



QUARTERLY STATEMENT

As of September 30, 2014
of the Condition and Affairs of the

United Benefit Life Insurance Company

NAIC Group Code.....0901, 0901 (Current Period) (Prior Period)	NAIC Company Code..... 65269	Employer's ID Number..... 75-2305400
Organized under the Laws of Ohio	State of Domicile or Port of Entry Ohio	Country of Domicile US
Incorporated/Organized..... June 26, 1957	Commenced Business..... August 13, 1957	
Statutory Home Office	1300 East Ninth Street..... Cleveland OH US 44114 <i>(Street and Number) (City or Town, State, Country and Zip Code)</i>	
Main Administrative Office	11200 Lakeline Blvd Ste 100..... Austin TX US 78717 <i>(Street and Number) (City or Town, State, Country and Zip Code)</i>	512-451-2224 <i>(Area Code) (Telephone Number)</i>
Mail Address	11200 Lakeline Blvd Ste 100..... Austin TX US 78717 <i>(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)</i>	
Primary Location of Books and Records	11200 Lakeline Blvd Ste 100..... Austin TX US 78717 <i>(Street and Number) (City or Town, State, Country and Zip Code)</i>	512-451-2224 <i>(Area Code) (Telephone Number)</i>
Internet Web Site Address		
Statutory Statement Contact	Jesse Navarrete <i>(Name)</i> CSBFinRpt@cigna.com <i>(E-Mail Address)</i>	512-807-4801 <i>(Area Code) (Telephone Number) (Extension)</i> 512-467-1399 <i>(Fax Number)</i>

OFFICERS

Name	Title	Name	Title
1. Brian Case Evanko #	President	2. Byron Keith Buescher	Treasurer
3. Brenda Weigilia Hardison	Secretary	4. James Monroe Garvin III	Actuary
OTHER			
Maureen Hardiman Ryan	Assistant Treasurer	Jessika Kierulf Tutwiler #	Chief Financial Officer
David Lawrence Chambers #	Vice President	Man-Kit Simon Tang #	Chief Actuary
Eric Paul Palmer	Vice President	Mark Fleming #	Assistant Treasurer
Joanne Ruth Hart #	Assistant Treasurer	Scott Ronald Lambert #	Assistant Treasurer

DIRECTORS OR TRUSTEES

Brian Case Evanko #	Jessica Kierulf Tutwiler #	Eric Paul Palmer	Frank Sataline, Jr.
James Yablecki #			

State of..... Texas
County of..... Williamson

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) Brian Case Evanko 1. (Printed Name) President (Title)	_____ (Signature) Byron Keith Buescher 2. (Printed Name) Treasurer (Title)	_____ (Signature) Brenda Weigilia Hardison 3. (Printed Name) Secretary (Title)
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Subscribed and sworn to before me
This _____ day of _____ November, 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 _____

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds.....	1,722,015		1,722,015	1,727,152
2. Stocks:				
2.1 Preferred stocks.....			.0	
2.2 Common stocks.....			.0	
3. Mortgage loans on real estate:				
3.1 First liens.....			.0	
3.2 Other than first liens.....			.0	
4. Real estate:				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....			.0	
4.2 Properties held for the production of income (less \$.....0 encumbrances).....			.0	
4.3 Properties held for sale (less \$.....0 encumbrances).....			.0	
5. Cash (\$.....23,390), cash equivalents (\$.....0) and short-term investments (\$.....1,302,891).....	1,326,281		1,326,281	1,381,619
6. Contract loans (including \$.....0 premium notes).....			.0	
7. Derivatives.....			.0	
8. Other invested assets.....			.0	
9. Receivables for securities.....			.0	
10. Securities lending reinvested collateral assets.....			.0	
11. Aggregate write-ins for invested assets.....	.0	.0	.0	.0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	3,048,296	.0	3,048,296	3,108,771
13. Title plants less \$.....0 charged off (for Title insurers only).....			.0	
14. Investment income due and accrued.....	1,349		1,349	4,501
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....			.0	
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....			.0	
15.3 Accrued retrospective premiums.....			.0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....			.0	
16.2 Funds held by or deposited with reinsured companies.....			.0	
16.3 Other amounts receivable under reinsurance contracts.....			.0	
17. Amounts receivable relating to uninsured plans.....			.0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....			.0	
18.2 Net deferred tax asset.....			.0	
19. Guaranty funds receivable or on deposit.....	.27		.27	
20. Electronic data processing equipment and software.....			.0	
21. Furniture and equipment, including health care delivery assets (\$.....0).....			.0	
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			.0	
23. Receivables from parent, subsidiaries and affiliates.....			.0	
24. Health care (\$.....0) and other amounts receivable.....			.0	
25. Aggregate write-ins for other than invested assets.....	.114	.0	.114	.0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	3,049,786	.0	3,049,786	3,113,272
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			.0	
28. Total (Lines 26 and 27).....	3,049,786	.0	3,049,786	3,113,272

