	0	(a) 0	0	0	0	0	4,232	1,179,776,959

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	108,013	108,165	0	14,995	13,555
25.2 Guaranteed renewable (b)	49,054	49,123	0	8,968	8,246
25.3 Non-renewable for stated reasons only (b)	1,281	1,283	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	158,348	158,571	0	23,963	21,801
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	158,348	158,571	0	23,963	21,801

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

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DIRECT BUSINESS IN THE STATE OF IDAHO DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	3,866,472	0	0	0	3,866,472
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	3,866,472	0	0	0	3,866,472
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	1,066,895	0	0	0	1,066,895
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	44,800	0	0	0	44,800
12. Surrender values and withdrawals for life contracts	1,297,288	0	0	0	1,297,288
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	2,408,983	0	0	0	2,408,983

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	8	1,055,865	0	0	0	0	0	0	8	1,055,865
Settled during current year:										
18.1 By payment in full	8	1,055,865	0	0	0	0	0	0	8	1,055,865
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	8	1,055,865	0	0	0	0	0	0	8	1,055,865
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	8	1,055,865	0	0	0	0	0	0	8	1,055,865
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	3,482	1,334,083,834	0	(a) 0	0	0	0	0	3,482	1,334,083,834
21. Issued during year	257	140,291,869	0	0	0	0	0	0	257	140,291,869
22. Other changes to in force (Net)	(290)	(101,398,523)	0	0	0	0	0	0	(290)	(101,398,523)
23. In force December 31 of current year	3,449	1,372,977,180	0	(a) 0	0	0	0	0	3,449	1,372,977,180

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	199,717	199,998	0	143,833	139,803
25.2 Guaranteed renewable (b)	24,243	24,277	0	12,226	13,535
25.3 Non-renewable for stated reasons only (b)	11,374	11,390	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	235,334	235,665	0	156,059	153,338
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	235,334	235,665	0	156,059	153,338

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

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DIRECT BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	22,800,051	0	0	0	22,800,051
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	22,800,051	0	0	0	22,800,051
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	6,799,276	0	0	0	6,799,276
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	152,086	0	0	0	152,086
12. Surrender values and withdrawals for life contracts	2,807,566	0	0	0	2,807,566
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	9,758,928	0	0	0	9,758,928

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	3	625,000	0	0	0	0	0	0	3	625,000
17. Incurred during current year	19	3,835,718	0	0	0	0	0	0	19	3,835,718
Settled during current year:										
18.1 By payment in full	22	4,460,719	0	0	0	0	0	0	22	4,460,719
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	22	4,460,719	0	0	0	0	0	0	22	4,460,719
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	22	4,460,719	0	0	0	0	0	0	22	4,460,719
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	(0)	0	0	0	0	0	0	0	(0)
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	8,776	4,808,276,575	0	(a) 0	0	0	0	0	8,776	4,808,276,575
21. Issued during year	747	511,749,514	0	0	0	0	0	0	747	511,749,514
22. Other changes to in force (Net)	(626)	(337,544,146)	0	0	0	0	0	0	(626)	(337,544,146)
23. In force December 31 of current year	8,897	4,982,481,943	0	(a) 0	0	0	0	0	8,897	4,982,481,943

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	319,883	320,333	0	35,850	34,942
25.2 Guaranteed renewable (b)	27,655	27,694	0	4,200	4,200
25.3 Non-renewable for stated reasons only (b)	13,809	13,828	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	361,347	361,855	0	40,050	39,142
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	361,347	361,855	0	40,050	39,142

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

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DIRECT BUSINESS IN THE STATE OF INDIANA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	22,797,271	0	0	0	22,797,271
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	22,797,271	0	0	0	22,797,271
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	1,260,222	0	0	0	1,260,222
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	72,823	0	0	0	72,823
12. Surrender values and withdrawals for life contracts	965,572	0	0	0	965,572
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	2,298,617	0	0	0	2,298,617

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	6	801,704	0	0	0	0	0	0	6	801,704
17. Incurred during current year	13	1,868,825	0	0	0	0	0	0	13	1,868,825
Settled during current year:										
18.1 By payment in full	12	1,768,825	0	0	0	0	0	0	12	1,768,825
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	12	1,768,825	0	0	0	0	0	0	12	1,768,825
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	12	1,768,825	0	0	0	0	0	0	12	1,768,825
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	7	901,704	0	0	0	0	0	0	7	901,704
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	5,184	2,279,370,037	0	(a) 0	0	0	0	0	5,184	2,279,370,037
21. Issued during year	396	248,647,799	0	0	0	0	0	0	396	248,647,799
22. Other changes to in force (Net)	(331)	(125,467,367)	0	0	0	0	0	0	(331)	(125,467,367)
23. In force December 31 of current year	5,249	2,402,550,469	0	(a) 0	0	0	0	0	5,249	2,402,550,469

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	237,905	238,239	0	283,804	485,933
25.2 Guaranteed renewable (b)	16,662	16,685	0	8,300	7,967
25.3 Non-renewable for stated reasons only (b)	2,742	2,746	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	257,309	257,670	0	292,104	493,900
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	257,309	257,670	0	292,104	493,900

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

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DIRECT BUSINESS IN THE STATE OF KANSAS DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	11,486,149	0	0	0	11,486,149
2. Annuity considerations	35,500	0	0	0	35,500
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	11,521,649	0	0	0	11,521,649
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	2,301,680	0	0	0	2,301,680
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	177,189	0	0	0	177,189
12. Surrender values and withdrawals for life contracts	1,465,102	0	0	0	1,465,102
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	3,943,971	0	0	0	3,943,971

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	1	736,939	0	0	0	0	0	0	1	736,939
17. Incurred during current year	14	2,244,068	0	0	0	0	0	0	14	2,244,068
Settled during current year:										
18.1 By payment in full	11	1,631,007	0	0	0	0	0	0	11	1,631,007
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	11	1,631,007	0	0	0	0	0	0	11	1,631,007
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	11	1,631,007	0	0	0	0	0	0	11	1,631,007
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	4	1,350,000	0	0	0	0	0	0	4	1,350,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	5,014	2,386,467,774	0	(a) 0	0	0	0	0	5,014	2,386,467,774
21. Issued during year	322	198,925,965	0	0	0	0	0	0	322	198,925,965
22. Other changes to in force (Net)	(324)	(154,421,955)	0	0	0	0	0	0	(324)	(154,421,955)
23. In force December 31 of current year	5,012	2,430,971,784	0	(a) 0	0	0	0	0	5,012	2,430,971,784

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	306,325	306,756	0	321,378	310,451
25.2 Guaranteed renewable (b)	24,467	24,502	0	0	0
25.3 Non-renewable for stated reasons only (b)	1,537	1,539	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	332,329	332,797	0	321,378	310,451
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	332,329	332,797	0	321,378	310,451

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

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DIRECT BUSINESS IN THE STATE OF KENTUCKY DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	13,951,563	0	0	0	13,951,563
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	13,951,563	0	0	0	13,951,563
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	694,221	0	0	0	694,221
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	21,018	0	0	0	21,018
12. Surrender values and withdrawals for life contracts	1,187,477	0	0	0	1,187,477
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	1,902,716	0	0	0	1,902,716
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	1	50,000	0	0	0	0	0	0	1	50,000
17. Incurred during current year	8	798,230	0	0	0	0	0	0	8	798,230
Settled during current year:										
18.1 By payment in full	8	823,230	0	0	0	0	0	0	8	823,230
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	8	823,230	0	0	0	0	0	0	8	823,230
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	8	823,230	0	0	0	0	0	0	8	823,230
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	25,000	0	0	0	0	0	0	1	25,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	3,639	1,680,234,015	0	(a) 0	0	0	0	0	3,639	1,680,234,015
21. Issued during year	227	151,369,315	0	0	0	0	0	0	227	151,369,315
22. Other changes to in force (Net)	(274)	(125,126,590)	0	0	0	0	0	0	(274)	(125,126,590)
23. In force December 31 of current year	3,592	1,706,476,740	0	(a) 0	0	0	0	0	3,592	1,706,476,740

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	275,557	275,943	0	258,971	267,585
25.2 Guaranteed renewable (b)	6,503	6,512	0	6,600	6,550
25.3 Non-renewable for stated reasons only (b)	2,361	2,364	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	284,421	284,819	0	265,571	274,135
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	284,421	284,819	0	265,571	274,135

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

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DIRECT BUSINESS IN THE STATE OF LOUISIANA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	3,556,884	0	0	0	3,556,884
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	3,556,884	0	0	0	3,556,884
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	970,000	0	0	0	970,000
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	106,407	0	0	0	106,407
12. Surrender values and withdrawals for life contracts	293,572	0	0	0	293,572
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	1,369,979	0	0	0	1,369,979
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	2	175,000	0	0	0	0	0	0	2	175,000
17. Incurred during current year	4	970,000	0	0	0	0	0	0	4	970,000
Settled during current year:										
18.1 By payment in full	4	982,030	0	0	0	0	0	0	4	982,030
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	4	982,030	0	0	0	0	0	0	4	982,030
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	4	982,030	0	0	0	0	0	0	4	982,030
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	162,970	0	0	0	0	0	0	2	162,970
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	2,356	1,520,519,110	0	(a) 0	0	0	0	0	2,356	1,520,519,110
21. Issued during year	256	170,302,760	0	0	0	0	0	0	256	170,302,760
22. Other changes to in force (Net)	(177)	(99,527,095)	0	0	0	0	0	0	(177)	(99,527,095)
23. In force December 31 of current year	2,435	1,591,294,775	0	(a) 0	0	0	0	0	2,435	1,591,294,775

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	179,467	179,719	0	126,300	120,700
25.2 Guaranteed renewable (b)	6,492	6,501	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	185,959	186,220	0	126,300	120,700
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	185,959	186,220	0	126,300	120,700

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

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DIRECT BUSINESS IN THE STATE OF MASSACHUSETTS DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	9,907,436	0	0	0	9,907,436
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	9,907,436	0	0	0	9,907,436
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	4,282,645	0	0	0	4,282,645
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	88,343	0	0	0	88,343
12. Surrender values and withdrawals for life contracts	592,924	0	0	0	592,924
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	4,963,912	0	0	0	4,963,912

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	2	600,000	0	0	0	0	0	0	2	600,000
17. Incurred during current year	12	4,032,645	0	0	0	0	0	0	12	4,032,645
Settled during current year:										
18.1 By payment in full	11	3,032,645	0	0	0	0	0	0	11	3,032,645
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	11	3,032,645	0	0	0	0	0	0	11	3,032,645
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	11	3,032,645	0	0	0	0	0	0	11	3,032,645
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	3	1,600,000	0	0	0	0	0	0	3	1,600,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	4,706	3,019,539,360	0	(a) 0	0	0	0	0	4,706	3,019,539,360
21. Issued during year	647	400,271,027	0	0	0	0	0	0	647	400,271,027
22. Other changes to in force (Net)	(289)	(180,485,072)	0	0	0	0	0	0	(289)	(180,485,072)
23. In force December 31 of current year	5,064	3,239,325,315	0	(a) 0	0	0	0	0	5,064	3,239,325,315

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	140,712	140,909	0	0	0
25.2 Guaranteed renewable (b)	28,766	28,807	0	0	0
25.3 Non-renewable for stated reasons only (b)	8,687	8,699	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	178,165	178,415	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	178,165	178,415	0	0	0

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

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DIRECT BUSINESS IN THE STATE OF MARYLAND DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	9,820,945	0	0	0	9,820,945
2. Annuity considerations	3,417	0	0	0	3,417
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	9,824,362	0	0	0	9,824,362
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	8,437,363	0	0	0	8,437,363
10. Matured endowments	24,928	0	0	0	24,928
11. Annuity benefits	121,170	0	0	0	121,170
12. Surrender values and withdrawals for life contracts	688,857	0	0	0	688,857
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	9,272,318	0	0	0	9,272,318
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	3	475,000	0	0	0	0	0	0	3	475,000
17. Incurred during current year	15	3,919,363	0	0	0	0	0	0	15	3,919,363
Settled during current year:										
18.1 By payment in full	18	4,394,363	0	0	0	0	0	0	18	4,394,363
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	18	4,394,363	0	0	0	0	0	0	18	4,394,363
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	18	4,394,363	0	0	0	0	0	0	18	4,394,363
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	5,736	3,654,339,310	0	(a) 0	0	0	0	0	5,736	3,654,339,310
21. Issued during year	583	489,282,422	0	0	0	0	0	0	583	489,282,422
22. Other changes to in force (Net)	(342)	(194,465,097)	0	0	0	0	0	0	(342)	(194,465,097)
23. In force December 31 of current year	5,977	3,949,156,635	0	(a) 0	0	0	0	0	5,977	3,949,156,635

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	422,724	423,318	0	415,420	416,464
25.2 Guaranteed renewable (b)	16,672	16,696	0	0	0
25.3 Non-renewable for stated reasons only (b)	4,556	4,563	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	443,952	444,577	0	415,420	416,464
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	443,952	444,577	0	415,420	416,464

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

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DIRECT BUSINESS IN THE STATE OF MAINE DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	1,073,732	0	0	0	1,073,732
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	1,073,732	0	0	0	1,073,732
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	250,000	0	0	0	250,000
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	17,797	0	0	0	17,797
12. Surrender values and withdrawals for life contracts	92,439	0	0	0	92,439
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	360,236	0	0	0	360,236
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	2	500,000	0	0	0	0	0	0	2	500,000
Settled during current year:										
18.1 By payment in full	1	250,000	0	0	0	0	0	0	1	250,000
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	1	250,000	0	0	0	0	0	0	1	250,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	1	250,000	0	0	0	0	0	0	1	250,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	250,000	0	0	0	0	0	0	1	250,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	1,030	493,277,900	0	(a) 0	0	0	0	0	1,030	493,277,900
21. Issued during year	82	34,191,893	0	0	0	0	0	0	82	34,191,893
22. Other changes to in force (Net)	(72)	(39,914,299)	0	0	0	0	0	0	(72)	(39,914,299)
23. In force December 31 of current year	1,040	487,555,494	0	(a) 0	0	0	0	0	1,040	487,555,494

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	1,589	1,591	0	56,400	56,400
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	1,589	1,591	0	56,400	56,400
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,589	1,591	0	56,400	56,400

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

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DIRECT BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	15,310,478	0	0	0	15,310,478
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	15,310,478	0	0	0	15,310,478
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	6,303,506	0	0	0	6,303,506
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	221,627	0	0	0	221,627
12. Surrender values and withdrawals for life contracts	2,072,320	0	0	0	2,072,320
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	8,597,453	0	0	0	8,597,453
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	5	323,531	0	0	0	0	0	0	5	323,531
17. Incurred during current year	25	6,228,964	0	0	0	0	0	0	25	6,228,964
Settled during current year:										
18.1 By payment in full	23	5,957,157	0	0	0	0	0	0	23	5,957,157
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	23	5,957,157	0	0	0	0	0	0	23	5,957,157
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	23	5,957,157	0	0	0	0	0	0	23	5,957,157
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	7	595,339	0	0	0	0	0	0	7	595,339
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	8,831	3,905,531,713	0	(a) 0	0	0	0	0	8,831	3,905,531,713
21. Issued during year	763	473,964,003	0	0	0	0	0	0	763	473,964,003
22. Other changes to in force (Net)	(601)	(249,362,828)	0	0	0	0	0	0	(601)	(249,362,828)
23. In force December 31 of current year	8,993	4,130,132,888	0	(a) 0	0	0	0	0	8,993	4,130,132,888

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	695,041	696,018	0	701,810	715,369
25.2 Guaranteed renewable (b)	43,291	43,352	0	18,143	18,010
25.3 Non-renewable for stated reasons only (b)	23,367	23,399	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	761,699	762,769	0	719,953	733,379
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	761,699	762,769	0	719,953	733,379

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

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DIRECT BUSINESS IN THE STATE OF MINNESOTA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	8,968,411	0	0	0	8,968,411
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	8,968,411	0	0	0	8,968,411
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	4,674,300	0	0	0	4,674,300
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	70,259	0	0	0	70,259
12. Surrender values and withdrawals for life contracts	1,039,875	0	0	0	1,039,875
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	5,784,434	0	0	0	5,784,434
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	12	4,125,576	0	0	0	0	0	0	12	4,125,576
Settled during current year:										
18.1 By payment in full	11	3,875,576	0	0	0	0	0	0	11	3,875,576
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	11	3,875,576	0	0	0	0	0	0	11	3,875,576
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	11	3,875,576	0	0	0	0	0	0	11	3,875,576
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	250,000	0	0	0	0	0	0	1	250,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	4,804	2,342,532,616	0	(a) 0	0	0	0	0	4,804	2,342,532,616
21. Issued during year	408	256,736,831	0	0	0	0	0	0	408	256,736,831
22. Other changes to in force (Net)	(359)	(165,610,040)	0	0	0	0	0	0	(359)	(165,610,040)
23. In force December 31 of current year	4,853	2,433,659,407	0	(a) 0	0	0	0	0	4,853	2,433,659,407

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	188,894	189,160	0	202,811	185,451
25.2 Guaranteed renewable (b)	23,960	23,994	0	0	0
25.3 Non-renewable for stated reasons only (b)	4,250	4,256	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	217,104	217,410	0	202,811	185,451
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	217,104	217,410	0	202,811	185,451

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

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DIRECT BUSINESS IN THE STATE OF MISSOURI DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	11,809,436	0	0	0	11,809,436
2. Annuity considerations	340	0	0	0	340
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	11,809,776	0	0	0	11,809,776
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	3,851,016	0	0	0	3,851,016
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	92,703	0	0	0	92,703
12. Surrender values and withdrawals for life contracts	7,360,165	0	0	0	7,360,165
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	11,303,884	0	0	0	11,303,884

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	4	623,307	0	0	0	0	0	0	4	623,307
17. Incurred during current year	21	3,967,018	0	0	0	0	0	0	21	3,967,018
Settled during current year:										
18.1 By payment in full	25	4,590,325	0	0	0	0	0	0	25	4,590,325
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	25	4,590,325	0	0	0	0	0	0	25	4,590,325
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	25	4,590,325	0	0	0	0	0	0	25	4,590,325
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	4,760	1,928,893,231	0	(a) 0	0	0	0	0	4,760	1,928,893,231
21. Issued during year	310	150,943,207	0	0	0	0	0	0	310	150,943,207
22. Other changes to in force (Net)	(325)	(104,703,033)	0	0	0	0	0	0	(325)	(104,703,033)
23. In force December 31 of current year	4,745	1,975,133,405	0	(a) 0	0	0	0	0	4,745	1,975,133,405

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	208,840	209,133	0	421,107	425,429
25.2 Guaranteed renewable (b)	17,217	17,240	0	9,542	9,859
25.3 Non-renewable for stated reasons only (b)	5,133	5,141	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	231,190	231,514	0	430,649	435,288
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	231,190	231,514	0	430,649	435,288

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

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

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

LIFE INSURANCE

NONE

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

NONE

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

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

ACCIDENT AND HEALTH INSURANCE

NONE

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

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

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DIRECT BUSINESS IN THE STATE OF MISSISSIPPI DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	2,216,573	0	0	0	2,216,573
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	2,216,573	0	0	0	2,216,573
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	1,310,000	0	0	0	1,310,000
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	600	0	0	0	600
12. Surrender values and withdrawals for life contracts	1,217,835	0	0	0	1,217,835
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	2,528,435	0	0	0	2,528,435
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	2	35,000	0	0	0	0	0	0	2	35,000
17. Incurred during current year	4	5,310,000	0	0	0	0	0	0	4	5,310,000
Settled during current year:										
18.1 By payment in full	5	5,310,000	0	0	0	0	0	0	5	5,310,000
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	5	5,310,000	0	0	0	0	0	0	5	5,310,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	5	5,310,000	0	0	0	0	0	0	5	5,310,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	35,000	0	0	0	0	0	0	1	35,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	1,305	682,826,496	0	(a) 0	0	0	0	0	1,305	682,826,496
21. Issued during year	114	89,127,042	0	0	0	0	0	0	114	89,127,042
22. Other changes to in force (Net)	(109)	(57,446,655)	0	0	0	0	0	0	(109)	(57,446,655)
23. In force December 31 of current year	1,310	714,506,883	0	(a) 0	0	0	0	0	1,310	714,506,883

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	149,393	149,603	0	281,782	352,354
25.2 Guaranteed renewable (b)	4,074	4,079	0	0	0
25.3 Non-renewable for stated reasons only (b)	2,014	2,017	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	155,481	155,699	0	281,782	352,354
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	155,481	155,699	0	281,782	352,354

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

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DIRECT BUSINESS IN THE STATE OF MONTANA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	2,683,198	0	0	0	2,683,198
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	2,683,198	0	0	0	2,683,198
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	30,000	0	0	0	30,000
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	1,930	0	0	0	1,930
12. Surrender values and withdrawals for life contracts	243,979	0	0	0	243,979
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	275,909	0	0	0	275,909
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	2	52,545	0	0	0	0	0	0	2	52,545
Settled during current year:										
18.1 By payment in full	1	22,545	0	0	0	0	0	0	1	22,545
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	1	22,545	0	0	0	0	0	0	1	22,545
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	1	22,545	0	0	0	0	0	0	1	22,545
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	30,000	0	0	0	0	0	0	1	30,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	1,965	868,238,570	0	(a) 0	0	0	0	0	1,965	868,238,570
21. Issued during year	194	105,919,676	0	0	0	0	0	0	194	105,919,676
22. Other changes to in force (Net)	(116)	(49,112,301)	0	0	0	0	0	0	(116)	(49,112,301)
23. In force December 31 of current year	2,043	925,045,945	0	(a) 0	0	0	0	0	2,043	925,045,945

(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)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	37,930	37,983	0	24,000	24,000
25.2 Guaranteed renewable (b)	2,632	2,636	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	40,562	40,619	0	24,000	24,000
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	40,562	40,619	0	24,000	24,000

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

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DIRECT BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	11,666,752	0	0	0	11,666,752
2. Annuity considerations	44,574	0	0	0	44,574
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	11,711,326	0	0	0	11,711,326
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	4,239,387	0	0	0	4,239,387
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	119,811	0	0	0	119,811
12. Surrender values and withdrawals for life contracts	1,266,003	0	0	0	1,266,003
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	5,625,201	0	0	0	5,625,201
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	7	1,047,296	0	0	0	0	0	0	7	1,047,296
17. Incurred during current year	19	5,151,223	0	0	0	0	0	0	19	5,151,223
Settled during current year:										
18.1 By payment in full	21	4,765,998	0	0	0	0	0	0	21	4,765,998
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	21	4,765,998	0	0	0	0	0	0	21	4,765,998
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	21	4,765,998	0	0	0	0	0	0	21	4,765,998
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	5	1,432,521	0	0	0	0	0	0	5	1,432,521
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	6,641	3,874,167,611	0	(a) 0	0	0	0	0	6,641	3,874,167,611
21. Issued during year	458	331,488,935	0	0	0	0	0	0	458	331,488,935
22. Other changes to in force (Net)	(400)	(261,175,113)	0	0	0	0	0	0	(400)	(261,175,113)
23. In force December 31 of current year	6,699	3,944,481,433	0	(a) 0	0	0	0	0	6,699	3,944,481,433

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	464,447	465,100	0	270,320	270,320
25.2 Guaranteed renewable (b)	0	0	0	24,450	24,548
25.3 Non-renewable for stated reasons only (b)	5,692	5,700	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	470,139	470,800	0	294,770	294,868
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	470,139	470,800	0	294,770	294,868

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

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DIRECT BUSINESS IN THE STATE OF NORTH DAKOTA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	1,067,691	0	0	0	1,067,691
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	1,067,691	0	0	0	1,067,691
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	428,398	0	0	0	428,398
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	425,717	0	0	0	425,717
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	854,115	0	0	0	854,115