DETAILS OF WRITE-INS

1101.....			.0	
1102.....			.0	
1103.....			.0	
1198. Summary of remaining write-ins for Line 11 from overflow page.....	.0	.0	.0	.0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	.0	.0	.0	.0
2501. Other Receivables.....	.114		.114	
2502.....			.0	
2503.....			.0	
2598. Summary of remaining write-ins for Line 25 from overflow page.....	.0	.0	.0	.0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	.114	.0	.114	.0

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31 Prior Year
1. Aggregate reserve for life contracts \$.....0 less \$.....0 included in Line 6.3 (including \$.....0 Modco Reserve).....		
2. Aggregate reserve for accident and health contracts (including \$.....0 Modco Reserve).....		
3. Liability for deposit-type contracts (including \$.....0 Modco Reserve).....		
4. Contract claims:		
4.1 Life.....		
4.2 Accident and health.....		
5. Policyholders' dividends \$.....0 and coupons \$.....0 due and unpaid.....		
6. Provision for policyholders' dividends and coupons payable in following calendar year - estimated amounts:		
6.1 Dividends apportioned for payment (including \$.....0 Modco).....		
6.2 Dividends not yet apportioned (including \$.....0 Modco).....		
6.3 Coupons and similar benefits (including \$.....0 Modco).....		
7. Amount provisionally held for deferred dividend policies not included in Line 6.....		
8. Premiums and annuity considerations for life and accident and health contracts received in advance less \$.....0 discount; including \$.....0 accident and health premiums.....		
9. Contract liabilities not included elsewhere:		
9.1 Surrender values on canceled contracts.....		
9.2 Provision for experience rating refunds, including the liability of \$.....0 accident and health experience rating refunds of which \$.....0 is for medical loss ratio rebate per the Public Health Service Act.....		
9.3 Other amounts payable on reinsurance, including \$.....0 assumed and \$.....0 ceded.....		
9.4 Interest Maintenance Reserve.....	48,193	50,163
10. Commissions to agents due or accrued - life and annuity contracts \$.....0, accident and health \$.....0 and deposit-type contract funds \$.....0.....		
11. Commissions and expense allowances payable on reinsurance assumed.....		
12. General expenses due or accrued.....	1,473	
13. Transfers to Separate Accounts due or accrued (net) (including \$.....0 accrued for expense allowances recognized in reserves, net of reinsured allowances).....		
14. Taxes, licenses and fees due or accrued, excluding federal income taxes.....	2,819	1,927
15.1 Current federal and foreign income taxes, including \$.....0 on realized capital gains (losses).....		
15.2 Net deferred tax liability.....		
16. Unearned investment income.....		
17. Amounts withheld or retained by company as agent or trustee.....		
18. Amounts held for agents' account, including \$.....0 agents' credit balances.....		
19. Remittances and items not allocated.....		
20. Net adjustment in assets and liabilities due to foreign exchange rates.....		
21. Liability for benefits for employees and agents if not included above.....		
22. Borrowed money \$.....0 and interest thereon \$.....0.....		
23. Dividends to stockholders declared and unpaid.....		
24. Miscellaneous liabilities:		
24.01 Asset valuation reserve.....	1,696	1,075
24.02 Reinsurance in unauthorized and certified (\$.....0) companies.....		
24.03 Funds held under reinsurance treaties with unauthorized and certified (\$.....0) reinsurers.....		
24.04 Payable to parent, subsidiaries and affiliates.....	6,629	391
24.05 Drafts outstanding.....		
24.06 Liability for amounts held under uninsured plans.....		
24.07 Funds held under coinsurance.....		
24.08 Derivatives.....		
24.09 Payable for securities.....		
24.10 Payable for securities lending.....		
24.11 Capital notes \$.....0 and interest thereon \$.....0.....		
25. Aggregate write-ins for liabilities.....	0	0
26. Total liabilities excluding Separate Accounts business (Lines 1 to 25).....	60,810	53,556
27. From Separate Accounts statement.....		
28. Total liabilities (Lines 26 and 27).....	60,810	53,556
29. Common capital stock.....	1,500,000	1,500,000
30. Preferred capital stock.....		
31. Aggregate write-ins for other than special surplus funds.....	0	0
32. Surplus notes.....		
33. Gross paid in and contributed surplus.....	18,820,665	18,820,665
34. Aggregate write-ins for special surplus funds.....	0	0
35. Unassigned funds (surplus).....	(17,331,689)	(17,260,949)
36. Less treasury stock, at cost:		
36.10.000 shares common (value included in Line 29 \$.....0).....		
36.20.000 shares preferred (value included in Line 30 \$.....0).....		
37. Surplus (Total Lines 31 + 32 + 33 + 34 + 35 - 36) (including \$.....0 in Separate Accounts Statement).....	1,488,976	1,559,716
38. Totals of Lines 29, 30 and 37.....	2,988,976	3,059,716
39. Totals of Lines 28 and 38 (Page 2, Line 28, Col. 3).....	3,049,786	3,113,272

DETAILS OF WRITE-INS

2501.		
2502.		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	0
3101.		
3102.		
3103.		
3198. Summary of remaining write-ins for Line 31 from overflow page.....	0	0
3199. Totals (Lines 3101 thru 3103 plus 3198) (Line 31 above).....	0	0
3401.		
3402.		
3403.		
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	0	0

SUMMARY OF OPERATIONS

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
1. Premiums and annuity considerations for life and accident and health contracts.....			
2. Considerations for supplementary contracts with life contingencies.....			
3. Net investment income.....	3,035	4,435	5,689
4. Amortization of Interest Maintenance Reserve (IMR).....	1,970	1,858	2,478
5. Separate Accounts net gain from operations excluding unrealized gains or losses.....			
6. Commissions and expense allowances on reinsurance ceded.....			
7. Reserve adjustments on reinsurance ceded.....			
8. Miscellaneous Income:			
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts.....			
8.2 Charges and fees for deposit-type contracts.....			
8.3 Aggregate write-ins for miscellaneous income.....	6,804	6,283	8,066
9. Totals (Lines 1 to 8.3).....	11,809	12,576	16,233
10. Death benefits.....			
11. Matured endowments (excluding guaranteed annual pure endowments).....			
12. Annuity benefits.....			
13. Disability benefits and benefits under accident and health contracts.....			
14. Coupons, guaranteed annual pure endowments and similar benefits.....			
15. Surrender benefits and withdrawals for life contracts.....			
16. Group conversions.....			
17. Interest and adjustments on contract or deposit-type contract funds.....			
18. Payments on supplementary contracts with life contingencies.....			
19. Increase in aggregate reserves for life and accident and health contracts.....			
20. Totals (Lines 10 to 19).....	0	0	0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only).....			
22. Commissions and expense allowances on reinsurance assumed.....			
23. General insurance expenses.....	36,391	5,023	33,742
24. Insurance taxes, licenses and fees, excluding federal income taxes.....	46,346	46,378	42,226
25. Increase in loading on deferred and uncollected premiums.....			
26. Net transfers to or (from) Separate Accounts net of reinsurance.....			
27. Aggregate write-ins for deductions.....	0	50	50
28. Totals (Lines 20 to 27).....	82,737	51,451	76,018
29. Net gain from operations before dividends to policyholders and federal income taxes (Line 9 minus Line 28).....	(70,928)	(38,875)	(59,785)
30. Dividends to policyholders.....			
31. Net gain from operations after dividends to policyholders and before federal income taxes (Line 29 minus Line 30).....	(70,928)	(38,875)	(59,785)
32. Federal and foreign income taxes incurred (excluding tax on capital gains).....			
33. Net gain from operations after dividends to policyholders and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32).....	(70,928)	(38,875)	(59,785)
34. Net realized capital gains (losses) (excluding gains (losses) transferred to the IMR) less capital gains tax of \$.....0 (excluding taxes of \$.....0 transferred to the IMR).....			
35. Net income (Line 33 plus Line 34).....	(70,928)	(38,875)	(59,785)
CAPITAL AND SURPLUS ACCOUNT			
36. Capital and surplus, December 31, prior year.....	3,059,716	3,120,250	3,120,250
37. Net income (Line 35).....	(70,928)	(38,875)	(59,785)
38. Change in net unrealized capital gains (losses) less capital gains tax of \$.....0.....			
39. Change in net unrealized foreign exchange capital gain (loss).....			
40. Change in net deferred income tax.....		4,661	(494,697)
41. Change in nonadmitted assets.....	809	(4,474)	494,948
42. Change in liability for reinsurance in unauthorized and certified companies.....			
43. Change in reserve on account of change in valuation basis, (increase) or decrease.....			
44. Change in asset valuation reserve.....	(621)	(769)	(1,000)
45. Change in treasury stock.....			
46. Surplus (contributed to) withdrawn from Separate Accounts during period.....			
47. Other changes in surplus in Separate Accounts Statement.....			
48. Change in surplus notes.....			
49. Cumulative effect of changes in accounting principles.....			
50. Capital changes:			
50.1 Paid in.....			
50.2 Transferred from surplus (Stock Dividend).....			
50.3 Transferred to surplus.....			
51. Surplus adjustment:			
51.1 Paid in.....			
51.2 Transferred to capital (Stock Dividend).....			
51.3 Transferred from capital.....			
51.4 Change in surplus as a result of reinsurance.....			
52. Dividends to stockholders.....			
53. Aggregate write-ins for gains and losses in surplus.....	0	0	0
54. Net change in capital and surplus (Lines 37 through 53).....	(70,740)	(39,457)	(60,534)
55. Capital and surplus as of statement date (Lines 36 + 54).....	2,988,976	3,080,793	3,059,716