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	(0)	0	0	0	0	0	0	0	(0)
17. Incurred during current year	5	478,398	0	0	0	0	0	0	5	478,398
Settled during current year:										
18.1 By payment in full	4	378,398	0	0	0	0	0	0	4	378,398
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	4	378,398	0	0	0	0	0	0	4	378,398
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	4	378,398	0	0	0	0	0	0	4	378,398
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	100,000	0	0	0	0	0	0	1	100,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	1,028	389,748,963	0	(a) 0	0	0	0	0	1,028	389,748,963
21. Issued during year	74	60,542,656	0	0	0	0	0	0	74	60,542,656
22. Other changes to in force (Net)	(67)	(38,545,041)	0	0	0	0	0	0	(67)	(38,545,041)
23. In force December 31 of current year	1,035	411,746,578	0	(a) 0	0	0	0	0	1,035	411,746,578

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	37,343	37,395	0	0	0
25.2 Guaranteed renewable (b)	7,876	7,887	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	45,219	45,282	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	45,219	45,282	0	0	0

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

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DIRECT BUSINESS IN THE STATE OF NEBRASKA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	5,119,033	0	0	0	5,119,033
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	5,119,033	0	0	0	5,119,033
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	3,695,576	0	0	0	3,695,576
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	40,943	0	0	0	40,943
12. Surrender values and withdrawals for life contracts	885,884	0	0	0	885,884
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	4,622,403	0	0	0	4,622,403
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	5	505,352	0	0	0	0	0	0	5	505,352
17. Incurred during current year	23	3,690,556	0	0	0	0	0	0	23	3,690,556
Settled during current year:										
18.1 By payment in full	21	3,534,864	0	0	0	0	0	0	21	3,534,864
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	21	3,534,864	0	0	0	0	0	0	21	3,534,864
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	21	3,534,864	0	0	0	0	0	0	21	3,534,864
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	7	661,044	0	0	0	0	0	0	7	661,044
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	4,471	1,235,073,045	0	(a) 0	0	0	0	0	4,471	1,235,073,045
21. Issued during year	214	99,523,326	0	0	0	0	0	0	214	99,523,326
22. Other changes to in force (Net)	(256)	(67,716,107)	0	0	0	0	0	0	(256)	(67,716,107)
23. In force December 31 of current year	4,429	1,266,880,264	0	(a) 0	0	0	0	0	4,429	1,266,880,264

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	92,783	92,913	0	36,000	14,439
25.2 Guaranteed renewable (b)	15,426	15,448	0	0	0
25.3 Non-renewable for stated reasons only (b)	14,119	14,139	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	122,328	122,500	0	36,000	14,439
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	122,328	122,500	0	36,000	14,439

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

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DIRECT BUSINESS IN THE STATE OF NEW HAMPSHIRE DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	3,537,428	0	0	0	3,537,428
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	3,537,428	0	0	0	3,537,428
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	200,000	0	0	0	200,000
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	1,693,175	0	0	0	1,693,175
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	1,893,175	0	0	0	1,893,175

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	2	200,000	0	0	0	0	0	0	2	200,000
Settled during current year:										
18.1 By payment in full	1	100,000	0	0	0	0	0	0	1	100,000
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	1	100,000	0	0	0	0	0	0	1	100,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	1	100,000	0	0	0	0	0	0	1	100,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	100,000	0	0	0	0	0	0	1	100,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	1,323	734,364,615	0	(a) 0	0	0	0	0	1,323	734,364,615
21. Issued during year	234	179,734,274	0	0	0	0	0	0	234	179,734,274
22. Other changes to in force (Net)	(79)	(38,067,282)	0	0	0	0	0	0	(79)	(38,067,282)
23. In force December 31 of current year	1,478	876,031,607	0	(a) 0	0	0	0	0	1,478	876,031,607

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	44,069	44,130	0	0	0
25.2 Guaranteed renewable (b)	2,127	2,130	0	0	0
25.3 Non-renewable for stated reasons only (b)	1,992	1,995	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	48,188	48,255	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	48,188	48,255	0	0	0

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

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DIRECT BUSINESS IN THE STATE OF NEW JERSEY DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	17,718,838	0	0	0	17,718,838
2. Annuity considerations	700	0	0	0	700
3. Deposit-type contract funds	37,500	XXX	0	XXX	37,500
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	17,757,038	0	0	0	17,757,038
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	3,760,233	0	0	0	3,760,233
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	14,979	0	0	0	14,979
12. Surrender values and withdrawals for life contracts	271,401	0	0	0	271,401
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	4,046,613	0	0	0	4,046,613

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	4	3,401,500	0	0	0	0	0	0	4	3,401,500
17. Incurred during current year	8	3,773,077	0	0	0	0	0	0	8	3,773,077
Settled during current year:										
18.1 By payment in full	8	4,523,077	0	0	0	0	0	0	8	4,523,077
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	8	4,523,077	0	0	0	0	0	0	8	4,523,077
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	8	4,523,077	0	0	0	0	0	0	8	4,523,077
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	4	2,651,500	0	0	0	0	0	0	4	2,651,500
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	4,344	3,027,792,852	0	(a) 0	0	0	0	0	4,344	3,027,792,852
21. Issued during year	838	508,809,017	0	0	0	0	0	0	838	508,809,017
22. Other changes to in force (Net)	(275)	(210,324,323)	0	0	0	0	0	0	(275)	(210,324,323)
23. In force December 31 of current year	4,907	3,326,277,546	0	(a) 0	0	0	0	0	4,907	3,326,277,546

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	341,750	342,230	0	703,672	686,699
25.2 Guaranteed renewable (b)	0	0	0	17,647	18,171
25.3 Non-renewable for stated reasons only (b)	23,830	23,863	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	365,580	366,093	0	721,319	704,870
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	365,580	366,093	0	721,319	704,870

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

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DIRECT BUSINESS IN THE STATE OF NEW MEXICO DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	2,538,021	0	0	0	2,538,021
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	2,538,021	0	0	0	2,538,021
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	210,000	0	0	0	210,000
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	51,455	0	0	0	51,455
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	261,455	0	0	0	261,455

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	1	200,000	0	0	0	0	0	0	1	200,000
17. Incurred during current year	2	210,000	0	0	0	0	0	0	2	210,000
Settled during current year:										
18.1 By payment in full	3	410,000	0	0	0	0	0	0	3	410,000
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	3	410,000	0	0	0	0	0	0	3	410,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	3	410,000	0	0	0	0	0	0	3	410,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	541	237,565,760	0	(a) 0	0	0	0	0	541	237,565,760
21. Issued during year	52	24,262,875	0	0	0	0	0	0	52	24,262,875
22. Other changes to in force (Net)	(33)	(966,754)	0	0	0	0	0	0	(33)	(966,754)
23. In force December 31 of current year	560	260,861,881	0	(a) 0	0	0	0	0	560	260,861,881

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	35,892	35,942	0	36,000	36,000
25.2 Guaranteed renewable (b)	479	480	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	36,371	36,422	0	36,000	36,000
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	36,371	36,422	0	36,000	36,000

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

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DIRECT BUSINESS IN THE STATE OF NEVADA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	1,524,893	0	0	0	1,524,893
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	1,524,893	0	0	0	1,524,893
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	500,000	0	0	0	500,000
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	2,721	0	0	0	2,721
12. Surrender values and withdrawals for life contracts	248,244	0	0	0	248,244
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	750,965	0	0	0	750,965

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	2	2,500,000	0	0	0	0	0	0	2	2,500,000
Settled during current year:										
18.1 By payment in full	2	2,500,000	0	0	0	0	0	0	2	2,500,000
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	2	2,500,000	0	0	0	0	0	0	2	2,500,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	2	2,500,000	0	0	0	0	0	0	2	2,500,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	868	561,648,873	0	(a) 0	0	0	0	0	868	561,648,873
21. Issued during year	146	125,145,854	0	0	0	0	0	0	146	125,145,854
22. Other changes to in force (Net)	(52)	(30,501,406)	0	0	0	0	0	0	(52)	(30,501,406)
23. In force December 31 of current year	962	656,293,321	0	(a) 0	0	0	0	0	962	656,293,321

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	49,735	49,805	0	0	0
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	49,735	49,805	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	49,735	49,805	0	0	0

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

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DIRECT BUSINESS IN THE STATE OF NEW YORK DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	1,123,541	0	0	0	1,123,541
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	1,123,541	0	0	0	1,123,541
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	5,000	0	0	0	5,000
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	78,876	0	0	0	78,876
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	83,876	0	0	0	83,876

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	(0)	0	0	0	0	0	0	0	(0)
17. Incurred during current year	1	5,000	0	0	0	0	0	0	1	5,000
Settled during current year:										
18.1 By payment in full	1	5,000	0	0	0	0	0	0	1	5,000
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	1	5,000	0	0	0	0	0	0	1	5,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	1	5,000	0	0	0	0	0	0	1	5,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	(0)	0	0	0	0	0	0	0	(0)
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	385	380,871,381	0	(a) 0	0	0	0	0	385	380,871,381
21. Issued during year	14	12,853,709	0	0	0	0	0	0	14	12,853,709
22. Other changes to in force (Net)	(2)	(4,995,000)	0	0	0	0	0	0	(2)	(4,995,000)
23. In force December 31 of current year	397	388,730,090	0	(a) 0	0	0	0	0	397	388,730,090

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	43,097	43,158	0	27,000	28,950
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	43,097	43,158	0	27,000	28,950
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	43,097	43,158	0	27,000	28,950

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

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DIRECT BUSINESS IN THE STATE OF OHIO DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	42,116,347	0	0	0	42,116,347
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	68,514	XXX	0	XXX	68,514
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	42,184,861	0	0	0	42,184,861
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	11,803,732	0	0	0	11,803,732
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	631,272	0	0	0	631,272
12. Surrender values and withdrawals for life contracts	12,947,036	0	0	0	12,947,036
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	25,382,040	0	0	0	25,382,040

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	33	1,701,616	0	0	0	0	0	0	33	1,701,616
17. Incurred during current year	91	12,075,146	0	0	0	0	0	0	91	12,075,146
Settled during current year:										
18.1 By payment in full	89	12,029,792	0	0	0	0	0	0	89	12,029,792
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	89	12,029,792	0	0	0	0	0	0	89	12,029,792
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	89	12,029,792	0	0	0	0	0	0	89	12,029,792
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	35	1,746,969	0	0	0	0	0	0	35	1,746,969
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	22,755	9,650,484,814	0	(a) 0	0	0	0	0	22,755	9,650,484,814
21. Issued during year	1,357	806,422,526	0	0	0	0	0	0	1,357	806,422,526
22. Other changes to in force (Net)	(1,442)	(693,289,807)	0	0	0	0	0	0	(1,442)	(693,289,807)
23. In force December 31 of current year	22,670	9,763,617,533	0	(a) 0	0	0	0	0	22,670	9,763,617,533

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	1,374,925	1,376,858	0	1,097,638	321,880
25.2 Guaranteed renewable (b)	52,917	52,991	0	9,000	9,320
25.3 Non-renewable for stated reasons only (b)	41,114	41,172	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	1,468,956	1,471,021	0	1,106,638	331,200
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,468,956	1,471,021	0	1,106,638	331,200

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

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DIRECT BUSINESS IN THE STATE OF OKLAHOMA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	4,734,764	0	0	0	4,734,764
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	4,734,764	0	0	0	4,734,764
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	440,000	0	0	0	440,000
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	3,500	0	0	0	3,500
12. Surrender values and withdrawals for life contracts	285,943	0	0	0	285,943
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	729,443	0	0	0	729,443
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	2	3,100,000	0	0	0	0	0	0	2	3,100,000
17. Incurred during current year	5	634,032	0	0	0	0	0	0	5	634,032
Settled during current year:										
18.1 By payment in full	4	434,032	0	0	0	0	0	0	4	434,032
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	4	434,032	0	0	0	0	0	0	4	434,032
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	4	434,032	0	0	0	0	0	0	4	434,032
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	3	3,300,000	0	0	0	0	0	0	3	3,300,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	3,119	1,375,880,548	0	(a) 0	0	0	0	0	3,119	1,375,880,548
21. Issued during year	289	186,206,299	0	0	0	0	0	0	289	186,206,299
22. Other changes to in force (Net)	(182)	(78,723,967)	0	0	0	0	0	0	(182)	(78,723,967)
23. In force December 31 of current year	3,226	1,483,362,880	0	(a) 0	0	0	0	0	3,226	1,483,362,880

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	130,579	130,762	0	36,000	36,000
25.2 Guaranteed renewable (b)	5,468	5,476	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	136,047	136,238	0	36,000	36,000
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	136,047	136,238	0	36,000	36,000

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

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DIRECT BUSINESS IN THE STATE OF OREGON DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	5,896,186	0	0	0	5,896,186
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	5,896,186	0	0	0	5,896,186
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	2,828,000	0	0	0	2,828,000
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	451,241	0	0	0	451,241
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	3,279,241	0	0	0	3,279,241
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	1	110,000	0	0	0	0	0	0	1	110,000
17. Incurred during current year	8	2,828,000	0	0	0	0	0	0	8	2,828,000
Settled during current year:										
18.1 By payment in full	9	2,938,000	0	0	0	0	0	0	9	2,938,000
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	9	2,938,000	0	0	0	0	0	0	9	2,938,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	9	2,938,000	0	0	0	0	0	0	9	2,938,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	3,533	1,845,297,127	0	(a) 0	0	0	0	0	3,533	1,845,297,127
21. Issued during year	451	265,043,689	0	0	0	0	0	0	451	265,043,689
22. Other changes to in force (Net)	(263)	(116,641,850)	0	0	0	0	0	0	(263)	(116,641,850)
23. In force December 31 of current year	3,721	1,993,698,966	0	(a) 0	0	0	0	0	3,721	1,993,698,966

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	236,640	236,972	0	80,779	80,891
25.2 Guaranteed renewable (b)	24,969	25,004	0	0	0
25.3 Non-renewable for stated reasons only (b)	22,175	22,206	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	283,784	284,182	0	80,779	80,891
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	283,784	284,182	0	80,779	80,891

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

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DIRECT BUSINESS IN OTHER ALIEN GRAND TOTAL DURING THE YEAR

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

LIFE INSURANCE

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

NONE

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

NONE

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	16,991,400	0	0	0	16,991,400
2. Annuity considerations	126,802	0	0	0	126,802
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	17,118,202	0	0	0	17,118,202
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	8,499,891	0	0	0	8,499,891
10. Matured endowments	12,000	0	0	0	12,000
11. Annuity benefits	1,080,080	0	0	0	1,080,080
12. Surrender values and withdrawals for life contracts	3,349,429	0	0	0	3,349,429
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	12,941,400	0	0	0	12,941,400
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	24	(619,813)	0	0	0	0	0	0	24	(619,813)
17. Incurred during current year	88	7,816,813	0	0	0	0	0	0	88	7,816,813
Settled during current year:										
18.1 By payment in full	111	4,297,000	0	0	0	0	0	0	111	4,297,000
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	111	4,297,000	0	0	0	0	0	0	111	4,297,000
18.4 Reduction by compromise	1	2,900,000	0	0	0	0	0	0	1	2,900,000
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	112	7,197,000	0	0	0	0	0	0	112	7,197,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	(0)	0	0	0	0	0	0	0	(0)
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	14,426	5,723,449,566	0	(a) 0	0	0	0	0	14,426	5,723,449,566
21. Issued during year	878	536,284,008	0	0	0	0	0	0	878	536,284,008
22. Other changes to in force (Net)	(855)	(310,069,078)	0	0	0	0	0	0	(855)	(310,069,078)
23. In force December 31 of current year	14,449	5,949,664,496	0	(a) 0	0	0	0	0	14,449	5,949,664,496

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	803,995	805,124	0	351,724	342,300
25.2 Guaranteed renewable (b)	131,434	131,619	0	49,754	80,614
25.3 Non-renewable for stated reasons only (b)	37,248	37,300	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	972,677	974,043	0	401,478	422,914
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	972,677	974,043	0	401,478	422,914

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

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DIRECT BUSINESS IN PUERTO RICO DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	4,315,952	0	0	0	4,315,952
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	4,315,952	0	0	0	4,315,952
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	4,055,178	0	0	0	4,055,178
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	111,378	0	0	0	111,378
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	4,166,556	0	0	0	4,166,556
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	2	4,055,178	0	0	0	0	0	0	2	4,055,178
Settled during current year:										
18.1 By payment in full	2	4,055,178	0	0	0	0	0	0	2	4,055,178
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	2	4,055,178	0	0	0	0	0	0	2	4,055,178
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	2	4,055,178	0	0	0	0	0	0	2	4,055,178
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	1,100	1,061,511,606	0	(a) 0	0	0	0	0	1,100	1,061,511,606
21. Issued during year	90	75,915,451	0	0	0	0	0	0	90	75,915,451
22. Other changes to in force (Net)	(54)	(41,131,678)	0	0	0	0	0	0	(54)	(41,131,678)
23. In force December 31 of current year	1,136	1,096,295,379	0	(a) 0	0	0	0	0	1,136	1,096,295,379

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	539,812	540,570	0	1,674	1,674
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	50,807	50,878	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	590,619	591,448	0	1,674	1,674
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	590,619	591,448	0	1,674	1,674

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

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DIRECT BUSINESS IN THE STATE OF RHODE ISLAND DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	2,377,815	0	0	0	2,377,815
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	2,377,815	0	0	0	2,377,815
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	2,840,000	0	0	0	2,840,000
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	91,031	0	0	0	91,031
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	2,931,031	0	0	0	2,931,031
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	3	971,909	0	0	0	0	0	0	3	971,909
17. Incurred during current year	6	2,840,000	0	0	0	0	0	0	6	2,840,000
Settled during current year:										
18.1 By payment in full	8	3,541,000	0	0	0	0	0	0	8	3,541,000
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	8	3,541,000	0	0	0	0	0	0	8	3,541,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	8	3,541,000	0	0	0	0	0	0	8	3,541,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	270,909	0	0	0	0	0	0	1	270,909
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	1,001	553,374,684	0	(a) 0	0	0	0	0	1,001	553,374,684
21. Issued during year	103	55,460,044	0	0	0	0	0	0	103	55,460,044
22. Other changes to in force (Net)	(67)	(28,489,213)	0	0	0	0	0	0	(67)	(28,489,213)
23. In force December 31 of current year	1,037	580,345,515	0	(a) 0	0	0	0	0	1,037	580,345,515

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	13,489	13,508	0	0	0
25.2 Guaranteed renewable (b)	2,133	2,136	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	15,622	15,644	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	15,622	15,644	0	0	0

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

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DIRECT BUSINESS IN THE STATE OF SOUTH CAROLINA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	5,222,499	0	0	0	5,222,499
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	5,222,499	0	0	0	5,222,499
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	1,937,252	0	0	0	1,937,252
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	11,505	0	0	0	11,505
12. Surrender values and withdrawals for life contracts	298,481	0	0	0	298,481
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	2,247,238	0	0	0	2,247,238

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	2	818,937	0	0	0	0	0	0	2	818,937
17. Incurred during current year	3	1,587,152	0	0	0	0	0	0	3	1,587,152
Settled during current year:										
18.1 By payment in full	4	1,906,089	0	0	0	0	0	0	4	1,906,089
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	4	1,906,089	0	0	0	0	0	0	4	1,906,089
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	4	1,906,089	0	0	0	0	0	0	4	1,906,089
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	500,000	0	0	0	0	0	0	1	500,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	2,799	1,361,370,107	0	(a) 0	0	0	0	0	2,799	1,361,370,107
21. Issued during year	284	135,847,725	0	0	0	0	0	0	284	135,847,725
22. Other changes to in force (Net)	(145)	(78,048,445)	0	0	0	0	0	0	(145)	(78,048,445)
23. In force December 31 of current year	2,938	1,419,169,387	0	(a) 0	0	0	0	0	2,938	1,419,169,387

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	70,478	70,577	0	67,570	66,289
25.2 Guaranteed renewable (b)	6,896	6,906	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	77,374	77,483	0	67,570	66,289
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	77,374	77,483	0	67,570	66,289

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

DIRECT BUSINESS IN THE STATE OF SOUTH DAKOTA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	501,326	0	0	0	501,326
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	501,326	0	0	0	501,326
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	275,000	0	0	0	275,000
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	76,797	0	0	0	76,797
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	351,797	0	0	0	351,797
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	1	40,000	0	0	0	0	0	0	1	40,000
17. Incurred during current year	2	275,000	0	0	0	0	0	0	2	275,000
Settled during current year:										
18.1 By payment in full	3	315,000	0	0	0	0	0	0	3	315,000
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	3	315,000	0	0	0	0	0	0	3	315,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	3	315,000	0	0	0	0	0	0	3	315,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	436	205,607,036	0	(a) 0	0	0	0	0	436	205,607,036
21. Issued during year	26	17,062,500	0	0	0	0	0	0	26	17,062,500
22. Other changes to in force (Net)	(27)	(22,636,156)	0	0	0	0	0	0	(27)	(22,636,156)
23. In force December 31 of current year	435	200,033,380	0	(a) 0	0	0	0	0	435	200,033,380

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	17,791	17,816	0	0	0
25.2 Guaranteed renewable (b)	845	847	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	18,636	18,663	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	18,636	18,663	0	0	0

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

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DIRECT BUSINESS IN THE STATE OF TENNESSEE DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	20,763,892	0	0	0	20,763,892
2. Annuity considerations	3,329	0	0	0	3,329
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	20,767,221	0	0	0	20,767,221
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	8,403,576	0	0	0	8,403,576
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	296,273	0	0	0	296,273
12. Surrender values and withdrawals for life contracts	4,152,738	0	0	0	4,152,738
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	12,852,587	0	0	0	12,852,587
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	1	335,800	0	0	0	0	0	0	1	335,800
17. Incurred during current year	20	8,149,361	0	0	0	0	0	0	20	8,149,361
Settled during current year:										
18.1 By payment in full	21	8,485,161	0	0	0	0	0	0	21	8,485,161
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	21	8,485,161	0	0	0	0	0	0	21	8,485,161
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	21	8,485,161	0	0	0	0	0	0	21	8,485,161
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	(0)	0	0	0	0	0	0	0	(0)
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	8,115	4,642,676,630	0	(a) 0	0	0	0	0	8,115	4,642,676,630
21. Issued during year	598	440,066,687	0	0	0	0	0	0	598	440,066,687
22. Other changes to in force (Net)	(472)	(290,653,515)	0	0	0	0	0	0	(472)	(290,653,515)
23. In force December 31 of current year	8,241	4,792,089,802	0	(a) 0	0	0	0	0	8,241	4,792,089,802

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	412,592	413,171	0	512,056	490,672
25.2 Guaranteed renewable (b)	12,320	12,337	0	0	0
25.3 Non-renewable for stated reasons only (b)	41,772	41,831	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	466,684	467,339	0	512,056	490,672
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	466,684	467,339	0	512,056	490,672

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

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DIRECT BUSINESS IN THE STATE OF TEXAS DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	47,384,997	0	0	0	47,384,997
2. Annuity considerations	113	0	0	0	113
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	47,385,110	0	0	0	47,385,110
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	22,611,237	0	0	0	22,611,237
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	65,000	0	0	0	65,000
12. Surrender values and withdrawals for life contracts	4,490,466	0	0	0	4,490,466
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	27,166,703	0	0	0	27,166,703