DETAILS OF WRITE-INS

08.301. Miscellaneous Income.....	6,804	6,283	8,066
08.302.			
08.303.			
08.398. Summary of remaining write-ins for Line 8.3 from overflow page.....	0	0	0
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above).....	6,804	6,283	8,066
2701. Penalties.....		50	50
2702.			
2703.			
2798. Summary of remaining write-ins for Line 27 from overflow page.....	0	0	0
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above).....	0	50	50
5301.			
5302.			
5303.			
5398. Summary of remaining write-ins for Line 53 from overflow page.....	0	0	0
5399. Totals (Lines 5301 thru 5303 plus 5398) (Line 53 above).....	0	0	0

CASH FLOW

	1 Current Year to Date	2 Prior Year To Date	3 Prior Year Ended December 31
CASH FROM OPERATIONS			
1. Premiums collected net of reinsurance.....			
2. Net investment income.....	11,324	19,547	19,405
3. Miscellaneous income.....	6,804	6,283	8,066
4. Total (Lines 1 through 3).....	18,128	25,830	27,471
5. Benefit and loss related payments.....			
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			
7. Commissions, expenses paid and aggregate write-ins for deductions.....	80,399	49,214	74,091
8. Dividends paid to policyholders.....			
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....		5,054	5,054
10. Total (Lines 5 through 9).....	80,399	54,268	79,145
11. Net cash from operations (Line 4 minus Line 10).....	(62,271)	(28,438)	(51,674)
CASH FROM INVESTMENTS			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.....		1,100,000	1,100,000
12.2 Stocks.....			
12.3 Mortgage loans.....			
12.4 Real estate.....			
12.5 Other invested assets.....			
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....			
12.7 Miscellaneous proceeds.....			
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	0	1,100,000	1,100,000
13. Cost of investments acquired (long-term only):			
13.1 Bonds.....		833,977	833,977
13.2 Stocks.....			
13.3 Mortgage loans.....			
13.4 Real estate.....			
13.5 Other invested assets.....			
13.6 Miscellaneous applications.....		25	
13.7 Total investments acquired (Lines 13.1 to 13.6).....	0	834,002	833,977
14. Net increase or (decrease) in contract loans and premium notes.....			
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14).....	0	265,998	266,023
CASH FROM FINANCING AND MISCELLANEOUS SOURCES			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes.....			
16.2 Capital and paid in surplus, less treasury stock.....			
16.3 Borrowed funds.....			
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....			
16.5 Dividends to stockholders.....			
16.6 Other cash provided (applied).....	6,933	(47)	407
17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6).....	6,933	(47)	407
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	(55,338)	237,513	214,756
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	1,381,619	1,166,863	1,166,863
19.2 End of period (Line 18 plus Line 19.1).....	1,326,281	1,404,376	1,381,619