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	14	2,309,920	0	0	0	0	0	0	14	2,309,920
17. Incurred during current year	73	26,131,211	0	0	0	0	0	0	73	26,131,211
Settled during current year:										
18.1 By payment in full	76	27,756,211	0	0	0	0	0	0	76	27,756,211
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	76	27,756,211	0	0	0	0	0	0	76	27,756,211
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	76	27,756,211	0	0	0	0	0	0	76	27,756,211
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	11	684,920	0	0	0	0	0	0	11	684,920
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	17,536	10,374,303,503	0	(a) 0	0	0	0	0	17,536	10,374,303,503
21. Issued during year	1,859	1,316,868,502	0	0	0	0	0	0	1,859	1,316,868,502
22. Other changes to in force (Net)	(1,059)	(628,190,614)	0	0	0	0	0	0	(1,059)	(628,190,614)
23. In force December 31 of current year	18,336	11,062,981,391	0	(a) 0	0	0	0	0	18,336	11,062,981,391

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	1,170,980	1,172,625	0	1,313,821	1,323,843
25.2 Guaranteed renewable (b)	7,074	7,084	0	0	0
25.3 Non-renewable for stated reasons only (b)	21,240	21,269	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	1,199,294	1,200,978	0	1,313,821	1,323,843
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,199,294	1,200,978	0	1,313,821	1,323,843

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

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DIRECT BUSINESS IN THE STATE OF UTAH DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	5,299,472	0	0	0	5,299,472
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	5,299,472	0	0	0	5,299,472
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	2,360,000	0	0	0	2,360,000
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	109,806	0	0	0	109,806
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	2,469,806	0	0	0	2,469,806
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	2	350,000	0	0	0	0	0	0	2	350,000
17. Incurred during current year	7	2,360,000	0	0	0	0	0	0	7	2,360,000
Settled during current year:										
18.1 By payment in full	8	2,610,000	0	0	0	0	0	0	8	2,610,000
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	8	2,610,000	0	0	0	0	0	0	8	2,610,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	8	2,610,000	0	0	0	0	0	0	8	2,610,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	100,000	0	0	0	0	0	0	1	100,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	3,653	2,341,468,754	0	(a) 0	0	0	0	0	3,653	2,341,468,754
21. Issued during year	883	578,006,186	0	0	0	0	0	0	883	578,006,186
22. Other changes to in force (Net)	(265)	(145,226,844)	0	0	0	0	0	0	(265)	(145,226,844)
23. In force December 31 of current year	4,271	2,774,248,096	0	(a) 0	0	0	0	0	4,271	2,774,248,096

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	38,338	38,392	0	0	0
25.2 Guaranteed renewable (b)	5,326	5,334	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	43,664	43,726	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	43,664	43,726	0	0	0

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

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DIRECT BUSINESS IN THE STATE OF VIRGINIA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	12,713,720	0	0	0	12,713,720
2. Annuity considerations	6,255	0	0	0	6,255
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	12,719,975	0	0	0	12,719,975
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	6,220,285	0	0	0	6,220,285
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	99,854	0	0	0	99,854
12. Surrender values and withdrawals for life contracts	1,286,982	0	0	0	1,286,982
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	7,607,121	0	0	0	7,607,121
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	3	379,320	0	0	0	0	0	0	3	379,320
17. Incurred during current year	16	4,441,248	0	0	0	0	0	0	16	4,441,248
Settled during current year:										
18.1 By payment in full	19	4,820,568	0	0	0	0	0	0	19	4,820,568
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	19	4,820,568	0	0	0	0	0	0	19	4,820,568
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	19	4,820,568	0	0	0	0	0	0	19	4,820,568
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	6,699	3,884,385,917	0	(a) 0	0	0	0	0	6,699	3,884,385,917
21. Issued during year	720	526,002,562	0	0	0	0	0	0	720	526,002,562
22. Other changes to in force (Net)	(527)	(286,575,999)	0	0	0	0	0	0	(527)	(286,575,999)
23. In force December 31 of current year	6,892	4,123,812,480	0	(a) 0	0	0	0	0	6,892	4,123,812,480

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	338,057	338,533	0	758,873	749,265
25.2 Guaranteed renewable (b)	8,163	8,174	0	0	0
25.3 Non-renewable for stated reasons only (b)	7,301	7,311	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	353,521	354,018	0	758,873	749,265
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	353,521	354,018	0	758,873	749,265

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

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

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

LIFE INSURANCE

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

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

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

ACCIDENT AND HEALTH INSURANCE

NONE

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

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

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DIRECT BUSINESS IN THE STATE OF VERMONT DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	585,853	0	0	0	585,853
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	585,853	0	0	0	585,853
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	0	0	0	0	0
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	11,755	0	0	0	11,755
12. Surrender values and withdrawals for life contracts	54,583	0	0	0	54,583
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	66,338	0	0	0	66,338

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	448	224,251,049	0	(a) 0	0	0	0	0	448	224,251,049
21. Issued during year	68	25,285,000	0	0	0	0	0	0	68	25,285,000
22. Other changes to in force (Net)	(25)	(12,819,436)	0	0	0	0	0	0	(25)	(12,819,436)
23. In force December 31 of current year	491	236,716,613	0	(a) 0	0	0	0	0	491	236,716,613

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	4,676	4,682	0	0	0
25.2 Guaranteed renewable (b)	887	888	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	5,563	5,570	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	5,563	5,570	0	0	0

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

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DIRECT BUSINESS IN THE STATE OF WASHINGTON DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	7,607,813	0	0	0	7,607,813
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	7,607,813	0	0	0	7,607,813
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	1,333,175	0	0	0	1,333,175
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	53,323	0	0	0	53,323
12. Surrender values and withdrawals for life contracts	1,020,749	0	0	0	1,020,749
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	2,407,247	0	0	0	2,407,247

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	1	100,000	0	0	0	0	0	0	1	100,000
17. Incurred during current year	7	1,333,175	0	0	0	0	0	0	7	1,333,175
Settled during current year:										
18.1 By payment in full	8	1,433,175	0	0	0	0	0	0	8	1,433,175
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	8	1,433,175	0	0	0	0	0	0	8	1,433,175
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	8	1,433,175	0	0	0	0	0	0	8	1,433,175
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	5,435	2,904,281,965	0	(a) 0	0	0	0	0	5,435	2,904,281,965
21. Issued during year	679	493,206,363	0	0	0	0	0	0	679	493,206,363
22. Other changes to in force (Net)	(352)	(156,379,757)	0	0	0	0	0	0	(352)	(156,379,757)
23. In force December 31 of current year	5,762	3,241,108,571	0	(a) 0	0	0	0	0	5,762	3,241,108,571

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	344,070	344,553	0	1,346,506	962,868
25.2 Guaranteed renewable (b)	20,936	20,965	0	49,237	71,726
25.3 Non-renewable for stated reasons only (b)	28,373	28,413	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	393,379	393,931	0	1,395,743	1,034,594
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	393,379	393,931	0	1,395,743	1,034,594

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

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DIRECT BUSINESS IN THE STATE OF WISCONSIN DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	13,849,715	0	0	0	13,849,715
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	13,849,715	0	0	0	13,849,715
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	2,163,000	0	0	0	2,163,000
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	42,817	0	0	0	42,817
12. Surrender values and withdrawals for life contracts	1,070,150	0	0	0	1,070,150
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	3,275,967	0	0	0	3,275,967

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	8	375,030	0	0	0	0	0	0	8	375,030
17. Incurred during current year	6	2,013,000	0	0	0	0	0	0	6	2,013,000
Settled during current year:										
18.1 By payment in full	5	1,688,000	0	0	0	0	0	0	5	1,688,000
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	5	1,688,000	0	0	0	0	0	0	5	1,688,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	5	1,688,000	0	0	0	0	0	0	5	1,688,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	9	700,030	0	0	0	0	0	0	9	700,030
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	6,602	3,131,894,342	0	(a) 0	0	0	0	0	6,602	3,131,894,342
21. Issued during year	384	217,636,300	0	0	0	0	0	0	384	217,636,300
22. Other changes to in force (Net)	(534)	(227,584,261)	0	0	0	0	0	0	(534)	(227,584,261)
23. In force December 31 of current year	6,452	3,121,946,381	0	(a) 0	0	0	0	0	6,452	3,121,946,381

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	334,574	335,044	0	212,650	190,500
25.2 Guaranteed renewable (b)	34,961	35,010	0	5,978	2,202
25.3 Non-renewable for stated reasons only (b)	19,609	19,636	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	389,144	389,690	0	218,628	192,702
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	389,144	389,690	0	218,628	192,702

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

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DIRECT BUSINESS IN THE STATE OF WEST VIRGINIA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	1,418,277	0	0	0	1,418,277
2. Annuity considerations	5,400	0	0	0	5,400
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	1,423,677	0	0	0	1,423,677
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	1,038,704	0	0	0	1,038,704
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	7,626	0	0	0	7,626
12. Surrender values and withdrawals for life contracts	539,208	0	0	0	539,208
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	1,585,538	0	0	0	1,585,538

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	1	104,828	0	0	0	0	0	0	1	104,828
17. Incurred during current year	8	897,969	0	0	0	0	0	0	8	897,969
Settled during current year:										
18.1 By payment in full	9	1,002,797	0	0	0	0	0	0	9	1,002,797
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	9	1,002,797	0	0	0	0	0	0	9	1,002,797
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	9	1,002,797	0	0	0	0	0	0	9	1,002,797
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	1,241	414,873,619	0	(a) 0	0	0	0	0	1,241	414,873,619
21. Issued during year	60	17,869,263	0	0	0	0	0	0	60	17,869,263
22. Other changes to in force (Net)	(106)	(38,335,627)	0	0	0	0	0	0	(106)	(38,335,627)
23. In force December 31 of current year	1,195	394,407,255	0	(a) 0	0	0	0	0	1,195	394,407,255

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	264,350	264,722	0	395,370	399,787
25.2 Guaranteed renewable (b)	3,241	3,246	0	0	0
25.3 Non-renewable for stated reasons only (b)	2,033	2,036	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	269,624	270,004	0	395,370	399,787
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	269,624	270,004	0	395,370	399,787

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

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DIRECT BUSINESS IN THE STATE OF WYOMING DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	940,546	0	0	0	940,546
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	940,546	0	0	0	940,546
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	1,578,000	0	0	0	1,578,000
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	9,136	0	0	0	9,136
12. Surrender values and withdrawals for life contracts	24,769	0	0	0	24,769
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	1,611,905	0	0	0	1,611,905

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	3	550,000	0	0	0	0	0	0	3	550,000
Settled during current year:										
18.1 By payment in full	3	550,000	0	0	0	0	0	0	3	550,000
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	3	550,000	0	0	0	0	0	0	3	550,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	3	550,000	0	0	0	0	0	0	3	550,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	778	307,933,633	0	(a) 0	0	0	0	0	778	307,933,633
21. Issued during year	91	55,320,000	0	0	0	0	0	0	91	55,320,000
22. Other changes to in force (Net)	(50)	(34,306,339)	0	0	0	0	0	0	(50)	(34,306,339)
23. In force December 31 of current year	819	328,947,294	0	(a) 0	0	0	0	0	819	328,947,294

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (group and individual)	0	0	0	0	0
24.3 Collectively renewable policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	32,019	32,064	0	0	0
25.2 Guaranteed renewable (b)	866	868	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	32,885	32,932	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	32,885	32,932	0	0	0

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

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

Interest Maintenance Reserve

	1 Amount
1. Reserve as of December 31, prior year	12,854,358
2. Current year's realized pre-tax capital gains/(losses) of $.....(313,386) transferred into the reserve net of taxes of $.....(109,685)	(203,701)
3. Adjustment for current year's liability gains/(losses) released from the reserve	0
4. Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3)	12,650,657
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)	2,505,183
6. Reserve as of December 31, current year (Line 4 minus Line 5)	10,145,475

Amortization

Year of Amortization	1 Reserve as of December 31, Prior Year	2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3 Adjustment for Current Year's Liability Gains/(Losses) Released from the Reserve	4 Balance Before Reduction for the Current Year's Amortization (Cols. 1 + 2 + 3)
1. 2013	2,400,659	104,523	0	2,505,183
2. 2014	2,079,227	76,610	0	2,155,837
3. 2015	1,693,892	(52,919)	0	1,640,973
4. 2016	1,306,582	(55,599)	0	1,250,983
5. 2017	1,043,003	(58,745)	0	984,258
6. 2018	924,448	(60,940)	0	863,507
7. 2019	827,608	(57,124)	0	770,484
8. 2020	695,602	(45,392)	0	650,210
9. 2021	538,685	(32,724)	0	505,960
10. 2022	413,335	(20,066)	0	393,269
11. 2023	301,439	(6,471)	0	294,967
12. 2024	209,900	589	0	210,490
13. 2025	160,500	619	0	161,119
14. 2026	110,720	639	0	111,359
15. 2027	55,368	688	0	56,056
16. 2028	14,072	707	0	14,779
17. 2029	(3,103)	668	0	(2,435)
18. 2030	(7,178)	530	0	(6,647)
19. 2031	(4,563)	383	0	(4,180)
20. 2032	1,910	246	0	2,156
21. 2033	6,090	79	0	6,169
22. 2034	10,318	0	0	10,318
23. 2035	12,422	0	0	12,422
24. 2036	13,252	0	0	13,252
25. 2037	13,710	0	0	13,710
26. 2038	12,733	0	0	12,733
27. 2039	10,080	0	0	10,080
28. 2040	7,426	0	0	7,426
29. 2041	4,783	0	0	4,783
30. 2042	1,435	0	0	1,435
31. 2043 and Later	0	0	0	0
32. Total (Lines 1 to 31)	12,854,358	(203,701)	0	12,650,657

ASSET VALUATION RESERVE

	Default Component			Equity Component			7
	1 Other Than Mortgage Loans	2 Mortgage Loans	3 Total (Cols. 1 + 2)	4 Common Stock	5 Real Estate and Other Invested Assets	6 Total (Cols. 4 + 5)	Total Amount (Cols. 3 + 6)
1. Reserve as of December 31, prior year	11,011,408	3,800,055	14,811,463	5,380,758	65,892	5,446,650	20,258,113
2. Realized capital gains/(losses) net of taxes - General Account	(467,956)	(94,675)	(562,631)	0	0	0	(562,631)
3. Realized capital gains/(losses) net of taxes - Separate Accounts	0	0	0	0	0	0	0
4. Unrealized capital gains/(losses) - net of deferred taxes - General Account	(65,806)	0	(65,806)	5,855	0	5,855	(59,951)
5. Unrealized capital gains/(losses) - net of deferred taxes - Separate Accounts	0	0	0	0	0	0	0
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves	0	0	0	0	0	0	0
7. Basic contribution	3,863,270	1,371,657	5,234,927	0	0	0	5,234,927
8. Accumulated balances (Lines 1 through 5, minus 6 plus 7)	14,340,916	5,077,037	19,417,952	5,386,613	65,892	5,452,505	24,870,458
9. Maximum reserve	18,480,425	5,094,725	23,575,151	12,629,687	32,006	12,661,694	36,236,844
10. Reserve objective	12,803,280	3,919,020	16,722,300	12,629,687	32,006	12,661,694	29,383,993
11. 20% of (Line 10 minus Line 8)	(307,527)	(231,603)	(539,131)	1,448,615	(6,777)	1,441,838	902,707
12. Balance before transfers (Lines 8 + 11)	14,033,388	4,845,433	18,878,822	6,835,228	59,115	6,894,343	25,773,165
13. Transfers	0	0	0	27,109	(27,109)	0	XXX
14. Voluntary contribution	0	0	0	0	0	0	0
15. Adjustment down to maximum/up to zero	0	0	0	0	0	0	0
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	14,033,388	4,845,433	18,878,822	6,862,337	32,006	6,894,343	25,773,165

ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

			1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
							5	6	7	8	9	10
Line Number	NAIC Desig-nation	Description	Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Factor	Amount (Cols. 4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
		LONG-TERM BONDS										
1		Exempt obligations	69,422,376	XXX	XXX	69,422,376	0.0000	0	0.0000	0	0.0000	0
2	1	Highest quality	1,202,058,163	XXX	XXX	1,202,058,163	0.0004	480,823	0.0023	2,764,734	0.0030	3,606,174
3	2	High quality	862,071,410	XXX	XXX	862,071,410	0.0019	1,637,936	0.0058	5,000,014	0.0090	7,758,643
4	3	Medium quality	98,733,955	XXX	XXX	98,733,955	0.0093	918,226	0.0230	2,270,881	0.0340	3,356,954
5	4	Low quality	21,312,558	XXX	XXX	21,312,558	0.0213	453,957	0.0530	1,129,566	0.0750	1,598,442
6	5	Lower quality	8,224,303	XXX	XXX	8,224,303	0.0432	355,290	0.1100	904,673	0.1700	1,398,132
7	6	In or near default	3,391,286	XXX	XXX	3,391,286	0.0000	0	0.2000	678,257	0.2000	678,257
8		Total unrated multi-class securities acquired by conversion	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
9		Total bonds (sum of Lines 1 through 8)	2,265,214,051	XXX	XXX	2,265,214,051	XXX	3,846,232	XXX	12,748,125	XXX	18,396,602
		PREFERRED STOCKS										
10	1	Highest quality	3,000,000	XXX	XXX	3,000,000	0.0004	1,200	0.0023	6,900	0.0030	9,000
11	2	High quality	8,250,000	XXX	XXX	8,250,000	0.0019	15,675	0.0058	47,850	0.0090	74,250
12	3	Medium quality	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
13	4	Low quality	7,641	XXX	XXX	7,641	0.0213	163	0.0530	405	0.0750	573
14	5	Lower quality	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
15	6	In or near default	0	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
16		Affiliated life with AVR	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
17		Total preferred stocks (sum of Lines 10 through 16)	11,257,641	XXX	XXX	11,257,641	XXX	17,038	XXX	55,155	XXX	83,823
		SHORT-TERM BONDS										
18		Exempt obligations	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
19	1	Highest quality	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
20	2	High quality	0	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
21	3	Medium quality	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
22	4	Low quality	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
23	5	Lower quality	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
24	6	In or near default	0	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
25		Total short-term bonds (sum of Lines 18 thru 24)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0

ASSET VALUATION RESERVE (continued)

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution 5 Factor	Basic Contribution 6 Amount (Cols. 4 x 5)	Reserve Objective 7 Factor	Reserve Objective 8 Amount (Cols. 4 x 7)	Maximum Reserve 9 Factor	Maximum Reserve 10 Amount (Cols. 4 x 9)
		DERIVATIVE INSTRUMENTS										
26		Exchange-traded	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
27	1	Highest quality	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
28	2	High quality	0	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
29	3	Medium quality	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
30	4	Low quality	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
31	5	Lower quality	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
32	6	In or near default	0	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
33		Total derivative instruments	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
34		TOTAL (Lines 9 + 17 + 25 + 33)	2,276,471,692	XXX	XXX	2,276,471,692	XXX	3,863,270	XXX	12,803,280	XXX	18,480,425
		MORTGAGE LOANS										
		In good standing:										
35		Farm mortgages	0	0	XXX	0	0.0035	0	0.0100	0	0.0130	0
36		Residential mortgages-insured or guaranteed	0	0	XXX	0	0.0003	0	0.0006	0	0.0010	0
37		Residential mortgages-all other	0	0	XXX	0	0.0013	0	0.0030	0	0.0040	0
38		Commercial mortgages-insured or guaranteed	0	0	XXX	0	0.0003	0	0.0006	0	0.0010	0
39		Commercial mortgages-all other	391,901,955	0	XXX	391,901,955	0.0035	1,371,657	0.0100	3,919,020	0.0130	5,094,725
40		In good standing with restructured terms	0	0	XXX	0	0.0035	0	0.0100	0	0.0130	0
		Overdue, not in process:										
41		Farm mortgages	0	0	XXX	0	0.0420	0	0.0760	0	0.1200	0
42		Residential mortgages-insured or guaranteed	0	0	XXX	0	0.0005	0	0.0012	0	0.0020	0
43		Residential mortgages-all other	0	0	XXX	0	0.0025	0	0.0058	0	0.0090	0
44		Commercial mortgages-insured or guaranteed	0	0	XXX	0	0.0005	0	0.0012	0	0.0020	0
45		Commercial mortgages-all other	0	0	XXX	0	0.0420	0	0.0760	0	0.1200	0
		In process of foreclosure:										
46		Farm mortgages	0	0	XXX	0	0.0000	0	0.1700	0	0.1700	0
47		Residential mortgages-insured or guaranteed	0	0	XXX	0	0.0000	0	0.0040	0	0.0040	0
48		Residential mortgages-all other	0	0	XXX	0	0.0000	0	0.0130	0	0.0130	0
49		Commercial mortgages-insured or guaranteed	0	0	XXX	0	0.0000	0	0.0040	0	0.0040	0
50		Commercial mortgages-all other	0	0	XXX	0	0.0000	0	0.1700	0	0.1700	0
51		Total Schedule B mortgages (sum of Lines 35 through 50)	391,901,955	0	XXX	391,901,955	XXX	1,371,657	XXX	3,919,020	XXX	5,094,725
52		Schedule DA mortgages	0	0	XXX	0	0.0030	0	0.0100	0	0.0130	0
53		Total mortgage loans on real estate (Lines 51 + 52)	391,901,955	0	XXX	391,901,955	XXX	1,371,657	XXX	3,919,020	XXX	5,094,725

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 (Cols. 1 + 2 + 3)	Basic Contribution 5 Factor	Basic Contribution 6 Amount (Cols. 4 x 5)	Reserve Objective 7 Factor	Reserve Objective 8 Amount (Cols. 4 x 7)	Maximum Reserve 9 Factor	Maximum Reserve 10 Amount (Cols. 4 x 9)
		COMMON STOCK										
1		Unaffiliated public	116,188	XXX	XXX	116,188	0.0000	0	(a) 0.2000	23,238	(a) 0.2000	23,238
2		Unaffiliated private	78,790,310	XXX	XXX	78,790,310	0.0000	0	0.1600	12,606,450	0.1600	12,606,450
3		Federal Home Loan Bank	0	XXX	XXX	0	0.0000	0	0.0050	0	0.0080	0
4		Affiliated life with AVR	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
		Affiliated Investment Subsidiary:										
5		Fixed income exempt obligations	0	0	0	0	XXX	0	XXX	0	XXX	0
6		Fixed income highest quality	0	0	0	0	XXX	0	XXX	0	XXX	0
7		Fixed income high quality	0	0	0	0	XXX	0	XXX	0	XXX	0
8		Fixed income medium quality	0	0	0	0	XXX	0	XXX	0	XXX	0
9		Fixed income low quality	0	0	0	0	XXX	0	XXX	0	XXX	0
10		Fixed income lower quality	0	0	0	0	XXX	0	XXX	0	XXX	0
11		Fixed income in or near default	0	0	0	0	XXX	0	XXX	0	XXX	0
12		Unaffiliated common stock public	0	0	0	0	0.0000	0	(a) 0.0000	0	(a) 0.0000	0
13		Unaffiliated common stock private	0	0	0	0	0.0000	0	0.1600	0	0.1600	0
14		Mortgage loans	0	0	0	0	0.0030	0	0.0100	0	0.0130	0
15		Real estate	0	0	0	0	(b) 0.0000	0	(b) 0.0000	0	(b) 0.0000	0
16		Affiliated - certain other (see SVO Purposes and Procedures manual)	0	XXX	XXX	0	0.0000	0	0.1300	0	0.1300	0
17		Affiliated - all other	0	XXX	XXX	0	0.0000	0	0.1600	0	0.1600	0
18		Total common stock (sum of Lines 1 through 17)	78,906,498	0	0	78,906,498	XXX	0	XXX	12,629,687	XXX	12,629,687
		REAL ESTATE										
19		Home office property (General Account only)	0	0	0	0	0.0000	0	0.0750	0	0.0750	0
20		Investment properties	0	0	0	0	0.0000	0	0.0750	0	0.0750	0
21		Properties acquired in satisfaction of debt	0	0	0	0	0.0000	0	0.1100	0	0.1100	0
22		Total real estate (sum of Lines 19 through 21)	0	0	0	0	XXX	0	XXX	0	XXX	0
		OTHER INVESTED ASSETS										
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS										
23		Exempt obligations	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
24	1	Highest quality	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
25	2	High quality	0	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
26	3	Medium quality	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
27	4	Low quality	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
28	5	Lower quality	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
29	6	In or near default	0	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
30		Total with bond characteristics (sum of Lines 23 through 29)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0

ASSET VALUATION RESERVE (continued)

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Equity and Other Invested Asset Component

NONE

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution 5 Factor	Basic Contribution 6 Amount (Cols. 4 x 5)	Reserve Objective 7 Factor	Reserve Objective 8 Amount (Cols. 4 x 7)	Maximum Reserve 9 Factor	Maximum Reserve 10 Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS										
31	1	Highest quality	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
32	2	High quality	0	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
33	3	Medium quality	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
34	4	Low quality	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
35	5	Lower quality	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
36	6	In or near default	0	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
37		Affiliated life with AVR	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
38		Total with preferred stock characteristics (sum of Lines 31 through 37)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS										
		In Good Standing:										
39		Farm mortgages	0	0	XXX	0	0.0030	0	0.0100	0	0.0130	0
40		Residential mortgages-insured or guaranteed	0	0	XXX	0	0.0003	0	0.0006	0	0.0010	0
41		Residential mortgages-all other	0	XXX	XXX	0	0.0013	0	0.0030	0	0.0040	0
42		Commercial mortgages-insured or guaranteed	0	0	XXX	0	0.0003	0	0.0006	0	0.0010	0
43		Commercial mortgages-all other	0	0	XXX	0	0.0030	0	0.0100	0	0.0130	0
44		In good standing with restructured terms	0	0	XXX	0	0.0030	0	0.0100	0	0.0130	0
		Overdue, Not in Process:										
45		Farm mortgages	0	0	XXX	0	0.0420	0	0.0760	0	0.1200	0
46		Residential mortgages-insured or guaranteed	0	0	XXX	0	0.0005	0	0.0012	0	0.0020	0
47		Residential mortgages-all other	0	0	XXX	0	0.0025	0	0.0058	0	0.0090	0
48		Commercial mortgages-insured or guaranteed	0	0	XXX	0	0.0005	0	0.0012	0	0.0020	0
49		Commercial mortgages-all other	0	0	XXX	0	0.0420	0	0.0760	0	0.1200	0
		In Process of foreclosure:										
50		Farm mortgages	0	0	XXX	0	0.0000	0	0.1700	0	0.1700	0
51		Residential mortgages-insured or guaranteed	0	0	XXX	0	0.0000	0	0.0040	0	0.0040	0
52		Residential mortgages-all other	0	0	XXX	0	0.0000	0	0.0130	0	0.0130	0
53		Commercial mortgages-insured or guaranteed	0	0	XXX	0	0.0000	0	0.0040	0	0.0040	0
54		Commercial mortgages-all other	0	0	XXX	0	0.0000	0	0.1700	0	0.1700	0
55		Total with mortgage loan characteristics (sum of Lines 39 through 54)	0	0	XXX	0	XXX	0	XXX	0	XXX	0

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 (Cols. 1 + 2 + 3)	Basic Contribution 5 Factor	Basic Contribution 6 Amount (Cols. 4 x 5)	Reserve Objective 7 Factor	Reserve Objective 8 Amount (Cols. 4 x 7)	Maximum Reserve 9 Factor	Maximum Reserve 10 Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK										
56		Unaffiliated public	0	XXX	XXX	0	0.0000	0	(a) 0.0000	0	(a) 0.0000	0
57		Unaffiliated private	200,040	XXX	XXX	200,040	0.0000	0	0.1600	32,006	0.1600	32,006
58		Affiliated life with AVR	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
59		Affiliated certain other (see SVO Purposes and Procedures manual)	0	XXX	XXX	0	0.0000	0	0.1300	0	0.1300	0
60		Affiliated other - all other	0	XXX	XXX	0	0.0000	0	0.1600	0	0.1600	0
61		Total with common stock characteristics (sum of Lines 56 through 60)	200,040	XXX	XXX	200,040	XXX	0	XXX	32,006	XXX	32,006
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE										
62		Home office property (general account only)	0	0	0	0	0.0000	0	0.0750	0	0.0750	0
63		Investment properties	0	0	0	0	0.0000	0	0.0750	0	0.0750	0
64		Properties acquired in satisfaction of debt	0	0	0	0	0.0000	0	0.1100	0	0.1100	0
65		Total with real estate characteristics (Lines 62 through 64)	0	0	0	0	XXX	0	XXX	0	XXX	0
		LOW INCOME HOUSING TAX CREDIT INVESTMENTS										
66		Guaranteed federal low income housing tax credit	0	0	0	0	0.0003	0	0.0006	0	0.0010	0
67		Non-guaranteed federal low income housing tax credit	0	0	0	0	0.0063	0	0.0120	0	0.0190	0
68		Guaranteed state low income housing tax credit	0	0	0	0	0.0003	0	0.0006	0	0.0010	0
69		Non-guaranteed state low income housing tax credit	0	0	0	0	0.0063	0	0.0120	0	0.0190	0
70		All other low income housing tax credit	0	0	0	0	0.0273	0	0.0600	0	0.0975	0
71		Total LIHTC	0	0	0	0	XXX	0	XXX	0	XXX	0
		ALL OTHER INVESTMENTS										
72		NAIC 1 working capital finance investments	0	XXX	0	0	0.0000	0	0.0037	0	0.0037	0
73		NAIC 2 working capital finance investments	0	XXX	0	0	0.0000	0	0.0120	0	0.0120	0
74		Other invested assets - Schedule BA	0	XXX	0	0	0.0000	0	0.1300	0	0.1300	0
75		Other short-term invested assets - Schedule DA	0	XXX	0	0	0.0000	0	0.1300	0	0.1300	0
76		Total all other (sum of Lines 72, 73, 74 and 75)	0	XXX	0	0	XXX	0	XXX	0	XXX	0
77		Total other invested assets - Schedule BA & DA (Sum of Lines 30, 38, 55, 61, 65, 71 and 76)	200,040	0	0	200,040	XXX	0	XXX	32,006	XXX	32,006

(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.

ASSET VALUATION RESERVE (continued)

Basic Contributions, Reserve Objective and Maximum Reserve Calculations

Replications (Synthetic) Assets

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

NONE

SCHEDULE F

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

1 Contract Numbers	2 Claim Numbers	3 State of Residence of Claimant	4 Year of Claim for Death or Disability	5 Amount Claimed	6 Amount Paid During the Year	7 Amount Resisted Dec. 31 of Current Year	8 Why Compromised or Resisted
CLAIMS DISPOSED OF DURING CURRENT YEAR							
Death Claims - Ordinary							
6901443	6893	FL	2010	1,000,000	1,000	0	Settlement of litigation
6824089	6605	PA	2010	2,900,000	21,000	0	Settlement of litigation
0199999. Death Claims - Ordinary				3,900,000	22,000	0	XXX
0599999. Subtotal - Disposed Death Claims				3,900,000	22,000	0	XXX
2699999. Subtotal - Claims Disposed of During Current Year				3,900,000	22,000	0	XXX
5399999. Totals				3,900,000	22,000	0	XXX

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

	Total		Group Accident and Health		Credit Accident and Health (Group and Individual)		Collectively Renewable		Other Individual Contracts									
									Non-Cancelable		Guaranteed Renewable		Non-Renewable for Stated Reasons Only		Other Accident Only		All Other	
	1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %	15 Amount	16 %	17 Amount	18 %
PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS																		
1. Premiums written	4,963,494	XXX	0	XXX	0	XXX	0	XXX	4,198,913	XXX	620,421	XXX	144,160	XXX	0	XXX	0	XXX
2. Premiums earned	4,890,724	XXX	0	XXX	0	XXX	0	XXX	4,120,640	XXX	618,316	XXX	151,768	XXX	0	XXX	0	XXX
3. Incurred claims	2,660,039	54.4	0	0.0	0	0.0	0	0.0	2,467,114	59.9	257,076	41.6	(64,151)	(42.3)	0	0.0	0	0.0
4. Cost containment expenses	151,421	3.1	0	0.0	0	0.0	0	0.0	147,208	3.6	3,902	0.6	311	0.2	0	0.0	0	0.0
5. Incurred claims and cost containment expenses (Lines 3 and 4)	2,811,460	57.5	0	0.0	0	0.0	0	0.0	2,614,322	63.4	260,978	42.2	(63,840)	(42.1)	0	0.0	0	0.0
6 Increase in contract reserves	(713,079)	(14.6)	0	0.0	0	0.0	0	0.0	(751,905)	(18.2)	2,277	0.4	36,549	24.1	0	0.0	0	0.0
7 Commissions (a)	(884,591)	(18.1)	0	0.0	0	0.0	0	0.0	(878,208)	(21.3)	21,872	3.5	(28,255)	(18.6)	0	0.0	0	0.0
8 Other general insurance expenses	4,121,557	84.3	0	0.0	0	0.0	0	0.0	3,813,601	92.5	185,821	30.1	122,135	80.5	0	0.0	0	0.0
9 Taxes, licenses and fees	298,277	6.1	0	0.0	0	0.0	0	0.0	275,990	6.7	13,448	2.2	8,839	5.8	0	0.0	0	0.0
10 Total other expenses incurred	3,535,243	72.3	0	0.0	0	0.0	0	0.0	3,211,383	77.9	221,141	35.8	102,719	67.7	0	0.0	0	0.0
11. Aggregate write-ins for deductions	3,616,447	73.9	0	0.0	0	0.0	0	0.0	3,445,955	83.6	170,492	27.6	0	0.0	0	0.0	0	0.0
12. Gain from underwriting before dividends or refunds	(4,359,347)	(89.1)	0	0.0	0	0.0	0	0.0	(4,399,115)	(106.8)	(36,572)	(5.9)	76,340	50.3	0	0.0	0	0.0
13. Dividends or refunds	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
14. Gain from underwriting after dividends or refunds	(4,359,347)	(89.1)	0	0.0	0	0.0	0	0.0	(4,399,115)	(106.8)	(36,572)	(5.9)	76,340	50.3	0	0.0	0	0.0
DETAILS OF WRITE-INS																		
1101. Surrender and Return of Premium Benefits	3,616,447	73.9	0	0.0	0	0.0	0	0.0	3,445,955	83.6	170,492	27.6	0	0.0	0	0.0	0	0.0
1102.	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1103.	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1199. Total (Lines 1101 thru 1103 plus 1198) (Line 11 above)	3,616,447	73.9	0	0.0	0	0.0	0	0.0	3,445,955	83.6	170,492	27.6	0	0.0	0	0.0	0	0.0

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

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (continued)

PART 2 - RESERVES AND LIABILITIES

	1	2	3	4	Other Individual Contracts				
	Total	Group Accident and Health	Credit Accident and Health (Group and Individual)	Collectively Renewable	5 Non-Cancelable	6 Guaranteed Renewable	7 Non-Renewable for Stated Reasons Only	8 Other Accident Only	9 All Other
A. Premium Reserves:									
1. Unearned premiums	(1,265,534)	0	0	0	(1,259,313)	47,059	(53,280)	0	0
2. Advance premiums	125,543	0	0	0	117,614	6,668	1,261	0	0
3. Reserve for rate credits	0	0	0	0	0	0	0	0	0
4. Total premium reserves, current year	(1,139,991)	0	0	0	(1,141,699)	53,727	(52,019)	0	0
5. Total premium reserves, prior year	(1,212,760)	0	0	0	(1,219,972)	51,622	(44,410)	0	0
6. Increase in total premium reserves	72,769	0	0	0	78,273	2,105	(7,609)	0	0
B. Contract Reserves:									
1. Additional reserves (a)	24,790,829	0	0	0	21,594,428	2,862,421	333,980	0	0
2. Reserve for future contingent benefits	0	0	0	0	0	0	0	0	0
3. Total contract reserves, current year	24,790,829	0	0	0	21,594,428	2,862,421	333,980	0	0
4. Total contract reserves, prior year	25,503,908	0	0	0	22,346,333	2,860,144	297,431	0	0
5. Increase in contract reserves	(713,079)	0	0	0	(751,905)	2,277	36,549	0	0
C. Claim Reserves and Liabilities:									
1. Total current year	21,017,573	0	0	0	20,170,928	803,847	42,798	0	0
2. Total prior year	21,285,211	0	0	0	20,427,719	748,571	108,921	0	0
3. Increase	(267,638)	0	0	0	(256,791)	55,276	(66,123)	0	0

PART 3 - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES

1. Claims Paid During the Year:									
1.1 On claims incurred prior to current year	2,850,920	0	0	0	2,684,604	164,343	1,973	0	0
1.2 On claims incurred during current year	76,759	0	0	0	39,302	37,457	0	0	0
2. Claim Reserves and Liabilities, December 31, Current Year:									
2.1 On claims incurred prior to current year	19,209,180	0	0	0	18,824,545	384,635	0	0	0
2.2 On claims incurred during current year	1,808,393	0	0	0	1,346,383	419,212	42,798	0	0
3. Test:									
3.1 Lines 1.1 and 2.1	22,060,100	0	0	0	21,509,149	548,978	1,973	0	0
3.2 Claim reserves and liabilities, December 31, prior year	21,285,211	0	0	0	20,427,719	748,571	108,921	0	0
3.3 Line 3.1 minus Line 3.2	774,889	0	0	0	1,081,430	(199,593)	(106,948)	0	0

PART 4 - REINSURANCE

A. Reinsurance Assumed:									
1. Premiums written	720,660	0	0	0	638,595	81,249	816	0	0
2. Premiums earned	747,423	0	0	0	664,768	81,489	1,166	0	0
3. Incurred claims	949,294	0	0	0	712,961	237,084	(751)	0	0
4. Commissions	113,675	0	0	0	108,988	4,687	0	0	0
B. Reinsurance Ceded:									
1. Premiums written	13,490,310	0	0	0	12,846,660	261,940	381,710	0	0
2. Premiums earned	13,265,887	0	0	0	12,623,605	263,182	379,100	0	0
3. Incurred claims	15,293,321	0	0	0	14,925,308	419,821	(51,808)	0	0
4. Commissions	2,983,849	0	0	0	2,828,212	45,153	110,484	0	0

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

SCHEDULE H - PART 5 - HEALTH CLAIMS

	1 Medical	2 Dental	3 Other	4 Total
A. Direct:				
1. Incurred claims	0	0	17,004,067	17,004,067
2. Beginning claim reserves and liabilities	0	0	166,976,622	166,976,622
3. Ending claim reserves and liabilities	0	0	162,541,968	162,541,968
4. Claims paid	0	0	21,438,721	21,438,721
B. Assumed Reinsurance:				
5. Incurred claims	0	0	949,294	949,294
6. Beginning claim reserves and liabilities	0	0	8,513,061	8,513,061
7. Ending claim reserves and liabilities	0	0	8,129,391	8,129,391
8. Claims paid	0	0	1,332,964	1,332,964
C. Ceded Reinsurance:				
9. Incurred claims	0	0	15,293,321	15,293,321
10. Beginning claim reserves and liabilities	0	0	156,892,480	156,892,480
11. Ending claim reserves and liabilities	0	0	152,788,348	152,788,348
12. Claims paid	0	0	19,397,453	19,397,453
D. Net:				
13. Incurred claims	0	0	2,660,040	2,660,040
14. Beginning claim reserves and liabilities	0	0	18,597,203	18,597,203
15. Ending claim reserves and liabilities	0	0	17,883,011	17,883,011
16. Claims paid	0	0	3,374,232	3,374,232
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred claims and cost containment expenses	0	0	2,811,460	2,811,460
18. Beginning reserves and liabilities	0	0	18,605,453	18,605,453
19. Ending reserves and liabilities	0	0	17,884,259	17,884,259
20. Paid claims and cost containment expenses	0	0	3,532,654	3,532,654

SCHEDULE S - PART 1 - SECTION 1

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Amount of In Force at End of Year	8 Reserve	9 Premiums	10 Reinsurance Payable on Paid and Unpaid Losses	11 Modified Coinsurance Reserve	12 Funds Withheld Under Coinsurance

NONE

SCHEDULE S - PART 1 - SECTION 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Premiums	8 Unearned Premiums	9 Reserve Liability Other Than for Unearned Premiums	10 Reinsurance Payable on Paid and Unpaid Losses	11 Modified Coinsurance Reserve	12 Funds Withheld Under Coinsurance
Non-Affiliates - U.S. Non-Affiliates											
61301	47-0098400	05/01/1985	Ameritas Life Insurance Corporation	NE	CO/I	237,932	17,915	3,570,571	29,164	0	0
64017	75-0300900	11/23/1987	Conseco Variable Insurance Company	TX	CO/I	319,482	41,417	4,830,614	62,922	0	0
57320	47-0339250	09/09/1990	Woodmen of the World	NE	CO/I	157,120	5,987	2,004,456	36,850	0	0
0899999.	Total - Non-Affiliates - U.S. Non-Affiliates					714,534	65,319	10,405,641	128,936	0	0
1099999.	Total - Non-Affiliates					714,534	65,319	10,405,641	128,936	0	0
1199999.	Total - U.S.					714,534	65,319	10,405,641	128,936	0	0
9999999.	Total					714,534	65,319	10,405,641	128,936	0	0

SCHEDULE S - PART 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 Unpaid Losses
Life and Annuity - Affiliates - U.S. - Captive						
13575	26-3791519	12/31/2008	Montgomery Re	VT	150,000	0
13575	26-3791519	06/30/2009	Montgomery Re	VT	100,000	886,358
13575	26-3791519	05/01/2011	Montgomery Re	VT	150,000	3,397,888
13575	26-3791519	07/01/2012	Montgomery Re	VT	0	1,456,160
0	26-3791519	12/31/2012	Montgomery Re	VT	700,000	1,519,471
0199999.	Total - Life and Annuity Affiliates - U.S. - Captive				1,100,000	7,259,877
0399999.	Total - Life and Annuity Affiliates - U.S. - Total				1,100,000	7,259,877
0799999.	Total - Life and Annuity Affiliates				1,100,000	7,259,877
Life and Annuity - Non-Affiliates - U.S. Non-Affiliates						
90611	41-1366075	04/15/1999	Allianz Life Insurance Co. of North Amer	MN	26,660	0
90611	41-1366075	04/15/1999	Allianz Life Insurance Co. of North Amer	MN	67,500	0
90611	41-1366075	07/31/2001	Allianz Life Insurance Co. of North Amer	MN	90,017	60,013
90611	41-1366075	07/01/2002	Allianz Life Insurance Co. of North Amer	MN	13,596	4,584
90611	41-1366075	04/01/2003	Allianz Life Insurance Co. of North Amer	MN	315,000	0
39845	48-0921045	09/01/1967	Employer's Reassurance Corporation	KS	1,673	0
86258	13-2572994	01/01/2006	General & Cologne Life Re of America	CT	0	60,000
88340	59-2859797	09/01/2005	Hannover Life Reassurance Comp of America	FL	0	157,500
88340	59-2859797	01/01/2006	Hannover Life Reassurance Comp of America	FL	0	22,500
65676	35-0472300	07/31/2001	The Lincoln National Life Insurance Comp	IN	59,976	59,976
65676	35-0472300	01/01/2002	The Lincoln National Life Insurance Comp	IN	13,608	4,589
66346	58-0828824	07/01/2002	Munich American Reassurance Company	GA	0	6,607
66346	58-0828824	04/15/1999	Munich American Reassurance Company	GA	26,660	0
66346	58-0828824	04/15/1999	Munich American Reassurance Company	GA	67,500	0
66346	58-0828824	04/01/2003	Munich American Reassurance Company	GA	963,000	0
66346	58-0828824	07/31/2001	Munich American Reassurance Company	GA	150,030	120,022
66346	58-0828824	04/01/2004	Munich American Reassurance Company	GA	0	100,000
66346	58-0828824	01/19/2005	Munich American Reassurance Company	GA	0	927,000
66346	58-0828824	09/01/2005	Munich American Reassurance Company	GA	0	346,500
66346	58-0828824	01/01/2006	Munich American Reassurance Company	GA	0	50,000
66346	58-0828824	01/01/2006	Munich American Reassurance Company	GA	0	22,500
66346	58-0828824	06/04/2007	Munich American Reassurance Company	GA	50,000	1,400,000
93572	43-1235868	01/01/1987	RGA Reinsurance Company	MO	300,000	37,984
93572	43-1235868	10/01/1995	RGA Reinsurance Company	MO	35,802	0
93572	43-1235868	04/15/1999	RGA Reinsurance Company	MO	67,500	0
93572	43-1235868	04/15/1999	RGA Reinsurance Company	MO	40,000	0
93572	43-1235868	07/31/2001	RGA Reinsurance Company	MO	14,994	59,976
93572	43-1235868	01/01/2002	RGA Reinsurance Company	MO	20,400	0
93572	43-1235868	07/01/2002	RGA Reinsurance Company	MO	0	6,878
68713	84-0499703	10/01/1995	Security Life of Denver Insurance Co	CO	35,802	0
68713	84-0499703	07/31/2001	Security Life of Denver Insurance Co	CO	71,264	60,013
68713	84-0499703	05/01/2002	Security Life of Denver Insurance Co	CO	0	229,527
68713	84-0499703	07/01/2002	Security Life of Denver Insurance Co	CO	0	8,901
68713	84-0499703	04/01/2003	Security Life of Denver Insurance Co	CO	256,500	0
82627	06-0839705	06/01/1984	Swiss Re Life & Health America, Inc	CT	56,436	0
82627	06-0839705	10/01/1995	Swiss Re Life & Health America, Inc	CT	107,406	0
82627	06-0839705	01/01/2006	Swiss Re Life & Health America, Inc	CT	320,995	0
82627	06-0839705	07/01/2011	Swiss Re Life & Health America, Inc	CT	50,000	1,400,000
82627	06-0839705	07/01/2002	Swiss Re Life & Health America, Inc	CT	0	6,878
87572	23-2038295	07/01/2002	Scottish Re USA Inc	NC	0	1,485
87572	23-2038295	01/01/2006	Scottish Re USA Inc	NC	160,497	0
86231	39-0989781	01/01/2006	Transamerica Life Insurance Company	NC	0	60,000
86231	39-0989781	01/01/2006	Transamerica Life Insurance Company	NC	0	27,000
64688	75-6020048	10/10/2009	SCOR Global Life American Reinsurance Compnay	DE	173,777	0
0899999.	Total - Life and Annuity Non-Affiliates - U.S. Non-Affiliates				3,556,593	5,240,433
Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates						
80659	38-0397420	01/19/2005	The Canada Life Assurance Company	CAN	0	342,000
80659	38-0397420	09/01/2005	The Canada Life Assurance Company	CAN	0	126,000
00000	AA-3190770	01/01/2006	Ace Tempest Life Reinsurance	BMU	0	30,000
0999999.	Total - Life and Annuity Non-Affiliates - Non-U.S. Non-Affiliates				0	498,000
1099999.	Total - Life and Annuity Non-Affiliates				3,556,593	5,738,433
1199999.	Total - Life and Annuity				4,656,593	12,998,310
Accident and Health - Affiliates - U.S. - Other						
67172	31-0397080	02/01/1981	Ohio National Life Insurance	OH	0	722,952
1399999.	Total - Accident and Health Affiliates - U.S. - Other				0	722,952
1499999.	Total - Accident and Health Affiliates - U.S. - Total				0	722,952
1899999.	Total - Accident and Health Affiliates				0	722,952
Accident and Health - Non-Affiliates - U.S. Non-Affiliates						
39845	48-0921045	09/01/1967	Employer's Reassurance Corporation	KS	5,143	1,929
86258	13-2572994	01/01/1999	General Re Life Corporation	CT	12,362	19,520
66346	58-0828824	01/01/1999	Munich American Reassurance Company	GA	6,114	68,641
82627	06-0839705	02/01/1981	Swiss Re Life & Health America, Inc	IN	2,972,956	506,746