Note: Supplemental disclosures of cash flow information for non-cash transactions:

20.0001			
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EXHIBIT 1

DIRECT PREMIUMS AND DEPOSIT-TYPE CONTRACTS

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
1. Industrial life.....			
2. Ordinary life insurance.....			
3. Ordinary individual annuities.....			
4. Credit life (group and individual).....			
5. Group life insurance.....			
6. Group annuities.....			
7. A&H - group.....			
8. A&H - credit (group and individual).....			
9. A&H - other.....			
10. Aggregate of all other lines of business.....	.0	.0	.0
11. Subtotal.....	.0	.0	.0
12. Deposit-type contracts.....			
13. Total.....	.0	.0	.0

NONE

DETAILS OF WRITE-INS

1001.			
1002.			
1003.			
1098. Summary of remaining write-ins for Line 10 from overflow page.....	.0	.0	.0
1099. Total (Lines 1001 thru 1003 plus 1098) (Line 10 above).....	.0	.0	.0

NOTES TO FINANCIAL STATEMENTS**Note 1 - Summary of Significant Accounting Policies**

A. Accounting Practices and Procedures

The financial statements of United Benefit Life Insurance Company ("UBLIC" or "the Company") are presented on the basis of accounting practices prescribed or permitted by the Ohio Department of Insurance.

The Ohio Department of Insurance recognizes only Statutory Accounting Practices prescribed or permitted by the State of Ohio for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Ohio Insurance Law. The National Association of Insurance Commissioners ("NAIC") *Accounting Practices and Procedures Manual* ("NAIC SAP") has been adopted as a component of prescribed or permitted practices by the State of Ohio.

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the State of Ohio is shown below:

	State of Domicile	2014	2013
Net Income			
1) United Benefit Life Insurance Company state basis (Page 4, Line 35, Columns 1 & 3)	OH	\$ (70,928)	\$ (59,785)
2) State Prescribed Practices that increase/decrease NAIC SAP		-	-
3) State Permitted Practices that increase/decrease NAIC SAP		-	-
4) NAIC SAP (1 – 2 – 3 = 4)	OH	\$ (70,928)	\$ (59,785)
Surplus			
5) United Benefit Life Insurance Company state basis (Page 3, line 38, Columns 1 & 2)	OH	\$ 2,988,976	\$ 3,059,716
6) State Prescribed Practices that increase/decrease NAIC SAP		-	-
7) State Permitted Practices that increase/decrease NAIC SAP		-	-
5) NAIC SAP (5 – 6 – 7 = 8)	OH	\$ 2,988,976	\$ 3,059,716

Note 2 - Accounting Changes and Corrections of Errors

Not applicable.

Note 3 - Business Combinations and Goodwill

Not applicable.

Note 4 - Discontinued Operations

Not applicable.

Note 5 - Investments

D. Loan Backed Securities

- (1) Prepayment assumptions for loan-backed and other structured securities were obtained from external financial data sources. These assumptions are consistent with the current interest rate and economic environment.
- (2) As of September 30, 2014 there were no loan-backed and structured securities that have been adjusted to recognize an other-than-temporary impairment.
- (3) During the nine months ended September 30, 2014 there were no loan-backed and structured securities with a recognized other-than-temporary impairment.
- (4) There were no loan-backed and structured securities with a fair value lower than amortized cost as of September 30, 2014.
- (5) Management reviews loan-backed and structured securities with a decline in fair value from cost for impairment based on criteria that include:
 - Length of time and severity of decline.
 - Financial and specific near term prospects of the issuer.
 - Changes in the regulatory, economic or general market environment of the issuer's industry or geographic region.
 - The Company's intent to sell or the inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost.

E. Repurchase Agreements and/or Securities Lending Transactions – No change.

F. Real Estate – None.

NOTES TO FINANCIAL STATEMENTS

G. Investments in Low Income Housing Credits – None.

Note 6 - Joint Ventures, Partnerships and Limited Liability Companies

Not applicable.

Note 7 - Investment Income

No significant changes.

Note 8 - Derivative Instruments

Not applicable.

Note 9 - Income Taxes

No significant changes.

Note 10 - Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

No significant changes.

Note 11 - Debt

Not applicable.

Note 12 - Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

No significant changes.

Note 13 - Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

No significant changes.

Note 14 - Contingencies

No significant changes.

Note 15 - Leases

Not applicable.

Note 16 - Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

No significant changes.

Note 17 - Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

C. The company was not involved in any wash sale transactions in 2014.

Note 18 - Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

Not applicable.

Note 19 - Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Not applicable.

Note 20 - Other Items

A. The Company's financial assets measured at fair value include bonds valued at the lower of cost or fair value when reported at fair value at the balance sheet date. As of September 30, 2014 and December 31, 2013, the Company had no bonds carried at fair value in the financial statements.

Financial instruments (bonds) that are subject to fair value disclosure requirements are carried in the financial statements at amortized cost. The fair values used for financial instruments are estimates, which in many cases may differ significantly from the amounts, which could be realized upon immediate liquidation.

NOTES TO FINANCIAL STATEMENTS

The Company's financial assets have been classified based upon a hierarchy defined by SAP. The hierarchy gives the highest ranking to fair values determined using unadjusted quoted prices in active markets for identical assets and liabilities (Level 1) and the lowest ranking to fair values determined using methodologies and models with unobservable inputs (Level 3). An asset's or a liability's classification is based on the lowest level input that is significant to its measurement. For example, a financial asset or liability carried at fair value would be classified in Level 3 if unobservable inputs were significant to the instrument's fair value, even though the measurement may be derived using inputs that are both observable (Levels 1 and 2) and unobservable (Level 3).

The Company estimates fair values of bonds using prices from third parties or internal pricing methods. Fair value estimates received from third-party pricing services are based on reported trade activity and quoted market prices when available and other market information that a market participant may use to estimate fair value. The internal pricing methods are performed by the Company's investment professionals, and generally involve using discounted cash flow analyses, incorporating current market inputs for similar financial instruments with comparable terms and credit quality, as well as other qualitative factors. In instances where there is little to no market activity for the same or similar instruments, the fair value is estimated using methods, models and assumptions that the Company believes a hypothetical market participant would use to determine a current transaction price. These valuation techniques involve some level of estimation and judgment that becomes significant with increasingly complex instruments or pricing models.

B. Not applicable

C. The following table provides the fair value, carrying value and classification in the fair value hierarchy of the Company's bonds not recorded at fair value as of September 30, 2014 and December 31, 2013.

September 30, 2014

	Aggregate Fair Value	Admitted Assets	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	Not Practicable (Carrying Value)
<i>Financial assets</i>						
Bonds	\$ 1,724,016	\$ 1,722,015	\$ 1,724,016	\$ -	\$ -	\$ -

December 31, 2013

	Aggregate Fair Value	Admitted Assets	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	Not Practicable (Carrying Value)
<i>Financial assets</i>						
Bonds	\$ 1,728,679	\$ 1,727,152	\$ 1,728,679	\$ -	\$ -	\$ -

D. Not applicable.

Note 21 - Other Items

No significant changes.

Note 22 - Events Subsequent

Management has evaluated the financial statements for subsequent events through November 11, 2014; the date financial statements were available to be issued.

Note 23 - Reinsurance

No significant changes.

Note 24 - Retrospectively Rated Contracts & Contracts Subject to Redetermination

Not applicable.

Note 25 - Change in Incurred Losses and Loss Adjustment Expenses

Not applicable.

Note 26 - Intercompany Pooling Arrangements

Not applicable.

Note 27 - Structured Settlements

Not applicable.

NOTES TO FINANCIAL STATEMENTS

Note 28 - Health Care Receivables

Not applicable.

Note 29 - Participating Policies

Not applicable.

Note 30 - Premium Deficiency Reserves

Not applicable.

Note 31 - Reserves for Life Contracts and Annuity Contracts

Not applicable.

Note 32 - Analysis of Annuity Actuarial Reserves and Deposit Liabilities by Withdrawal Characteristics

Not applicable.

Note 33 - Premiums and Annuity Considerations Deferred and Uncollected

Not applicable.

Note 34 - Separate Accounts

Not applicable.