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
67598	04-1768571	11/01/1988	Paul Revere Life Insurance Company	MA	137,987	76,392
1999999.	Total - Accident and Health Non-Affiliates - U.S. Non-Affiliates				3,134,561	673,228
2199999.	Total - Accident and Health Non-Affiliates				3,134,561	673,228
2299999.	Total - Accident and Health				3,134,561	1,396,180
2399999.	Total U.S.				7,791,154	13,896,490
2499999.	Total Non-U.S.				0	498,000
9999999.	Total				7,791,154	14,394,490

SCHEDULE S - PART 3 - SECTION 1

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

1	2	3	4	5	6	7	Reserve Credit Taken		10	Outstanding Surplus Relief		13	14
							8	9		11	12		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
General Account - Authorized - Affiliates - U.S. - Other													
67172	31-0397080	10/04/2006	Ohio National Life Insurance Company	OH	CO/I	306,221,066	139,224,830	135,561,541	0	0	0	0	0
67172	31-0397080	10/01/2009	Ohio National Life Insurance Company	OH	CO/I	1,156,618,321	391,801,872	234,523,506	146,683,486	0	0	0	0
0299999.	Total - General Account - Authorized - Affiliates - U.S. - Other					1,462,839,387	531,026,702	370,085,047	146,683,486	0	0	0	0
0399999.	Total - General Account - Authorized - Affiliates - U.S. - Total					1,462,839,387	531,026,702	370,085,047	146,683,486	0	0	0	0
0799999.	Total - General Account - Authorized - Affiliates					1,462,839,387	531,026,702	370,085,047	146,683,486	0	0	0	0
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates													
90611	41-1366075	04/01/1982	Allianz Life Insurance Co. of North America	MN	YRT/I	27,640	2,297	2,114	3,858	0	0	0	0
90611	41-1366075	11/01/1983	Allianz Life Insurance Co. of North America	MN	YRT/I	570,701	17,347	23,163	18,195	0	0	0	0
90611	41-1366075	01/01/1987	Allianz Life Insurance Co. of North America	MN	DIS/I	0	51	77	115	0	0	0	0
90611	41-1366075	01/01/1987	Allianz Life Insurance Co. of North America	MN	YRT/I	4,333,073	94,183	74,462	123,277	0	0	0	0
90611	41-1366075	06/01/1988	Allianz Life Insurance Co. of North America	MN	YRT/I	925,000	6,935	6,277	9,966	0	0	0	0
90611	41-1366075	02/01/1999	Allianz Life Insurance Co. of North America	MN	DIS/I	0	238	147	257	0	0	0	0
90611	41-1366075	02/01/1999	Allianz Life Insurance Co. of North America	MN	YRT/I	8,864,391	65,628	62,402	47,018	0	0	0	0
90611	41-1366075	04/15/1999	Allianz Life Insurance Co. of North America	MN	CO/I	178,993,834	863,752	799,895	261,714	0	0	0	0
90611	41-1366075	04/15/1999	Allianz Life Insurance Co. of North America	MN	DIS/I	0	84,964	52,500	7,132	0	0	0	0
90611	41-1366075	04/15/1999	Allianz Life Insurance Co. of North America	MN	YRT/I	102,437,415	569,255	531,443	402,863	0	0	0	0
90611	41-1366075	03/15/2000	Allianz Life Insurance Co. of North America	MN	DIS/I	0	101	96	203	0	0	0	0
90611	41-1366075	03/15/2000	Allianz Life Insurance Co. of North America	MN	YRT/I	17,742,336	80,635	79,695	48,991	0	0	0	0
90611	41-1366075	09/01/2000	Allianz Life Insurance Co. of North America	MN	DIS/I	0	23	24	44	0	0	0	0
90611	41-1366075	09/01/2000	Allianz Life Insurance Co. of North America	MN	YRT/I	4,899,648	21,483	21,244	13,315	0	0	0	0
90611	41-1366075	09/30/2000	Allianz Life Insurance Co. of North America	MN	DIS/I	0	874	354	473	0	0	0	0
90611	41-1366075	09/30/2000	Allianz Life Insurance Co. of North America	MN	YRT/I	14,784,928	68,547	69,901	60,823	0	0	0	0
90611	41-1366075	07/31/2001	Allianz Life Insurance Co. of North America	MN	CO/I	522,919,020	12,156,404	12,589,869	793,160	0	0	0	0
90611	41-1366075	07/31/2001	Allianz Life Insurance Co. of North America	MN	DIS/I	0	28,512	34,702	16,506	0	0	0	0
90611	41-1366075	07/31/2001	Allianz Life Insurance Co. of North America	MN	YRT/I	17,153,326	76,185	64,450	49,927	0	0	0	0
90611	41-1366075	01/01/2002	Allianz Life Insurance Co. of North America	MN	DIS/I	0	692	530	1,248	0	0	0	0
90611	41-1366075	01/01/2002	Allianz Life Insurance Co. of North America	MN	YRT/I	26,881,389	117,541	97,144	92,781	0	0	0	0
90611	41-1366075	07/01/2002	Allianz Life Insurance Co. of North America	MN	DIS/I	0	287	251	423	0	0	0	0
90611	41-1366075	07/01/2002	Allianz Life Insurance Co. of North America	MN	YRT/I	27,414,213	334,196	298,225	201,677	0	0	0	0
90611	41-1366075	01/01/2003	Allianz Life Insurance Co. of North America	MN	CO/I	118,754,022	2,728,200	2,671,669	183,426	0	0	0	0
90611	41-1366075	01/01/2003	Allianz Life Insurance Co. of North America	MN	DIS/I	0	15,931	14,101	4,277	0	0	0	0
90611	41-1366075	01/01/2003	Allianz Life Insurance Co. of North America	MN	YRT/I	14,348,644	57,330	46,365	51,205	0	0	0	0
90611	41-1366075	04/01/2003	Allianz Life Insurance Co. of North America	MN	CO/I	720,293,000	16,784,657	16,205,579	986,156	0	0	0	0
90611	41-1366075	04/01/2003	Allianz Life Insurance Co. of North America	MN	DIS/I	0	38,880	36,449	30,455	0	0	0	0
90611	41-1366075	04/01/2003	Allianz Life Insurance Co. of North America	MN	YRT/I	109,272,308	490,577	362,832	370,962	0	0	0	0
60895	35-0145825	01/01/1986	American United Life Insurance Company	IN	YRT/I	0	0	728	(474)	0	0	0	0
62413	36-0947200	01/01/1987	Continental Assurance Company	IL	YRT/I	1,046,870	80,704	90,453	80,865	0	0	0	0

SCHEDULE S - PART 3 - SECTION 1

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

1	2	3	4	5	6	7	Reserve Credit Taken		10	Outstanding Surplus Relief		13	14
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Amount In Force at End of Year	8 Current Year	9 Prior Year	Premiums	11 Current Year	12 Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
86258	13-2572994	07/01/1982	General & Cologne Life Re of America	CT	YRT/I	258,500	8,877	7,333	10,748	0	0	0	0
86258	13-2572994	01/01/1987	General & Cologne Life Re of America	CT	DIS/I	0	233	94	58	0	0	0	0
86258	13-2572994	01/01/1987	General & Cologne Life Re of America	CT	YRT/I	2,293,253	96,989	142,639	138,263	0	0	0	0
86258	13-2572994	04/01/2004	General & Cologne Life Re of America	CT	DIS/I	0	1,875	1,600	3,564	0	0	0	0
86258	13-2572994	04/01/2004	General & Cologne Life Re of America	CT	YRT/I	54,278,659	240,708	211,669	189,875	0	0	0	0
86258	13-2572994	01/19/2005	General & Cologne Life Re of America	CT	DIS/I	0	1,712	1,314	2,414	0	0	0	0
86258	13-2572994	01/19/2005	General & Cologne Life Re of America	CT	YRT/I	55,945,924	189,574	162,467	156,843	0	0	0	0
86258	13-2572994	12/01/2005	General & Cologne Life Re of America	CT	DIS/I	0	164	164	329	0	0	0	0
86258	13-2572994	12/01/2005	General & Cologne Life Re of America	CT	YRT/I	25,479,426	76,805	70,664	32,035	0	0	0	0
86258	13-2572994	01/01/2006	General & Cologne Life Re of America	CT	DIS/I	0	3,819	3,979	7,596	0	0	0	0
86258	13-2572994	01/01/2006	General & Cologne Life Re of America	CT	YRT/I	327,707,272	912,191	855,009	613,908	0	0	0	0
97071	13-3126819	06/04/2007	Generali USA Life Reassurance Company	MO	DIS/I	0	137	128	(208)	0	0	0	0
97071	13-3126819	06/04/2007	Generali USA Life Reassurance Company	MO	YRT/I	8,477,515	14,628	27,833	12,800	0	0	0	0
97071	13-3126819	10/01/2007	Generali USA Life Reassurance Company	MO	DIS/I	0	3	3	20	0	0	0	0
97071	13-3126819	10/01/2007	Generali USA Life Reassurance Company	MO	YRT/I	2,375,706	4,402	3,465	6,158	0	0	0	0
97071	13-3126819	10/10/2009	Generali USA Life Reassurance Company	MO	DIS/I	0	25,890	24,199	27,353	0	0	0	0
97071	13-3126819	10/10/2009	Generali USA Life Reassurance Company	MO	YRT/I	311,283,736	587,175	1,662,482	1,283,072	0	0	0	0
88340	59-2859797	01/19/2005	Hannover Life Reassurance Company Of America	FL	DIS/I	0	26	24	51	0	0	0	0
88340	59-2859797	01/19/2005	Hannover Life Reassurance Company Of America	FL	YRT/I	1,782,163	2,455	2,077	3,253	0	0	0	0
88340	59-2859797	09/01/2005	Hannover Life Reassurance Company Of America	FL	CO/I	206,154,069	3,935,510	3,691,600	269,622	0	0	0	0
88340	59-2859797	09/01/2005	Hannover Life Reassurance Company Of America	FL	DIS/I	0	3,830	3,990	7,045	0	0	0	0
88340	59-2859797	12/01/2005	Hannover Life Reassurance Company Of America	FL	CO/I	77,253,795	1,515,345	1,401,100	102,656	0	0	0	0
88340	59-2859797	12/01/2005	Hannover Life Reassurance Company Of America	FL	DIS/I	0	1,047	1,047	2,095	0	0	0	0
88340	59-2859797	01/01/2006	Hannover Life Reassurance Company Of America	FL	CO/I	1,200,963,298	20,451,338	18,737,657	1,629,841	0	0	0	0
88340	59-2859797	01/01/2006	Hannover Life Reassurance Company Of America	FL	DIS/I	0	23,739	24,767	46,502	0	0	0	0
88340	59-2859797	01/01/2006	Hannover Life Reassurance Company Of America	FL	YRT/I	6,198,010	8,088	5,929	13,560	0	0	0	0
88340	59-2859797	01/01/2010	Hannover Life Reassurance Company Of America	FL	YRT/I	39,187,232	34,338	18,087	66,771	0	0	0	0
86258	13-2572994	10/01/1988	General & Cologne Life Re of America	CT	YRT/I	118,151	1,377	1,209	2,129	0	0	0	0
65676	35-0472300	03/18/1982	Lincoln National Life Insurance Company	IN	DIS/I	0	349	318	693	0	0	0	0
65676	35-0472300	03/18/1982	Lincoln National Life Insurance Company	IN	YRT/I	7,790,873	322,603	300,040	372,419	0	0	0	0
65676	35-0472300	03/09/1998	Lincoln National Life Insurance Company	IN	DIS/I	0	175	175	197	0	0	0	0
65676	35-0472300	03/09/1998	Lincoln National Life Insurance Company	IN	YRT/I	7,387,571	49,487	46,624	52,527	0	0	0	0
65676	35-0472300	06/01/1998	Lincoln National Life Insurance Company	IN	DIS/I	0	841	331	951	0	0	0	0
65676	35-0472300	06/01/1998	Lincoln National Life Insurance Company	IN	YRT/I	14,311,052	122,836	128,605	103,020	0	0	0	0
65676	35-0472300	02/01/1999	Lincoln National Life Insurance Company	IN	DIS/I	0	238	147	258	0	0	0	0
65676	35-0472300	02/01/1999	Lincoln National Life Insurance Company	IN	YRT/I	12,078,254	66,592	63,217	47,850	0	0	0	0
65676	35-0472300	04/15/1999	Lincoln National Life Insurance Company	IN	CO/I	178,993,839	863,752	799,895	261,714	0	0	0	0
65676	35-0472300	04/15/1999	Lincoln National Life Insurance Company	IN	DIS/I	0	85,166	52,601	7,258	0	0	0	0

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

1	2	3	4	5	6	7	Reserve Credit Taken		10	Outstanding Surplus Relief		13	14
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Amount In Force at End of Year	8 Current Year	9 Prior Year	Premiums	11 Current Year	12 Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
65676	35-0472300	04/15/1999	Lincoln National Life Insurance Company	IN	YRT/I	107,819,643	592,662	557,769	435,445	0	0	0	0
65676	35-0472300	03/01/2000	Lincoln National Life Insurance Company	IN	CO/I	160,483,823	2,831,790	3,111,801	256,528	0	0	0	0
65676	35-0472300	03/01/2000	Lincoln National Life Insurance Company	IN	DIS/I	0	31,240	29,600	6,723	0	0	0	0
65676	35-0472300	03/15/2000	Lincoln National Life Insurance Company	IN	DIS/I	0	101	96	203	0	0	0	0
65676	35-0472300	03/15/2000	Lincoln National Life Insurance Company	IN	YRT/I	17,755,644	80,695	79,754	49,028	0	0	0	0
65676	35-0472300	09/01/2000	Lincoln National Life Insurance Company	IN	CO/I	302,882,598	6,511,814	6,894,185	493,077	0	0	0	0
65676	35-0472300	09/01/2000	Lincoln National Life Insurance Company	IN	DIS/I	0	21,207	5,320	10,493	0	0	0	0
65676	35-0472300	09/01/2000	Lincoln National Life Insurance Company	IN	YRT/I	4,440,306	20,647	20,512	22,616	0	0	0	0
65676	35-0472300	09/05/2000	Lincoln National Life Insurance Company	IN	YRT/I	20,228,721	182,920	117,657	165,948	0	0	0	0
65676	35-0472300	09/30/2000	Lincoln National Life Insurance Company	IN	DIS/I	0	1,006	470	736	0	0	0	0
65676	35-0472300	09/30/2000	Lincoln National Life Insurance Company	IN	YRT/I	19,452,036	79,092	77,942	74,049	0	0	0	0
65676	35-0472300	07/01/2001	Lincoln National Life Insurance Company	IN	DIS/I	0	99	100	196	0	0	0	0
65676	35-0472300	07/01/2001	Lincoln National Life Insurance Company	IN	YRT/I	925,571	3,825	4,017	1,263	0	0	0	0
65676	35-0472300	07/31/2001	Lincoln National Life Insurance Company	IN	CO/I	515,958,388	12,018,728	12,452,481	780,645	0	0	0	0
65676	35-0472300	07/31/2001	Lincoln National Life Insurance Company	IN	DIS/I	0	28,366	34,550	16,237	0	0	0	0
65676	35-0472300	07/31/2001	Lincoln National Life Insurance Company	IN	YRT/I	13,349,020	67,306	55,915	41,444	0	0	0	0
65676	35-0472300	01/01/2002	Lincoln National Life Insurance Company	IN	DIS/I	0	693	530	1,249	0	0	0	0
65676	35-0472300	01/01/2002	Lincoln National Life Insurance Company	IN	YRT/I	26,176,143	112,700	93,077	75,800	0	0	0	0
65676	35-0472300	07/01/2002	Lincoln National Life Insurance Company	IN	DIS/I	0	287	252	423	0	0	0	0
65676	35-0472300	07/01/2002	Lincoln National Life Insurance Company	IN	YRT/I	16,957,280	110,907	99,670	73,996	0	0	0	0
65676	35-0472300	01/01/2003	Lincoln National Life Insurance Company	IN	CO/I	118,754,022	2,728,200	2,671,669	183,426	0	0	0	0
65676	35-0472300	01/01/2003	Lincoln National Life Insurance Company	IN	DIS/I	0	15,910	14,081	4,235	0	0	0	0
65676	35-0472300	01/01/2003	Lincoln National Life Insurance Company	IN	YRT/I	13,659,831	56,893	46,271	41,445	0	0	0	0
65676	35-0472300	04/01/2003	Lincoln National Life Insurance Company	IN	YRT/I	22,054	33	30	17	0	0	0	0
65676	35-0472300	01/19/2005	Lincoln National Life Insurance Company	IN	YRT/I	3,790,663	30,213	19,178	26,511	0	0	0	0
76694	23-2044256	12/31/2009	London Life Insurance Company	PA	YRT/I	7,012,638,058	0	0	23,396,788	0	0	0	0
66346	58-0828824	04/01/1984	Munich American Reassurance Company	GA	YRT/I	75,581	468	232	627	0	0	0	0
66346	58-0828824	03/01/1998	Munich American Reassurance Company	GA	DIS/I	0	44	0	59	0	0	0	0
66346	58-0828824	03/01/1998	Munich American Reassurance Company	GA	YRT/I	2,399,603	5,619	0	2,528	0	0	0	0
66346	58-0828824	03/09/1998	Munich American Reassurance Company	GA	DIS/I	0	175	175	197	0	0	0	0
66346	58-0828824	03/09/1998	Munich American Reassurance Company	GA	YRT/I	7,387,575	49,487	46,624	52,813	0	0	0	0
66346	58-0828824	06/01/1998	Munich American Reassurance Company	GA	DIS/I	0	841	331	951	0	0	0	0
66346	58-0828824	06/01/1998	Munich American Reassurance Company	GA	YRT/I	14,061,923	122,169	128,049	98,442	0	0	0	0
66346	58-0828824	02/01/1999	Munich American Reassurance Company	GA	DIS/I	0	238	147	257	0	0	0	0
66346	58-0828824	02/01/1999	Munich American Reassurance Company	GA	YRT/I	8,864,395	65,628	62,402	47,018	0	0	0	0
66346	58-0828824	04/15/1999	Munich American Reassurance Company	GA	CO/I	178,993,839	863,752	799,895	261,714	0	0	0	0
66346	58-0828824	04/15/1999	Munich American Reassurance Company	GA	DIS/I	0	84,964	52,500	7,132	0	0	0	0
66346	58-0828824	04/15/1999	Munich American Reassurance Company	GA	YRT/I	102,991,069	554,990	530,718	386,796	0	0	0	0

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

1	2	3	4	5	6	7	Reserve Credit Taken		10	Outstanding Surplus Relief		13	14
							8	9		11	12		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
66346	58-0828824	03/15/2000	Munich American Reassurance Company	GA	DIS/I	0	101	96	203	0	0	0	0
66346	58-0828824	03/15/2000	Munich American Reassurance Company	GA	YRT/I	17,742,337	80,635	79,695	48,991	0	0	0	0
66346	58-0828824	09/01/2000	Munich American Reassurance Company	GA	CO/I	295,035,787	6,262,759	6,575,197	475,556	0	0	0	0
66346	58-0828824	09/01/2000	Munich American Reassurance Company	GA	DIS/I	0	20,739	4,853	9,675	0	0	0	0
66346	58-0828824	09/01/2000	Munich American Reassurance Company	GA	YRT/I	5,146,648	26,304	26,310	15,906	0	0	0	0
66346	58-0828824	09/30/2000	Munich American Reassurance Company	GA	DIS/I	0	1,391	626	945	0	0	0	0
66346	58-0828824	09/30/2000	Munich American Reassurance Company	GA	YRT/I	26,214,020	109,956	109,306	102,918	0	0	0	0
66346	58-0828824	07/31/2001	Munich American Reassurance Company	GA	CO/I	1,032,533,842	24,051,819	24,919,844	1,562,329	0	0	0	0
66346	58-0828824	07/31/2001	Munich American Reassurance Company	GA	DIS/I	0	56,337	68,826	32,085	0	0	0	0
66346	58-0828824	07/31/2001	Munich American Reassurance Company	GA	YRT/I	22,165,243	105,519	88,842	70,141	0	0	0	0
66346	58-0828824	01/01/2002	Munich American Reassurance Company	GA	DIS/I	0	1,000	766	1,805	0	0	0	0
66346	58-0828824	01/01/2002	Munich American Reassurance Company	GA	YRT/I	40,074,730	166,577	137,027	115,350	0	0	0	0
66346	58-0828824	07/01/2002	Munich American Reassurance Company	GA	DIS/I	0	460	406	702	0	0	0	0
66346	58-0828824	07/01/2002	Munich American Reassurance Company	GA	YRT/I	25,476,328	160,957	144,605	107,303	0	0	0	0
66346	58-0828824	01/01/2003	Munich American Reassurance Company	GA	CO/I	120,554,020	2,755,522	2,698,375	184,910	0	0	0	0
66346	58-0828824	01/01/2003	Munich American Reassurance Company	GA	DIS/I	0	16,001	14,165	4,419	0	0	0	0
66346	58-0828824	01/01/2003	Munich American Reassurance Company	GA	YRT/I	16,832,425	69,311	56,347	51,742	0	0	0	0
66346	58-0828824	04/01/2003	Munich American Reassurance Company	GA	CO/I	1,926,213,553	43,958,216	42,771,561	2,700,213	0	0	0	0
66346	58-0828824	04/01/2003	Munich American Reassurance Company	GA	DIS/I	0	117,785	113,239	71,799	0	0	0	0
66346	58-0828824	04/01/2003	Munich American Reassurance Company	GA	YRT/I	130,492,535	506,281	378,261	395,964	0	0	0	0
66346	58-0828824	04/01/2004	Munich American Reassurance Company	GA	CO/I	1,810,674,376	40,773,337	39,286,632	2,564,226	0	0	0	0
66346	58-0828824	04/01/2004	Munich American Reassurance Company	GA	DIS/I	0	266,743	137,823	56,237	0	0	0	0
66346	58-0828824	04/01/2004	Munich American Reassurance Company	GA	YRT/I	90,139,549	382,102	325,824	372,519	0	0	0	0
66346	58-0828824	11/01/2004	Munich American Reassurance Company	GA	YRT/I	3,983,000	14,111	16,318	10,760	0	0	0	0
66346	58-0828824	01/19/2005	Munich American Reassurance Company	GA	CO/I	967,354,922	20,239,617	19,044,154	1,440,834	0	0	0	0
66346	58-0828824	01/19/2005	Munich American Reassurance Company	GA	DIS/I	0	102,806	35,986	34,808	0	0	0	0
66346	58-0828824	01/19/2005	Munich American Reassurance Company	GA	YRT/I	131,319,530	405,485	343,758	329,852	0	0	0	0
66346	58-0828824	07/01/2005	Munich American Reassurance Company	GA	CO/I	176,965,507	4,071,545	3,867,688	352,487	0	0	0	0
66346	58-0828824	07/01/2005	Munich American Reassurance Company	GA	DIS/I	0	4,080	4,041	8,414	0	0	0	0
66346	58-0828824	07/01/2005	Munich American Reassurance Company	GA	YRT/I	85,376,027	285,650	261,174	116,873	0	0	0	0
66346	58-0828824	09/01/2005	Munich American Reassurance Company	GA	CO/I	241,362,559	5,029,812	4,771,379	439,671	0	0	0	0
66346	58-0828824	09/01/2005	Munich American Reassurance Company	GA	DIS/I	0	6,538	6,736	12,384	0	0	0	0
66346	58-0828824	09/01/2005	Munich American Reassurance Company	GA	YRT/I	108,680,083	255,084	237,411	107,311	0	0	0	0
66346	58-0828824	12/01/2005	Munich American Reassurance Company	GA	CO/I	72,438,702	1,596,990	1,507,887	134,942	0	0	0	0
66346	58-0828824	12/01/2005	Munich American Reassurance Company	GA	DIS/I	0	1,604	1,604	3,195	0	0	0	0
66346	58-0828824	12/01/2005	Munich American Reassurance Company	GA	YRT/I	55,477,285	471,982	429,648	58,220	0	0	0	0
66346	58-0828824	01/01/2006	Munich American Reassurance Company	GA	CO/I	693,188,016	11,301,227	10,469,773	1,095,858	0	0	0	0
66346	58-0828824	01/01/2006	Munich American Reassurance Company	GA	DIS/I	0	15,014	15,778	29,017	0	0	0	0

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Reinsurance Ceded Life Insurance, Annuities, Deposit Funds and Other Liabilities
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1	2	3	4	5	6	7	Reserve Credit Taken		10	Outstanding Surplus Relief		13	14
							8	9		11	12		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
66346	58-0828824	01/01/2006	Munich American Reassurance Company	GA	YRT/I	105,571,413	356,063	326,641	373,613	0	0	0	0
66346	58-0828824	06/04/2007	Munich American Reassurance Company	GA	DIS/I	0	171	160	(260)	0	0	0	0
66346	58-0828824	06/04/2007	Munich American Reassurance Company	GA	YRT/I	14,163,257	20,163	21,567	18,811	0	0	0	0
66346	58-0828824	10/01/2007	Munich American Reassurance Company	GA	DIS/I	0	2,074	2,055	3,828	0	0	0	0
66346	58-0828824	10/01/2007	Munich American Reassurance Company	GA	YRT/I	138,075,198	331,344	292,858	467,544	0	0	0	0
66346	58-0828824	12/31/2008	Munich American Reassurance Company	GA	CO/I	0	0	0	(43,969)	0	0	0	0
66346	58-0828824	12/31/2008	Munich American Reassurance Company	GA	DIS/I	0	0	0	(6,789)	0	0	0	0
66346	58-0828824	10/10/2009	Munich American Reassurance Company	GA	DIS/I	0	51,236	46,942	52,092	0	0	0	0
66346	58-0828824	10/10/2009	Munich American Reassurance Company	GA	YRT/I	340,601,220	595,313	2,885,388	1,745,076	0	0	0	0
66346	58-0828824	04/01/2011	Munich American Reassurance Company	GA	CO/I	7,848,654,835	95,891,393	78,914,899	10,837,966	0	0	0	0
66346	58-0828824	04/01/2011	Munich American Reassurance Company	GA	DIS/I	0	169,729	149,277	273,553	0	0	0	0
93572	43-1235868	01/01/1977	RGA Reinsurance Company	MO	DIS/I	0	114	129	227	0	0	0	0
93572	43-1235868	01/01/1977	RGA Reinsurance Company	MO	YRT/I	2,815,000	27,435	25,214	28,444	0	0	0	0
93572	43-1235868	01/01/1983	RGA Reinsurance Company	MO	DIS/I	0	137,680	132,782	606	0	0	0	0
93572	43-1235868	01/01/1983	RGA Reinsurance Company	MO	YRT/I	400,000	3,368	3,032	3,477	0	0	0	0
93572	43-1235868	02/01/1983	RGA Reinsurance Company	MO	DIS/I	0	178	653	357	0	0	0	0
93572	43-1235868	02/01/1983	RGA Reinsurance Company	MO	YRT/I	3,516,769	32,123	30,160	35,692	0	0	0	0
93572	43-1235868	01/01/1984	RGA Reinsurance Company	MO	YRT/I	3,714,979	109,269	109,197	83,560	0	0	0	0
93572	43-1235868	06/01/1984	RGA Reinsurance Company	MO	YRT/I	6,682,213	232,623	260,672	174,572	0	0	0	0
93572	43-1235868	01/01/1987	RGA Reinsurance Company	MO	DIS/I	0	5,802	4,064	1,520	0	0	0	0
93572	43-1235868	01/01/1987	RGA Reinsurance Company	MO	YRT/I	78,366,129	1,175,775	1,209,541	1,306,834	0	0	0	0
93572	43-1235868	05/01/1988	RGA Reinsurance Company	MO	DIS/I	0	320	268	641	0	0	0	0
93572	43-1235868	05/01/1988	RGA Reinsurance Company	MO	YRT/I	675,000	4,281	3,887	6,719	0	0	0	0
93572	43-1235868	11/14/1991	RGA Reinsurance Company	MO	DIS/I	0	1	1	0	0	0	0	0
93572	43-1235868	11/14/1991	RGA Reinsurance Company	MO	YRT/I	19,353,820	166,364	164,844	287,525	0	0	0	0
93572	43-1235868	01/01/1994	RGA Reinsurance Company	MO	DIS/I	0	174	690	(149)	0	0	0	0
93572	43-1235868	01/01/1994	RGA Reinsurance Company	MO	YRT/I	24,137,045	554,025	494,617	720,040	0	0	0	0
93572	43-1235868	10/01/1995	RGA Reinsurance Company	MO	DIS/I	0	16,807	16,527	1,935	0	0	0	0
93572	43-1235868	10/01/1995	RGA Reinsurance Company	MO	YRT/I	50,963,739	517,160	465,432	607,650	0	0	0	0
93572	43-1235868	07/01/1997	RGA Reinsurance Company	MO	DIS/I	0	727	660	962	0	0	0	0
93572	43-1235868	07/01/1997	RGA Reinsurance Company	MO	YRT/I	28,981,632	242,143	231,812	218,278	0	0	0	0
93572	43-1235868	03/09/1998	RGA Reinsurance Company	MO	DIS/I	0	350	351	394	0	0	0	0
93572	43-1235868	03/09/1998	RGA Reinsurance Company	MO	YRT/I	17,102,036	130,062	120,962	145,263	0	0	0	0
93572	43-1235868	06/01/1998	RGA Reinsurance Company	MO	DIS/I	0	1,681	661	1,903	0	0	0	0
93572	43-1235868	06/01/1998	RGA Reinsurance Company	MO	YRT/I	33,608,073	260,707	271,171	216,183	0	0	0	0
93572	43-1235868	02/01/1999	RGA Reinsurance Company	MO	DIS/I	0	357	221	386	0	0	0	0
93572	43-1235868	02/01/1999	RGA Reinsurance Company	MO	YRT/I	14,109,458	101,169	95,863	73,963	0	0	0	0

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

1 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 8 Current Year	Reserve Credit Taken 9 Prior Year	10 Premiums	Outstanding Surplus Relief 11 Current Year	Outstanding Surplus Relief 12 Prior Year	13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
93572	43-1235868	04/15/1999	RGA Reinsurance Company	MO	CO/I	178,993,839	863,752	799,895	261,714	0	0	0	0
93572	43-1235868	04/15/1999	RGA Reinsurance Company	MO	DIS/I	0	97,718	59,668	8,027	0	0	0	0
93572	43-1235868	04/15/1999	RGA Reinsurance Company	MO	YRT/I	208,129,856	1,284,064	1,266,775	1,041,832	0	0	0	0
93572	43-1235868	03/15/2000	RGA Reinsurance Company	MO	DIS/I	0	152	145	304	0	0	0	0
93572	43-1235868	03/15/2000	RGA Reinsurance Company	MO	YRT/I	31,220,157	272,415	255,042	161,175	0	0	0	0
93572	43-1235868	09/01/2000	RGA Reinsurance Company	MO	CO/I	295,035,782	6,262,759	6,575,197	475,170	0	0	0	0
93572	43-1235868	09/01/2000	RGA Reinsurance Company	MO	DIS/I	0	20,792	4,905	9,661	0	0	0	0
93572	43-1235868	09/01/2000	RGA Reinsurance Company	MO	YRT/I	5,782,300	30,364	31,387	33,223	0	0	0	0
93572	43-1235868	09/30/2000	RGA Reinsurance Company	MO	DIS/I	0	1,442	646	972	0	0	0	0
93572	43-1235868	09/30/2000	RGA Reinsurance Company	MO	YRT/I	48,927,702	305,265	285,885	257,930	0	0	0	0
93572	43-1235868	07/31/2001	RGA Reinsurance Company	MO	CO/I	572,395,388	12,974,882	13,420,305	852,803	0	0	0	0
93572	43-1235868	07/31/2001	RGA Reinsurance Company	MO	DIS/I	0	28,839	34,909	16,783	0	0	0	0
93572	43-1235868	07/31/2001	RGA Reinsurance Company	MO	YRT/I	41,338,575	173,618	146,365	134,962	0	0	0	0
93572	43-1235868	01/01/2002	RGA Reinsurance Company	MO	DIS/I	0	1,036	793	1,868	0	0	0	0
93572	43-1235868	01/01/2002	RGA Reinsurance Company	MO	YRT/I	62,715,589	529,897	450,077	388,706	0	0	0	0
93572	43-1235868	07/01/2002	RGA Reinsurance Company	MO	DIS/I	0	417	365	607	0	0	0	0
93572	43-1235868	07/01/2002	RGA Reinsurance Company	MO	YRT/I	29,060,144	301,928	270,152	180,021	0	0	0	0
93572	43-1235868	01/01/2003	RGA Reinsurance Company	MO	CO/I	121,179,022	2,868,344	2,829,047	192,821	0	0	0	0
93572	43-1235868	01/01/2003	RGA Reinsurance Company	MO	DIS/I	0	16,035	14,192	4,489	0	0	0	0
93572	43-1235868	01/01/2003	RGA Reinsurance Company	MO	YRT/I	22,821,054	96,853	78,202	74,036	0	0	0	0
93572	43-1235868	04/01/2003	RGA Reinsurance Company	MO	DIS/I	0	2,533	875	4,316	0	0	0	0
93572	43-1235868	04/01/2003	RGA Reinsurance Company	MO	YRT/I	143,733,746	821,221	599,482	527,331	0	0	0	0
93572	43-1235868	04/01/2004	RGA Reinsurance Company	MO	DIS/I	0	1,905	1,640	3,624	0	0	0	0
93572	43-1235868	04/01/2004	RGA Reinsurance Company	MO	YRT/I	145,983,734	533,051	506,674	484,467	0	0	0	0
93572	43-1235868	01/19/2005	RGA Reinsurance Company	MO	DIS/I	0	2,017	1,673	3,025	0	0	0	0
93572	43-1235868	01/19/2005	RGA Reinsurance Company	MO	YRT/I	91,317,487	446,027	399,559	301,395	0	0	0	0
93572	43-1235868	06/04/2007	RGA Reinsurance Company	MO	DIS/I	0	171	160	(260)	0	0	0	0
93572	43-1235868	06/04/2007	RGA Reinsurance Company	MO	YRT/I	10,596,901	18,282	19,915	15,898	0	0	0	0
93572	43-1235868	10/01/2007	RGA Reinsurance Company	MO	DIS/I	0	1,621	1,624	2,865	0	0	0	0
93572	43-1235868	10/01/2007	RGA Reinsurance Company	MO	YRT/I	153,630,213	384,572	331,340	575,511	0	0	0	0
93572	43-1235868	07/01/2008	RGA Reinsurance Company	MO	YRT/I	5,538,621	17,195	15,904	11,233	0	0	0	0
93572	43-1235868	10/10/2009	RGA Reinsurance Company	MO	DIS/I	0	26,807	25,960	31,928	0	0	0	0
93572	43-1235868	10/10/2009	RGA Reinsurance Company	MO	YRT/I	373,745,117	904,148	2,140,524	1,973,300	0	0	0	0
68713	84-0499703	08/01/1993	Security Life of Denver Insurance Company	CO	DIS/I	0	3	2	0	0	0	0	0
68713	84-0499703	08/01/1993	Security Life of Denver Insurance Company	CO	YRT/I	3,740,626	22,537	19,202	36,698	0	0	0	0
68713	84-0499703	01/01/1994	Security Life of Denver Insurance Company	CO	DIS/I	0	143	653	(212)	0	0	0	0
68713	84-0499703	01/01/1994	Security Life of Denver Insurance Company	CO	YRT/I	18,538,374	191,750	180,200	251,678	0	0	0	0
68713	84-0499703	10/01/1995	Security Life of Denver Insurance Company	CO	DIS/I	0	16,807	16,527	1,938	0	0	0	0

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1	2	3	4	5	6	7	Reserve Credit Taken		10	Outstanding Surplus Relief		13	14
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Amount In Force at End of Year	8 Current Year	9 Prior Year	Premiums	11 Current Year	12 Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
68713	84-0499703	10/01/1995	Security Life of Denver Insurance Company	CO	YRT/I	43,160,638	633,897	585,981	686,898	0	0	0	0
68713	84-0499703	07/01/1997	Security Life of Denver Insurance Company	CO	DIS/I	0	825	802	327	0	0	0	0
68713	84-0499703	07/01/1997	Security Life of Denver Insurance Company	CO	YRT/I	26,633,967	409,716	379,366	523,687	0	0	0	0
68713	84-0499703	03/09/1998	Security Life of Denver Insurance Company	CO	DIS/I	0	350	351	394	0	0	0	0
68713	84-0499703	03/09/1998	Security Life of Denver Insurance Company	CO	YRT/I	15,280,572	100,725	94,752	107,281	0	0	0	0
68713	84-0499703	06/01/1998	Security Life of Denver Insurance Company	CO	DIS/I	0	1,907	901	2,359	0	0	0	0
68713	84-0499703	06/01/1998	Security Life of Denver Insurance Company	CO	YRT/I	30,719,235	260,586	269,135	215,417	0	0	0	0
68713	84-0499703	06/08/1998	Security Life of Denver Insurance Company	CO	ADB/I	0	349	308	0	0	0	0	0
68713	84-0499703	06/08/1998	Security Life of Denver Insurance Company	CO	CO/I	179,018,787	873,828	818,481	285,331	0	0	0	0
68713	84-0499703	06/08/1998	Security Life of Denver Insurance Company	CO	DIS/I	0	2,949	3,018	5,178	0	0	0	0
68713	84-0499703	06/08/1998	Security Life of Denver Insurance Company	CO	YRT/I	581,693	913	819	1,353	0	0	0	0
68713	84-0499703	02/01/1999	Security Life of Denver Insurance Company	CO	DIS/I	0	357	221	386	0	0	0	0
68713	84-0499703	02/01/1999	Security Life of Denver Insurance Company	CO	YRT/I	13,789,352	99,911	99,293	72,710	0	0	0	0
68713	84-0499703	04/15/1999	Security Life of Denver Insurance Company	CO	DIS/I	0	38,153	21,409	2,501	0	0	0	0
68713	84-0499703	04/15/1999	Security Life of Denver Insurance Company	CO	YRT/I	156,531,472	849,988	810,635	591,611	0	0	0	0
68713	84-0499703	03/15/2000	Security Life of Denver Insurance Company	CO	DIS/I	0	152	145	304	0	0	0	0
68713	84-0499703	03/15/2000	Security Life of Denver Insurance Company	CO	YRT/I	26,620,157	120,983	119,572	73,978	0	0	0	0
68713	84-0499703	09/01/2000	Security Life of Denver Insurance Company	CO	DIS/I	0	45	47	86	0	0	0	0
68713	84-0499703	09/01/2000	Security Life of Denver Insurance Company	CO	YRT/I	7,691,800	37,279	37,149	29,643	0	0	0	0
68713	84-0499703	09/05/2000	Security Life of Denver Insurance Company	CO	YRT/I	20,228,656	182,919	117,657	165,947	0	0	0	0
68713	84-0499703	09/30/2000	Security Life of Denver Insurance Company	CO	DIS/I	0	1,696	687	917	0	0	0	0
68713	84-0499703	09/30/2000	Security Life of Denver Insurance Company	CO	YRT/I	42,598,426	168,841	165,788	176,950	0	0	0	0
68713	84-0499703	10/02/2000	Security Life of Denver Insurance Company	CO	YRT/I	786,771	10,526	6,586	9,395	0	0	0	0
68713	84-0499703	07/31/2001	Security Life of Denver Insurance Company	CO	CO/I	516,269,023	12,025,967	12,459,983	781,115	0	0	0	0
68713	84-0499703	07/31/2001	Security Life of Denver Insurance Company	CO	DIS/I	0	29,191	35,155	17,111	0	0	0	0
68713	84-0499703	07/31/2001	Security Life of Denver Insurance Company	CO	YRT/I	25,341,740	136,156	115,643	81,359	0	0	0	0
68713	84-0499703	01/01/2002	Security Life of Denver Insurance Company	CO	CO/I	26,239,855	931,941	881,495	64,590	0	0	0	0
68713	84-0499703	01/01/2002	Security Life of Denver Insurance Company	CO	DIS/I	0	1,901	1,676	3,539	0	0	0	0
68713	84-0499703	01/01/2002	Security Life of Denver Insurance Company	CO	YRT/I	50,622,611	297,679	247,114	209,607	0	0	0	0
68713	84-0499703	05/01/2002	Security Life of Denver Insurance Company	CO	DIS/I	0	7,126	7,647	22,535	0	0	0	0
68713	84-0499703	05/01/2002	Security Life of Denver Insurance Company	CO	YRT/I	162,579,259	2,042,244	1,599,473	1,305,876	0	0	0	0
68713	84-0499703	07/01/2002	Security Life of Denver Insurance Company	CO	DIS/I	0	480	415	665	0	0	0	0
68713	84-0499703	07/01/2002	Security Life of Denver Insurance Company	CO	YRT/I	33,330,223	290,803	261,690	164,484	0	0	0	0
68713	84-0499703	01/01/2003	Security Life of Denver Insurance Company	CO	CO/I	106,289,167	2,270,274	2,242,455	159,958	0	0	0	0
68713	84-0499703	01/01/2003	Security Life of Denver Insurance Company	CO	DIS/I	0	15,506	13,571	3,429	0	0	0	0
68713	84-0499703	01/01/2003	Security Life of Denver Insurance Company	CO	YRT/I	25,479,526	120,274	100,240	99,523	0	0	0	0
68713	84-0499703	04/01/2003	Security Life of Denver Insurance Company	CO	CO/I	878,934,521	40,852,677	44,226,944	1,222,093	0	0	0	0
68713	84-0499703	04/01/2003	Security Life of Denver Insurance Company	CO	DIS/I	0	29,068	27,205	34,180	0	0	0	0

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1	2	3	4	5	6	7	Reserve Credit Taken		10	Outstanding Surplus Relief		13	14
							8	9		11	12		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
68713	84-0499703	04/01/2003	Security Life of Denver Insurance Company	CO	YRT/I	111,173,897	486,045	360,629	353,861	0	0	0	0
68713	84-0499703	04/01/2004	Security Life of Denver Insurance Company	CO	CO/I	831,001,062	19,311,325	18,197,767	1,081,371	0	0	0	0
68713	84-0499703	04/01/2004	Security Life of Denver Insurance Company	CO	DIS/I	0	142,861	66,507	26,938	0	0	0	0
68713	84-0499703	04/01/2004	Security Life of Denver Insurance Company	CO	YRT/I	77,836,015	380,093	327,159	184,438	0	0	0	0
82627	06-0839705	11/01/1981	Swiss Re Life & Health America, Inc.	CT	DIS/I	0	0	0	338	0	0	0	0
82627	06-0839705	11/01/1981	Swiss Re Life & Health America, Inc.	CT	YRT/I	1,862,076	16,363	21,031	28,924	0	0	0	0
82627	06-0839705	01/01/1982	Swiss Re Life & Health America, Inc.	CT	DIS/I	0	193	261	387	0	0	0	0
82627	06-0839705	01/01/1982	Swiss Re Life & Health America, Inc.	CT	YRT/I	566,000	3,129	5,968	8,353	0	0	0	0
82627	06-0839705	06/06/1983	Swiss Re Life & Health America, Inc.	CT	DIS/I	0	0	15	0	0	0	0	0
82627	06-0839705	06/06/1983	Swiss Re Life & Health America, Inc.	CT	YRT/I	2,967,179	99,304	91,281	102,143	0	0	0	0
82627	06-0839705	06/01/1984	Swiss Re Life & Health America, Inc.	CT	DIS/I	0	188	188	451	0	0	0	0
82627	06-0839705	06/01/1984	Swiss Re Life & Health America, Inc.	CT	YRT/I	6,536,971	141,138	153,228	104,594	0	0	0	0
82627	06-0839705	01/01/1987	Swiss Re Life & Health America, Inc.	CT	ADB/I	0	48	48	95	0	0	0	0
82627	06-0839705	01/01/1987	Swiss Re Life & Health America, Inc.	CT	DIS/I	0	2,407	1,680	6,761	0	0	0	0
82627	06-0839705	01/01/1987	Swiss Re Life & Health America, Inc.	CT	YRT/I	41,166,853	891,918	959,929	921,390	0	0	0	0
82627	06-0839705	01/01/1990	Swiss Re Life & Health America, Inc.	CT	DIS/I	0	780	626	1,561	0	0	0	0
82627	06-0839705	01/01/1990	Swiss Re Life & Health America, Inc.	CT	YRT/I	900,000	3,123	2,835	5,623	0	0	0	0
82627	06-0839705	11/14/1991	Swiss Re Life & Health America, Inc.	CT	DIS/I	0	1	1	0	0	0	0	0
82627	06-0839705	11/14/1991	Swiss Re Life & Health America, Inc.	CT	YRT/I	19,289,548	257,888	219,963	419,438	0	0	0	0
82627	06-0839705	10/16/1992	Swiss Re Life & Health America, Inc.	CT	DIS/I	0	242,901	214,850	515	0	0	0	0
82627	06-0839705	10/16/1992	Swiss Re Life & Health America, Inc.	CT	YRT/I	650,000	6,760	6,078	13,445	0	0	0	0
82627	06-0839705	08/01/1993	Swiss Re Life & Health America, Inc.	CT	DIS/I	0	3	2	0	0	0	0	0
82627	06-0839705	08/01/1993	Swiss Re Life & Health America, Inc.	CT	YRT/I	5,795,079	79,834	68,674	178,510	0	0	0	0
82627	06-0839705	01/01/1994	Swiss Re Life & Health America, Inc.	CT	DIS/I	0	503	1,981	(602)	0	0	0	0
82627	06-0839705	01/01/1994	Swiss Re Life & Health America, Inc.	CT	YRT/I	49,906,524	481,619	632,126	602,747	0	0	0	0
82627	06-0839705	10/01/1995	Swiss Re Life & Health America, Inc.	CT	DIS/I	0	68,770	67,928	5,863	0	0	0	0
82627	06-0839705	10/01/1995	Swiss Re Life & Health America, Inc.	CT	YRT/I	115,167,101	1,391,486	1,281,934	1,473,720	0	0	0	0
82627	06-0839705	07/01/1997	Swiss Re Life & Health America, Inc.	CT	DIS/I	0	2,180	1,976	2,885	0	0	0	0
82627	06-0839705	07/01/1997	Swiss Re Life & Health America, Inc.	CT	YRT/I	64,180,167	753,347	715,070	787,051	0	0	0	0
82627	06-0839705	03/09/1998	Swiss Re Life & Health America, Inc.	CT	DIS/I	0	699	701	788	0	0	0	0
82627	06-0839705	03/09/1998	Swiss Re Life & Health America, Inc.	CT	YRT/I	30,685,586	204,210	207,070	229,070	0	0	0	0
82627	06-0839705	06/01/1998	Swiss Re Life & Health America, Inc.	CT	DIS/I	0	3,363	1,416	3,832	0	0	0	0
82627	06-0839705	06/01/1998	Swiss Re Life & Health America, Inc.	CT	YRT/I	58,649,529	494,616	518,841	400,908	0	0	0	0
82627	06-0839705	02/01/1999	Swiss Re Life & Health America, Inc.	CT	DIS/I	0	357	221	386	0	0	0	0
82627	06-0839705	02/01/1999	Swiss Re Life & Health America, Inc.	CT	YRT/I	14,118,884	152,058	141,718	109,560	0	0	0	0
82627	06-0839705	04/15/1999	Swiss Re Life & Health America, Inc.	CT	DIS/I	0	38,153	21,409	2,291	0	0	0	0
82627	06-0839705	04/15/1999	Swiss Re Life & Health America, Inc.	CT	YRT/I	173,635,215	1,060,047	963,968	655,338	0	0	0	0
82627	06-0839705	03/15/2000	Swiss Re Life & Health America, Inc.	CT	DIS/I	0	152	145	304	0	0	0	0

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

1	2	3	4	5	6	7	Reserve Credit Taken		10	Outstanding Surplus Relief		13	14
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Amount In Force at End of Year	8 Current Year	9 Prior Year	Premiums	11 Current Year	12 Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
82627	06-0839705	03/15/2000	Swiss Re Life & Health America, Inc.	CT	YRT/I	26,620,157	120,983	119,572	73,505	0	0	0	0
82627	06-0839705	09/01/2000	Swiss Re Life & Health America, Inc.	CT	DIS/I	0	35	36	66	0	0	0	0
82627	06-0839705	09/01/2000	Swiss Re Life & Health America, Inc.	CT	YRT/I	5,382,300	27,487	27,483	15,140	0	0	0	0
82627	06-0839705	09/05/2000	Swiss Re Life & Health America, Inc.	CT	YRT/I	20,228,659	182,919	117,657	165,947	0	0	0	0
82627	06-0839705	09/29/2000	Swiss Re Life & Health America, Inc.	CT	YRT/I	794,433	45,941	40,735	25,888	0	0	0	0
82627	06-0839705	09/30/2000	Swiss Re Life & Health America, Inc.	CT	DIS/I	0	1,310	530	708	0	0	0	0
82627	06-0839705	09/30/2000	Swiss Re Life & Health America, Inc.	CT	YRT/I	24,611,722	120,299	120,731	103,332	0	0	0	0
82627	06-0839705	10/02/2000	Swiss Re Life & Health America, Inc.	CT	YRT/I	786,771	10,526	6,586	9,395	0	0	0	0
82627	06-0839705	07/31/2001	Swiss Re Life & Health America, Inc.	CT	DIS/I	0	1,129	769	1,060	0	0	0	0
82627	06-0839705	07/31/2001	Swiss Re Life & Health America, Inc.	CT	YRT/I	23,774,752	140,840	121,474	86,088	0	0	0	0
82627	06-0839705	01/01/2002	Swiss Re Life & Health America, Inc.	CT	DIS/I	0	1,032	789	1,859	0	0	0	0
82627	06-0839705	01/01/2002	Swiss Re Life & Health America, Inc.	CT	YRT/I	46,039,051	340,632	298,385	234,890	0	0	0	0
82627	06-0839705	07/01/2002	Swiss Re Life & Health America, Inc.	CT	DIS/I	0	307	261	386	0	0	0	0
82627	06-0839705	07/01/2002	Swiss Re Life & Health America, Inc.	CT	YRT/I	22,592,151	162,401	146,086	107,668	0	0	0	0
82627	06-0839705	01/01/2003	Swiss Re Life & Health America, Inc.	CT	DIS/I	0	298	264	605	0	0	0	0
82627	06-0839705	01/01/2003	Swiss Re Life & Health America, Inc.	CT	YRT/I	20,879,610	94,297	76,306	67,901	0	0	0	0
82627	06-0839705	04/01/2003	Swiss Re Life & Health America, Inc.	CT	YRT/I	3,000,000	2,316	2,210	2,253	0	0	0	0
82627	06-0839705	01/19/2005	Swiss Re Life & Health America, Inc.	CT	YRT/I	3,790,665	30,213	19,178	26,511	0	0	0	0
82627	06-0839705	01/01/2006	Swiss Re Life & Health America, Inc.	CT	YRT/I	76,102,596	343,980	287,564	293,309	0	0	0	0
82627	06-0839705	07/01/2008	Swiss Re Life & Health America, Inc.	CT	YRT/I	7,724,213	22,861	20,862	17,520	0	0	0	0
82627	06-0839705	01/01/2010	Swiss Re Life & Health America, Inc.	CT	YRT/I	39,073,295	34,181	17,952	55,122	0	0	0	0
82627	06-0839705	07/01/2011	Swiss Re Life & Health America, Inc.	CT	CO/I	7,848,604,666	95,891,053	78,895,392	10,843,930	0	0	0	0
82627	06-0839705	07/01/2011	Swiss Re Life & Health America, Inc.	CT	DIS/I	0	169,729	149,277	273,579	0	0	0	0
82627	06-0839705	03/19/2013	Swiss Re Life & Health America, Inc.	CT	YRT/I	9,985,990	1,406	0	0	0	0	0	0
87572	23-2038295	09/01/2000	Scottish Re U.S. Inc.	NC	DIS/I	0	395	167	227	0	0	0	0
87572	23-2038295	09/01/2000	Scottish Re U.S. Inc.	NC	YRT/I	6,033,255	29,159	29,969	21,379	0	0	0	0
87572	23-2038295	09/30/2000	Scottish Re U.S. Inc.	NC	YRT/I	1,783,939	8,614	8,487	9,880	0	0	0	0
87572	23-2038295	07/31/2001	Scottish Re U.S. Inc.	NC	DIS/I	0	332	226	312	0	0	0	0
87572	23-2038295	07/31/2001	Scottish Re U.S. Inc.	NC	YRT/I	4,970,708	28,655	24,463	15,168	0	0	0	0
87572	23-2038295	01/01/2002	Scottish Re U.S. Inc.	NC	DIS/I	0	304	232	547	0	0	0	0
87572	23-2038295	01/01/2002	Scottish Re U.S. Inc.	NC	YRT/I	9,397,038	45,611	38,028	27,103	0	0	0	0
87572	23-2038295	07/01/2002	Scottish Re U.S. Inc.	NC	DIS/I	0	90	77	113	0	0	0	0
87572	23-2038295	07/01/2002	Scottish Re U.S. Inc.	NC	YRT/I	6,644,070	47,721	42,793	31,648	0	0	0	0
87572	23-2038295	01/01/2003	Scottish Re U.S. Inc.	NC	DIS/I	0	76	68	155	0	0	0	0
87572	23-2038295	01/01/2003	Scottish Re U.S. Inc.	NC	YRT/I	5,350,596	24,061	19,495	17,355	0	0	0	0
87572	23-2038295	01/19/2005	Scottish Re U.S. Inc.	NC	YRT/I	3,790,658	30,213	19,178	26,511	0	0	0	0
87572	23-2038295	01/01/2006	Scottish Re U.S. Inc.	NC	YRT/I	38,051,319	171,990	144,064	146,655	0	0	0	0

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

1	2	3	4	5	6	7	Reserve Credit Taken		10	Outstanding Surplus Relief		13	14
							8	9		11	12		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
64688	75-6020048	04/01/2004	SCOR Global Life Americas Reinsurance Company	TX	YRT/I	4,637,149	747	595	4,360	0	0	0	0
64688	75-6020048	01/19/2005	SCOR Global Life Americas Reinsurance Company	TX	YRT/I	2,233,324	217	164	2,213	0	0	0	0
64688	75-6020048	01/01/2006	SCOR Global Life Americas Reinsurance Company	TX	YRT/I	10,799,557	626	513	6,549	0	0	0	0
64688	75-6020048	10/01/2007	SCOR Global Life Americas Reinsurance Company	TX	DIS/I	0	1,616	1,619	2,927	0	0	0	0
64688	75-6020048	10/01/2007	SCOR Global Life Americas Reinsurance Company	TX	YRT/I	106,047,248	293,397	248,210	368,175	0	0	0	0
64688	75-6020048	10/10/2009	SCOR Global Life Americas Reinsurance Company	TX	DIS/I	0	1,155	1,003	2,475	0	0	0	0
64688	75-6020048	10/10/2009	SCOR Global Life Americas Reinsurance Company	TX	YRT/I	259,220,876	696,370	540,379	1,069,033	0	0	0	0
86231	39-0989781	01/13/1988	Transamerica Life Insurance Company	NC	YRT/I	58,518	1,749	808	1,701	0	0	0	0
86231	39-0989781	01/01/2006	Transamerica Life Insurance Company	NC	CO/I	1,515,831,748	21,132,555	19,668,262	2,053,709	0	0	0	0
86231	39-0989781	01/01/2006	Transamerica Life Insurance Company	NC	DIS/I	0	29,788	31,086	58,483	0	0	0	0
86231	39-0989781	01/01/2006	Transamerica Life Insurance Company	NC	YRT/I	146,039,981	711,624	655,336	1,542,488	0	0	0	0
86231	39-0989781	06/04/2007	Transamerica Life Insurance Company	NC	DIS/I	0	56	54	(611)	0	0	0	0
86231	39-0989781	06/04/2007	Transamerica Life Insurance Company	NC	YRT/I	5,687,553	14,219	18,540	7,303	0	0	0	0
86231	39-0989781	10/01/2007	Transamerica Life Insurance Company	NC	DIS/I	0	1,772	1,763	3,266	0	0	0	0
86231	39-0989781	10/01/2007	Transamerica Life Insurance Company	NC	YRT/I	163,930,617	426,048	366,377	628,942	0	0	0	0
0899999. Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates						46,958,719,231	597,078,751	560,061,736	108,724,705	0	0	0	0
General Account - Authorized - Non-Affiliates - Non-U.S. Non-Affiliates													
80659	38-0397420	04/01/2004	The Canada Life Assurance Company	CAN	CO/I	651,294,340	14,688,406	14,067,541	892,158	0	0	0	0
80659	38-0397420	04/01/2004	The Canada Life Assurance Company	CAN	DIS/I	0	101,561	50,382	19,206	0	0	0	0
80659	38-0397420	04/01/2004	The Canada Life Assurance Company	CAN	YRT/I	6,879,986	11,580	7,542	16,623	0	0	0	0
80659	38-0397420	01/19/2005	The Canada Life Assurance Company	CAN	CO/I	468,877,622	9,447,905	8,847,648	640,110	0	0	0	0
80659	38-0397420	01/19/2005	The Canada Life Assurance Company	CAN	DIS/I	0	40,344	14,715	14,741	0	0	0	0
80659	38-0397420	01/19/2005	The Canada Life Assurance Company	CAN	YRT/I	4,392,315	6,986	4,392	9,814	0	0	0	0
80659	38-0397420	07/01/2005	The Canada Life Assurance Company	CAN	CO/I	176,091,830	4,773,896	4,389,531	304,535	0	0	0	0
80659	38-0397420	07/01/2005	The Canada Life Assurance Company	CAN	DIS/I	0	2,860	2,884	5,984	0	0	0	0
80659	38-0397420	09/01/2005	The Canada Life Assurance Company	CAN	CO/I	236,390,295	4,717,586	4,456,020	343,771	0	0	0	0
80659	38-0397420	09/01/2005	The Canada Life Assurance Company	CAN	DIS/I	0	4,193	4,321	7,929	0	0	0	0
80659	38-0397420	08/01/1982	The Canada Life Assurance Company	CAN	YRT/I	488,908	7,171	4,294	8,062	0	0	0	0
80659	38-0397420	09/10/1987	The Canada Life Assurance Company	CAN	YRT/I	97,005	1,238	1,109	2,377	0	0	0	0
0999999. Total - General Account - Authorized - Non-Affiliates - Non-U.S. Non-Affiliates						1,544,512,301	33,803,726	31,850,379	2,265,310	0	0	0	0
1099999. Total - General Account - Authorized - Non-Affiliates						48,503,231,532	630,882,477	591,912,115	110,990,015	0	0	0	0
1199999. Total - General Account - Authorized						49,966,070,919	1,161,909,179	961,997,162	257,673,501	0	0	0	0
General Account - Unauthorized - Affiliates - U.S. - Captive													
15363	80-0955278	12/31/2013	Kenwood Re Inc.	VT	CO/I	45,199,994,211	244,358,115	0	(837,431)	0	0	0	0
15363	80-0955278	12/31/2013	Kenwood Re Inc.	VT	DIS/I	0	2,574,800	0	817,962	0	0	0	0
13575	26-3791519	12/31/2008	Montgomery Re	VT	CO/I	1,673,873,310	8,640,720	27,144,093	3,817,083	0	0	0	0
13575	26-3791519	12/31/2008	Montgomery Re	VT	DIS/I	0	79,709	240,913	63,567	0	0	0	0
13575	26-3791519	06/30/2009	Montgomery Re	VT	CO/I	9,746,327,009	57,351,549	68,262,692	13,175,263	0	0	0	0

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

1	2	3	4	5	6	7	Reserve Credit Taken		10	Outstanding Surplus Relief		13	14
							8	9		11	12		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
13575	26-3791519	06/30/2009	Montgomery Re	VT	DIS/I	0	883,221	866,138	291,764	0	0	0	0
13575	26-3791519	05/01/2011	Montgomery Re	VT	CO/I	522,097,112	122,797,852	255,533,477	(13,597,685)	0	0	0	0
13575	26-3791519	05/01/2011	Montgomery Re	VT	DIS/I	0	170,359	1,427,837	221,656	0	0	0	0
13575	26-3791519	07/01/2012	Montgomery Re	VT	CO/I	18,291,251,575	107,148,694	92,418,169	27,916,734	0	0	0	0
13575	26-3791519	07/01/2012	Montgomery Re	VT	DIS/I	0	1,325,733	1,844,839	638,101	0	0	0	0
1288888.	Total - General Account - Unauthorized - Affiliates - U.S. - Captive					75,433,543,217	545,330,752	447,738,158	32,507,014	0	0	0	0
1499999.	Total - General Account - Unauthorized - Affiliates - U.S. - Total					75,433,543,217	545,330,752	447,738,158	32,507,014	0	0	0	0
1899999.	Total - General Account - Unauthorized - Affiliates					75,433,543,217	545,330,752	447,738,158	32,507,014	0	0	0	0
General Account - Unauthorized - Non-Affiliates - Non-U.S. Non-Affiliates													
00000	AA-3190770	01/01/2006	Ace Tempest Life Reinsurance	BMU	DIS/I	0	532	559	1,137	0	0	0	0
00000	AA-3190770	01/01/2006	Ace Tempest Life Reinsurance	BMU	YRT/I	49,907,600	168,796	150,361	201,236	0	0	0	0
2099999.	Total - General Account - Unauthorized - Non-Affiliates - Non-U.S. Non-Affiliates					49,907,600	169,328	150,920	202,373	0	0	0	0
2199999.	Total - General Account - Unauthorized - Non-Affiliates					49,907,600	169,328	150,920	202,373	0	0	0	0
2299999.	Total - General Account - Unauthorized					75,483,450,817	545,500,080	447,889,078	32,709,387	0	0	0	0
3499999.	Total - General Account - Authorized, Unauthorized and Certified					125,449,521,736	1,707,409,259	1,409,886,240	290,382,888	0	0	0	0
6999999.	Total U.S.					123,855,101,835	1,673,436,205	1,377,884,941	287,915,205	0	0	0	0
7099999.	Total Non-U.S.					1,594,419,901	33,973,054	32,001,299	2,467,683	0	0	0	0
9999999.	Total					125,449,521,736	1,707,409,259	1,409,886,240	290,382,888	0	0	0	0

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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 10 Current Year	Outstanding Surplus Relief 11 Prior Year	12 Modified Coinsurance Reserve	13 Funds Withheld Under Coinsurance
General Account - Authorized - Affiliates - U.S. - Other												
67172	31-0397080	08/03/1979	The Ohio National Life Insurance Company	OH	CO/I	3,723,937	77,817	58,478,736	0	0	0	0
0299999.	Total - General Account - Authorized - Affiliates - U.S. - Other					3,723,937	77,817	58,478,736	0	0	0	0
0399999.	Total - General Account - Authorized - Affiliates - U.S. - Total					3,723,937	77,817	58,478,736	0	0	0	0
0799999.	Total - General Account - Authorized - Affiliates					3,723,937	77,817	58,478,736	0	0	0	0
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates												
39845	48-0921045	09/01/1967	Employer's Reinsurance Corporation	MO	CO/I	18,309	3,198	127,593	0	0	0	0
86258	13-2572994	01/01/1999	General Re Life Corporation	CT	CO/I	487,357	127,373	1,187,628	0	0	0	0
66346	58-0828824	01/01/1999	Munich American Reassurance Company	GA	CO/I	2,560,419	885,324	2,001,402	0	0	0	0
82627	06-0839705	02/01/1981	Swiss Re Life & Health America, Inc.	CT	CO/I	5,986,830	1,724,797	92,210,421	0	0	0	0
67598	04-1768571	11/01/1988	UnumProvident Corporation	MA	CO/I	713,457	251,278	15,347,854	0	0	0	0
0899999.	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates					9,766,372	2,991,970	110,874,898	0	0	0	0
1099999.	Total - General Account - Authorized - Non-Affiliates					9,766,372	2,991,970	110,874,898	0	0	0	0
1199999.	Total - General Account - Authorized					13,490,309	3,069,787	169,353,634	0	0	0	0
3499999.	Total - General Account - Authorized, Unauthorized and Certified					13,490,309	3,069,787	169,353,634	0	0	0	0
6999999.	Total - U.S.					13,490,309	3,069,787	169,353,634	0	0	0	0
9999999.	Total					13,490,309	3,069,787	169,353,634	0	0	0	0

SCHEDULE S - PART 4

Reinsurance Ceded To Unauthorized Companies

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Reserve Credit Taken	6 Paid and Unpaid Losses Recoverable (Debit)	7 Other Debits	8 Total (Cols. 5 + 6 + 7)	9 Letters of Credit	10 Issuing or Confirming Bank Reference Number (a)	11 Trust Agreements	12 Funds Deposited by and Withheld from Reinsurers	13 Other	14 Miscellaneous Balances (Credit)	15 Sum of Cols. 9 + 11 + 12 + 13 + 14 But Not in Excess of Col. 8
General Account - Life and Annuity - Affiliates - U.S. - Captive														
15363	80-0955278	12/31/2013	Kenwood Re Inc.	244,358,115	0	0	244,358,115	40,000,000	0002	87,479,589	0	173,904,179	406,504	244,358,115
15363	80-0955278	12/31/2013	Kenwood Re Inc.	2,574,800	0	0	2,574,800	0	0	2,574,800	0	0	0	2,574,800
13575	26-3791519	12/31/2008	Montgomery Re	8,640,720	0	0	8,640,720	0	0	7,749,469	0	0	891,251	8,640,720
13575	26-3791519	12/31/2008	Montgomery Re	79,709	0	0	79,709	0	0	64,474	0	0	15,235	79,709
13575	26-3791519	06/30/2009	Montgomery Re	57,351,549	0	0	57,351,549	0	0	54,275,254	0	0	3,076,295	57,351,549
13575	26-3791519	06/30/2009	Montgomery Re	883,221	0	0	883,221	0	0	813,293	0	0	69,928	883,221
13575	26-3791519	05/01/2011	Montgomery Re	122,797,852	0	0	122,797,852	0	0	125,034,092	0	0	0	122,797,852
13575	26-3791519	05/01/2011	Montgomery Re	170,359	0	0	170,359	0	0	117,234	0	0	53,125	170,359
13575	26-3791519	07/01/2012	Montgomery Re	107,148,694	0	0	107,148,694	0	0	100,630,410	0	0	6,518,284	107,148,694
13575	26-3791519	07/01/2012	Montgomery Re	1,325,733	0	0	1,325,733	0	0	1,172,797	0	0	152,936	1,325,733
0199999.	Total - General Account - Life and Annuity - Affiliates - U.S. - Captive			545,330,752	0	0	545,330,752	40,000,000	XXX	379,911,412	0	173,904,179	11,183,558	545,330,752
0399999.	Total - General Account - Life and Annuity - Affiliates - U.S. - Total			545,330,752	0	0	545,330,752	40,000,000	XXX	379,911,412	0	173,904,179	11,183,558	545,330,752
0799999.	Total - General Account - Life and Annuity - Affiliates			545,330,752	0	0	545,330,752	40,000,000	XXX	379,911,412	0	173,904,179	11,183,558	545,330,752
General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates														
00000	AA-3190770	01/01/2006	Ace Tempest Life Reinsurance	532	0	0	532	532	0001	0	0	0	0	532
00000	AA-3190770	01/01/2006	Ace Tempest Life Reinsurance	168,796	0	0	168,796	184,468	0001	0	0	0	0	168,796
0999999.	Total - General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates			169,328	0	0	169,328	185,000	XXX	0	0	0	0	169,328
1099999.	Total - General Account - Life and Annuity - Non-Affiliates			169,328	0	0	169,328	185,000	XXX	0	0	0	0	169,328
1199999.	Total - General Account - Life and Annuity			545,500,080	0	0	545,500,080	40,185,000	XXX	379,911,412	0	173,904,179	11,183,558	545,500,080
2399999.	Total - General Account			545,500,080	0	0	545,500,080	40,185,000	XXX	379,911,412	0	173,904,179	11,183,558	545,500,080
3599999.	Total - U.S.			545,330,752	0	0	545,330,752	40,000,000	XXX	379,911,412	0	173,904,179	11,183,558	545,330,752
3699999.	Total - Non-U.S.			169,328	0	0	169,328	185,000	XXX	0	0	0	0	169,328
9999999.	Total			545,500,080	0	0	545,500,080	40,185,000	XXX	379,911,412	0	173,904,179	11,183,558	545,500,080

(a)

Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
0001	2	121000248	Wells Fargo	185,000
0002	2	042000013	US Bank, NA	40,000,000

Sch. S-Pt. 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	303,873	323,959	255,677	193,458	144,844
2.	Commissions and reinsurance expense allowances	63,585	50,686	108,257	27,915	39,453
3.	Contract claims	160,974	160,380	160,901	135,057	103,194
4.	Surrender benefits and withdrawals for life contracts	0	0	0	0	0
5.	Dividends to policyholders	0	0	0	0	0
6.	Reserve adjustments on reinsurance ceded	0	0	0	0	0
7.	Increase in aggregate reserves for life and accident and health contracts	0	0	504,780	74,386	119,906
B.	**BALANCE SHEET ITEMS**					
8.	Premiums and annuity considerations for life and accident and health contracts deferred and uncollected	0	0	0	0	0
9.	Aggregate reserves for life and accident and health contracts	0	0	1,344,288	985,808	911,421
10.	Liability for deposit-type contracts	0	0	0	0	0
11.	Contract claims unpaid	14,394	16,773	25,702	14,399	16,861
12.	Amounts recoverable on reinsurance	7,791	8,961	12,686	7,661	8,682
13.	Experience rating refunds due or unpaid	0	0	0	0	0
14.	Policyholders' dividends (not included in Line 10)	0	0	0	0	0
15.	Commissions and reinsurance expense allowances due	0	0	0	0	0
16.	Unauthorized reinsurance offset	0	0	0	0	0
17.	Offset for reinsurance with certified reinsurers	0	0	XXX	XXX	XXX
C.	**UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)**					
18.	Funds deposited by and withheld from (F)	0	0	0	0	0
19.	Letters of credit (L)	40,185	0	145	150,000	150,810
20.	Trust agreements (T)	379,911	0	380,126	47,251	47,489
21.	Other (O)	173,904	0	0	0	0
D.	**REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)**					
22.	Multiple beneficiary trust	0	0	XXX	XXX	XXX
23.	Funds deposited by and withheld from (F)	0	0	XXX	XXX	XXX
24.	Letters of credit (L)	0	0	XXX	XXX	XXX
25.	Trust agreements (T)	0	0	XXX	XXX	XXX
26.	Other (O)	0	0	XXX	XXX	XXX

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

		1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
	ASSETS (Page 2, Col. 3)			
1.	Cash and invested assets (Line 12)	2,841,008,148	0	2,841,008,148
2.	Reinsurance (Line 16)	7,867,149	0	7,867,149
3.	Premiums and considerations (Line 15)	130,893,492	0	130,893,492
4.	Net credit for ceded reinsurance	XXX	1,894,262,228	1,894,262,228
5.	All other admitted assets (balance)	154,197,680	0	154,197,680
6.	Total assets excluding Separate Accounts (Line 26)	3,133,966,469	1,894,262,228	5,028,228,697
7.	Separate Account Assets (Line 27)	274,181,686	0	274,181,686
8.	Total assets (Line 28)	3,408,148,155	1,894,262,228	5,302,410,383
	LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9.	Contract reserves (Lines 1 and 2)	2,638,954,874	1,879,867,738	4,518,822,612
10.	Liability for deposit-type contracts (Line 3)	1,130,558	0	1,130,558
11.	Claim reserves (Line 4)	9,970,915	14,394,490	24,365,405
12.	Policyholder dividends/reserves (Lines 5 through 7)	0	0	0
13.	Premium & annuity considerations received in advance (Line 8)	521,512	0	521,512
14.	Other contract liabilities (Line 9)	10,145,475	0	10,145,475
15.	Reinsurance in unauthorized companies (Line 24.02 minus inset amount)	0	0	0
16.	Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount)	0	0	0
17.	Reinsurance with certified reinsurers (Line 24.02 inset amount)	0	0	0
18.	Funds held under reinsurance treaties with certified reinsurers (Line 24.03 inset amount)	0	0	0
19.	All other liabilities (balance)	156,467,007	0	156,467,007
20.	Total liabilities excluding Separate Accounts (Line 26)	2,817,190,341	1,894,262,228	4,711,452,569
21.	Separate Account liabilities (Line 27)	274,181,686	0	274,181,686
22.	Total liabilities (Line 28)	3,091,372,027	1,894,262,228	4,985,634,255
23.	Capital & surplus (Line 38)	316,776,128	XXX	316,776,128
24.	Total liabilities, capital & surplus (Line 39)	3,408,148,155	1,894,262,228	5,302,410,383
	NET CREDIT FOR CEDED REINSURANCE			
25.	Contract reserves	1,879,867,738		
26.	Claim reserves	14,394,490		
27.	Policyholder dividends/reserves	0		
28.	Premium & annuity considerations received in advance	0		
29.	Liability for deposit-type contracts	0		
30.	Other contract liabilities	0		
31.	Reinsurance ceded assets	0		
32.	Other ceded reinsurance recoverables	0		
33.	Total ceded reinsurance recoverables	1,894,262,228		
34.	Premiums and considerations	0		
35.	Reinsurance in unauthorized companies	0		
36.	Funds held under reinsurance treaties with unauthorized reinsurers	0		
37.	Reinsurance with certified reinsurers	0		
38.	Funds held under reinsurance treaties with certified reinsurers	0		
39.	Other ceded reinsurance payables/offsets	0		
40.	Total ceded reinsurance payables/offsets	0		
41.	Total net credit for ceded reinsurance	1,894,262,228		

SCHEDULE T - PART 2
INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN
Allocated by States and Territories

		Direct Business Only					
		1	2	3	4	5	6
	States, Etc.	Life (Group and Individual)	Annuities (Group and Individual)	Disability Income (Group and Individual)	Long-Term Care (Group and Individual)	Deposit-Type Contracts	Totals
1.	Alabama AL	8,713,674	240	372,354	0	0	9,086,268
2.	Alaska AK	112,183	0	2,650	0	0	114,833
3.	Arizona AZ	5,257,535	300	110,532	0	0	5,368,367
4.	Arkansas AR	15,037,188	0	66,638	0	0	15,103,826
5.	California CA	58,242,820	0	1,571,046	0	0	59,813,866
6.	Colorado CO	10,740,712	0	1,404,245	0	0	12,144,957
7.	Connecticut CT	16,291,341	0	121,981	0	0	16,413,322
8.	Delaware DE	615,320	0	23,276	0	0	638,596
9.	District of Columbia DC	693,764	0	35,517	0	0	729,281
10.	Florida FL	31,254,056	17,168	786,602	0	0	32,057,826
11.	Georgia GA	27,100,684	0	375,955	0	0	27,476,639
12.	Hawaii HI	111,570	0	12,016	0	0	123,586
13.	Idaho ID	3,866,472	0	235,334	0	0	4,101,806
14.	Illinois IL	22,800,051	0	361,347	0	0	23,161,398
15.	Indiana IN	22,797,271	0	257,308	0	0	23,054,579
16.	Iowa IA	4,957,344	0	158,349	0	0	5,115,693
17.	Kansas KS	11,486,149	35,500	332,330	0	0	11,853,979
18.	Kentucky KY	13,951,563	0	284,420	0	0	14,235,983
19.	Louisiana LA	3,556,884	0	185,959	0	0	3,742,843
20.	Maine ME	1,073,732	0	1,589	0	0	1,075,321
21.	Maryland MD	9,820,945	3,417	443,953	0	0	10,268,315
22.	Massachusetts MA	9,907,436	0	178,165	0	0	10,085,601
23.	Michigan MI	15,310,478	0	761,699	0	0	16,072,177
24.	Minnesota MN	8,968,411	0	217,105	0	0	9,185,516
25.	Mississippi MS	2,216,573	0	155,480	0	0	2,372,053
26.	Missouri MO	11,809,436	340	231,190	0	0	12,040,966
27.	Montana MT	2,683,198	0	40,562	0	0	2,723,760
28.	Nebraska NE	5,119,033	0	122,328	0	0	5,241,361
29.	Nevada NV	1,524,893	0	49,735	0	0	1,574,628
30.	New Hampshire NH	3,537,428	0	48,188	0	0	3,585,616
31.	New Jersey NJ	17,718,838	700	365,579	0	37,500	18,122,617
32.	New Mexico NM	2,538,021	0	36,371	0	0	2,574,392
33.	New York NY	1,123,541	0	43,097	0	0	1,166,638
34.	North Carolina NC	11,666,752	44,574	470,139	0	0	12,181,465
35.	North Dakota ND	1,067,691	0	45,218	0	0	1,112,909
36.	Ohio OH	42,116,347	0	1,468,957	0	68,514	43,653,818
37.	Oklahoma OK	4,734,764	0	136,047	0	0	4,870,811
38.	Oregon OR	5,896,186	0	283,783	0	0	6,179,969
39.	Pennsylvania PA	16,991,400	126,802	972,365	0	0	18,090,567
40.	Rhode Island RI	2,377,815	0	15,621	0	0	2,393,436
41.	South Carolina SC	5,222,499	0	77,313	0	0	5,299,812
42.	South Dakota SD	501,326	0	18,636	0	0	519,962
43.	Tennessee TN	20,763,892	3,329	466,684	0	0	21,233,905
44.	Texas TX	47,384,997	113	1,199,293	0	0	48,584,403
45.	Utah UT	5,299,472	0	43,665	0	0	5,343,137
46.	Vermont VT	585,853	0	5,563	0	0	591,416
47.	Virginia VA	12,713,720	6,255	353,521	0	0	13,073,496
48.	Washington WA	7,607,813	0	393,379	0	0	8,001,192
49.	West Virginia WV	1,418,277	5,400	269,625	0	0	1,693,302
50.	Wisconsin WI	13,849,715	0	389,143	0	0	14,238,858
51.	Wyoming WY	940,546	0	32,886	0	0	973,432
52.	American Samoa AS	0	0	0	0	0	0
53.	Guam GU	0	0	0	0	0	0
54.	Puerto Rico PR	4,315,952	0	590,619	0	0	4,906,571
55.	US Virgin Islands VI	15,264	0	0	0	0	15,264
56.	Northern Mariana Islands MP	0	0	0	0	0	0
57.	Canada CAN	6,593	0	0	0	0	6,593
58.	Aggregate Other Alien OT	0	0	0	0	0	0
59.	Totals	556,415,418	244,138	16,625,357	0	106,014	573,390,927

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 Federal ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 *
Members														
0704	Ohio National Mutual, Inc.	0	31-1614095	0	0		Ohio National Mutual, Inc.	OH	UIP		Ownership, Board of Directors, Management	0.000		0
0704	Ohio National Mutual, Inc.	0	31-1614097	0	0		Ohio National Financial Sevices, Inc.	OH	UIP	Ohio National Mutual, Inc.	Ownership, Board of Directors, Management	100.000	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0	98-0602966	0	0		Sycamore Re, Ltd	DE	IA	Ohio National Financial Services, Inc.	Ownership, Board of Directors, Management	100.000	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0	31-1702660	0	0		ON Global Holdings, LLC	OH	NIA	Sycamore Re LTD	Ownership, Board of Directors, Management	100.000	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0		0	0		Ohio National Sudamerica S.A. (ONSA)	CHL	NIA	ON Global Holding, LLC	Ownership, Board of Directors, Management	100.000	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0		0	0		Ohio National Sudamerica S.A. (ONSV)	CHL	IA	Ohio National Sudamerica S.A. (ONSA)	Ownership, Board of Directors, Management	100.000	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0		0	0		Ohio National Seguros de Vida S.A. (ONSP)	PER	IA	Ohio National Sudamerica S.A. (ONSV)	Ownership, Board of Directors, Management	100.000	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0	46-3873878	0	0		Ohio National Foreign Holdings, LLC	OH	NIA	Sycamore Re LTD	Ownership, Board of Directors, Management	100.000	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0		0	0		Ohio National International Holdings Cooperatief U.A.	NLD	NIA	Ohio National Foreign Holdings, LLC	Ownership, Board of Directors, Management	100.000	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0		0	0		ON Netherlands Holdings B.V.	NLD	NIA	Ohio National International Holdings Cooperatief U.A.	Ownership, Board of Directors, Management	100.000	Ohio National Mutual, Inc.	0

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 Federal ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 *
0704	Ohio National Mutual, Inc.	0	06-1187459	0	0		Fiduciary Capital Management, Inc.	CT	NIA	Ohio National Financial Services, Inc.	Ownership, Board of Directors, Management	60.800	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	67172	31-0397080	0	0		The Ohio National Life Insurance Company	OH	UDP	Ohio National Financial Services, Inc.	Ownership, Board of Directors, Management	100.000	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	89206	31-0962495	0	0		Ohio National Life Assurance Coporation	OH	IA	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.000	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	85472	13-2740556	0	0		National Security Life and Annuity Company	NY		The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.000	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	13575	26-3791519	0	0		Montgomery Re, Inc.	VT	IA	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.000	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	15363	80-0955278	0	0		Kenwood Re, Inc.	VT	IA	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.000	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0	31-1454693	0	0		Ohio National Investments, Inc.	OH	NIA	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.000	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0	31-1454699	0	0		Ohio National Equities, Inc.	OH	NIA	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.000	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0	31-0742113	0	0		The O.N. Equity Sales Company	OH	NIA	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.000	Ohio National Mutual, Inc.	0
0704	Ohio National Mutual, Inc.	0	32-0071428	0	0		Ohio National Insurance Agency, Inc.	OH	NIA	The O.N. Equity Sales Company	Ownership, Board of Directors, Management	100.000	Ohio National Mutual, Inc.	0

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 Federal ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 *
0704......	Ohio National Mutual, Inc................	0.............	31-0784369	0.................	0.................	....	O.N. Investment Management Company................	OH............	NIA...............	The O.N. Equity Sales Company........................	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual, Inc..................................	0...........
0704......	Ohio National Mutual, Inc................	0.............	63-1202147	0.................	0.................	....	Ohio National insurance Agency of Alabama, Inc...	AL.............	NIA...............	The O.N. Equity Sales Company........................	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual, Inc..................................	0...........
0704......	Ohio National Mutual, Inc................	0.............	31-1684349	0.................	0.................	....	ON Flight, Inc..	OH............	NIA...............	Ohio National Financial Services, Inc.................	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual, Inc..................................	0...........
0704......	Ohio National Mutual, Inc................	0.............	26-4812790	0.................	0.................	....	Financial Way Realty, Inc.......................................	OH............	NIA...............	Ohio National Financial Services, Inc.................	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual, Inc..................................	0...........
0704......	Ohio National Mutual, Inc................	0.............	03-0374493	0.................	0.................	....	Suffolk Capital Management, LLC.........................	NY............	NIA...............	Ohio National Financial Services, Inc.................	Ownership, Board of Directors, Management	.....83.000	Ohio National Mutual, Inc..................................	0...........

SCHEDULE Y

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

1 NAIC Company Code	2 Federal ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
Affiliated Transactions												
00000	31-1614095	Ohio National Mutual Holdings, Inc.	0	0	0	0	0	0		0	0	0
00000	31-1614097	Ohio National Financial Services	0	0	(1,800,000)	0	0	0		0	(1,800,000)	0
67172	31-0397080	The Ohio National Life Insurance Company	31,000,000	0	0	0	52,593,000	(31,168,746)		0	52,424,254	(590,306,207)
89206	31-0962495	Ohio National Life Assurance Corporation	(31,000,000)	0	1,800,000	0	(52,596,605)	136,368,058		0	54,571,453	1,143,996,836
00000	31-1702660	ON Global Holdings, LLC	0	0	0	0	0	0		0	0	0
00000	00-0000000	Ohio National Sudamerica S.A.	0	0	0	0	0	0		0	0	0
00000	00-0000000	Ohio National Seguros de Vida S.A.	0	0	0	0	0	0		0	0	0
00000	06-1187459	Fiduciary Capital Management, Inc.	0	0	0	0	0	0		0	0	0
00000	31-1684349	ON Flight, Inc.	0	0	0	0	0	0		0	0	0
00000	03-0374493	Suffolk Capital Management, LLC	0	0	0	0	0	0		0	0	0
85472	13-2740556	National Security Life and Annuity Co.	0	0	0	0	0	0		0	0	0
00000	31-1454693	Ohio National Investments, Inc.	0	0	0	0	0	0		0	0	0
00000	31-1454699	Ohio National Equities, Inc.	0	0	0	0	2,347	0		0	2,347	0
00000	31-0742113	The O.N. Equity Sales Company	0	0	0	0	1,258	0		0	1,258	0
00000	32-0071428	Ohio National Insurance Agency, Inc.	0	0	0	0	0	0		0	0	0
00000	31-0784369	O.N. Investment Management Company	0	0	0	0	0	0		0	0	0
00000	63-1202147	O.N. Insurance Agency of Alabama, Inc.	0	0	0	0	0	0		0	0	0
00000	98-0602966	Sycamore Re, Ltd.	0	0	0	0	0	0		0	0	0
13575	26-3791519	Montgomery Re, Inc.	0	0	0	0	0	53,390,049		0	53,390,049	(306,757,714)
00000	26-4812790	Financial Way Reality, Inc.	0	0	0	0	0	0		0	0	0
15363	80-0955278	Kenwood Re , Inc.	0	0	0	0	0	(158,589,361)		0	(158,589,361)	(246,932,915)
00000	46-3873878	O.N. Foreign Holdings, LLC	0	0	0	0	0	0		0	0	0
00000	00-0000000	Ohio National International Holdings Cooperatief U.A.	0	0	0	0	0	0		0	0	0
00000	00-0000000	O.N. Netherlands Holdings B.V.	0	0	0	0	0	0		0	0	0
00000	00-0000000	Ohio National Seguros de Vida S.A.	0	0	0	0	0	0		0	0	0
9999999.	Control Totals		0	0	0	0	0	0	XXX	0	0	0

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

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

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

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

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

EXPLANATIONS:	BAR CODE:
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	* 8 9 2 0 6 2 0 1 3 4 2 0 0 0 0 0 0 *
13.	* 8 9 2 0 6 2 0 1 3 3 6 0 0 0 0 0 0 *
14.	* 8 9 2 0 6 2 0 1 3 4 9 0 0 0 0 0 0 *
15.	* 8 9 2 0 6 2 0 1 3 3 7 1 0 0 0 0 0 *
16.	
17.	
18.	* 8 9 2 0 6 2 0 1 3 4 4 3 0 0 0 0 0 *
19.	* 8 9 2 0 6 2 0 1 3 4 4 4 0 0 0 0 0 *
20.	* 8 9 2 0 6 2 0 1 3 4 4 5 0 0 0 0 0 *
21.	* 8 9 2 0 6 2 0 1 3 4 4 6 0 0 0 0 0 *
22.	* 8 9 2 0 6 2 0 1 3 4 4 7 0 0 0 0 0 *
23.	* 8 9 2 0 6 2 0 1 3 4 4 8 0 0 0 0 0 *
24.	* 8 9 2 0 6 2 0 1 3 4 4 9 0 0 0 0 0 *
25.	
26.	
27.	* 8 9 2 0 6 2 0 1 3 4 5 2 0 0 0 0 0 *
28.	* 8 9 2 0 6 2 0 1 3 4 5 3 0 0 0 0 0 *
29.	* 8 9 2 0 6 2 0 1 3 4 3 6 0 0 0 0 0 *
30.	* 8 9 2 0 6 2 0 1 3 4 3 7 0 0 0 0 0 *
31.	* 8 9 2 0 6 2 0 1 3 4 3 8 0 0 0 0 0 *
32.	* 8 9 2 0 6 2 0 1 3 4 3 9 0 0 0 0 0 *
33.	
34.	* 8 9 2 0 6 2 0 1 3 4 9 5 0 0 0 0 0 *

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

35.

36. *89206201336500000*

37. *89206201322400000*

38. *89206201322500000*

39. *89206201322600000*

40. *89206201330600000*

41.

42. *89206201323000000*

43.

44.

45.

46. *89206201321600000*

47. *89206201321700000*

48.

Overflow Page for Write-Ins

Additional Write-ins for Exhibit 2:

	Insurance				5	6
	1	Accident and Health		4		
		2	3	All Other Lines		
	Life	Cost Containment	All Other	of Business	Investment	Total
09.304. Regional General Agent Development	37,220	0	1,888	0	0	39,108
09.397. Summary of remaining write-ins for Line 9.3	37,220	0	1,888	0	0	39,108

Overflow Page for Write-Ins

NONE

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

SCHEDULE O SUPPLEMENT

For the year ended December 31, 2013
(To Be Filed March 1)

NONE

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

SUPPLEMENTAL SCHEDULE O - PART 1

Development of Incurred Losses
($000 OMITTED)

Section A - Group Accident and Health

NONE

Year in Which Losses Were Incurred	Net Amounts Paid Policyholders				
	1 2009	2 2010	3 2011	4 2012	5 2013 (a)
1. Prior	0	0	0	0	0
2. 2009	0	0	0	0	0
3. 2010	XXX	0	0	0	0
4. 2011	XXX	XXX	0	0	0
5. 2012	XXX	XXX	XXX	0	0
6. 2013	XXX	XXX	XXX	XXX	0

Section B - Other Accident and Health

1. Prior	2,914	2,283	2,886	2,362	2,007
2. 2009	158	320	147	138	197
3. 2010	XXX	619	144	199	135
4. 2011	XXX	XXX	68	225	303
5. 2012	XXX	XXX	XXX	75	209
6. 2013	XXX	XXX	XXX	XXX	77

Section C - Credit Accident and Health

NONE

1. Prior	0	0	0	0	0
2. 2009	0	0	0	0	0
3. 2010	XXX	0	0	0	0
4. 2011	XXX	XXX	0	0	0
5. 2012	XXX	XXX	XXX	0	0
6. 2013	XXX	XXX	XXX	XXX	0

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

SCHEDULE O SUPPLEMENT
SUPPLEMENTAL SCHEDULE O - PART 2

Development of Incurred Losses

($000 OMITTED)

Section A - Group Accident and Health

NONE

Year in Which Losses Were Incurred	Net Amounts Paid for Cost Containment Expenses 1 2009	2 2010	3 2011	4 2012	5 2013
1. Prior	0	0	0	0	0
2. 2009	0	0	0	0	0
3. 2010	XXX	0	0	0	0
4. 2011	XXX	XXX	0	0	0
5. 2012	XXX	XXX	XXX	0	0
6. 2013	XXX	XXX	XXX	XXX	0

Section B - Other Accident and Health

1. Prior	0	0	0	0	0
2. 2009	111	0	0	0	0
3. 2010	XXX	0	0	0	0
4. 2011	XXX	XXX	0	0	0
5. 2012	XXX	XXX	XXX	0	0
6. 2013	XXX	XXX	XXX	XXX	0

Section C - Credit Accident and Health

NONE

1. Prior	0	0	0	0	0
2. 2009	0	0	0	0	0
3. 2010	XXX	0	0	0	0
4. 2011	XXX	XXX	0	0	0
5. 2012	XXX	XXX	XXX	0	0
6. 2013	XXX	XXX	XXX	XXX	0

SCHEDULE O SUPPLEMENT
SUPPLEMENTAL SCHEDULE O - PART 3

Development of Incurred Losses

($000 OMITTED)

Section A - Group Accident and Health

NONE

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders and Claim Liability and Reserve Outstanding at End of Year 1 2009	2 2010	3 2011	4 2012	5 2013
1. 2009	0	0	0	XXX	XXX
2. 2010	XXX	0	0	0	XXX
3. 2011	XXX	XXX	0	0	0
4. 2012	XXX	XXX	XXX	0	0
5. 2013	XXX	XXX	XXX	XXX	0

Section B - Other Accident and Health

1. 2009	1,875	1,234	880	XXX	XXX
2. 2010	XXX	2,663	955	612	XXX
3. 2011	XXX	XXX	1,672	1,167	1,218
4. 2012	XXX	XXX	XXX	1,932	1,071
5. 2013	XXX	XXX	XXX	XXX	1,885

Section C - Credit Accident and Health

NONE

1. 2009	0	0	0	XXX	XXX
2. 2010	XXX	0	0	0	XXX
3. 2011	XXX	XXX	0	0	0
4. 2012	XXX	XXX	XXX	0	0
5. 2013	XXX	XXX	XXX	XXX	0

SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O - PART 4

Development of Incurred Losses

($000 OMITTED)

Section A - Group Accident and Health

NONE

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at End of Year				
	1 2009	2 2010	3 2011	4 2012	5 2013
1. 2009	0	0	0	0	0
2. 2010	XXX	0	0	0	0
3. 2011	XXX	XXX	0	0	0
4. 2012	XXX	XXX	XXX	0	0
5. 2013	XXX	XXX	XXX	XXX	0

Section B - Other Accident and Health

1. 2009	1,875	1,234	880	873	878
2. 2010	XXX	2,663	955	612	517
3. 2011	XXX	XXX	1,672	1,167	1,218
4. 2012	XXX	XXX	XXX	1,932	1,071
5. 2013	XXX	XXX	XXX	XXX	1,885

Section C - Credit Accident and Health

NONE

1. 2009	0	0	0	0	0
2. 2010	XXX	0	0	0	0
3. 2011	XXX	XXX	0	0	0
4. 2012	XXX	XXX	XXX	0	0
5. 2013	XXX	XXX	XXX	XXX	0

SUPPLEMENTAL SCHEDULE O - PART 5

($000 OMITTED)

Reserve and Liability Methodology - Exhibits 6 and 8

Line of Business	1 Methodology	2 Amount
1. Industrial life		0
2. Ordinary life		9,753
3. Individual annuity		0
4. Supplementary contracts		0
5. Credit life		0
6. Group life		0
7. Group annuities		0
8. Group accident and health		0
9. Credit accident and health		0
10. Other accident and health	Standard Factor and Other	21,018
11. Total		30,771

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

2013 ALPHABETICAL INDEX
LIFE ANNUAL STATEMENT BLANK

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