Note 35 - Loss/Claim Adjustment Expenses

Not applicable.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES - GENERAL

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes [] No [X]
- 1.2 If yes, has the report been filed with the domiciliary state? Yes [] No []
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]
- 2.2 If yes, date of change:
- 3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [X] No []
If yes, complete Schedule Y, Parts 1 and 1A.
- 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? Yes [] No [X]
- 3.3 If the response to 3.2 is yes, provide a brief description of those changes.

- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
- 4.2 If yes, provide name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile

- 5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes [] No [X] N/A []
If yes, attach an explanation.

- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made.12/31/2013.....
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.12/31/2011.....
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).12/21/2012.....

- 6.4 By what department or departments?
Ohio Department of Insurance

- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [] No [] N/A [X]
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [] No [] N/A [X]
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]
- 7.2 If yes, give full information:

- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes [] No [X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.

- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [] No [X]

- 8.4 If the response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator].

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC

- 9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [X] No []
 - (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
 - (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
 - (c) Compliance with applicable governmental laws, rules and regulations;
 - (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
 - (e) Accountability for adherence to the code.

- 9.11 If the response to 9.1 is No, please explain:

- 9.2 Has the code of ethics for senior managers been amended? Yes [] No [X]

- 9.21 If the response to 9.2 is Yes, provide information related to amendment(s).

- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No [X]

United Benefit Life Insurance Company
GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES - GENERAL

9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

PART 1 - FINANCIAL

10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [] No [X]

10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount:

PART 1 - INVESTMENT

11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes [] No [X]

11.2 If yes, give full and complete information relating thereto:

12. Amount of real estate and mortgages held in other invested assets in Schedule BA: \$.....0

13. Amount of real estate and mortgages held in short-term investments: \$.....0

14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes [] No [X]

14.2 If yes, please complete the following:

	1 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
14.21 Bonds.....	\$0	\$0
14.22 Preferred Stock.....	\$0	\$0
14.23 Common Stock.....	\$0	\$0
14.24 Short-Term Investments.....	\$0	\$0
14.25 Mortgage Loans on Real Estate.....	\$0	\$0
14.26 All Other.....	\$0	\$0
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26).....	\$0	\$0
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above.....	\$0	\$0

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes [] No [X]

15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No []
If no, attach a description with this statement.

16. For the reporting entity's security lending program, state the amount of the following as of current statement date:

16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2: \$.....0

16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2: \$.....0

16.3 Total payable for securities lending reported on the liability page: \$.....0

17. Excluding items in Schedule E-Part 3-Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes [X] No []

17.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian Address
JP Morgan Chase	1 Chase Manhattan Plaza, 19th Fl, New York, NY

17.2 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation.

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? Yes [] No [X]

17.4 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason

17.5 Identify all investment advisors, broker/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository	2 Name(s)	3 Address
105811	Cigna Investment Inc.	900 Cottage Grove Road, Hartford, CT

PART 1 - INVESTMENT

18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed?

Yes [X] No []

18.2 If no, list exceptions:

GENERAL INTERROGATORIES (continued)

PART 2 - LIFE & HEALTH

1. Report the statement value of mortgage loans at the end of this reporting period for the following categories:

	Amount
1.1 Long-term mortgages in good standing	
1.11 Farm mortgages.....	\$.....
1.12 Residential mortgages.....	\$.....
1.13 Commercial mortgages.....	\$.....
1.14 Total mortgages in good standing.....	\$.....0
1.2 Long-term mortgages in good standing with restructured terms	
1.21 Total mortgages in good standing with restructured terms.....	\$.....
1.3 Long-term mortgage loans upon which interest is overdue more than three months	
1.31 Farm mortgages.....	\$.....
1.32 Residential mortgages.....	\$.....
1.33 Commercial mortgages.....	\$.....
1.34 Total mortgages with interest overdue more than three months.....	\$.....0
1.4 Long-term mortgage loans in process of foreclosure	
1.41 Farm mortgages.....	\$.....
1.42 Residential mortgages.....	\$.....
1.43 Commercial mortgages.....	\$.....
1.44 Total mortgages in process of foreclosure.....	\$.....0
1.5 Total mortgage loans (Lines 1.14 + 1.21 + 1.34 + 1.44) (Page 2, Column 3, Lines 3.1 + 3.2)	\$.....0
1.6 Long-term mortgages foreclosed, properties transferred to real estate in current quarter	
1.61 Farm mortgages.....	\$.....
1.62 Residential mortgages.....	\$.....
1.63 Commercial mortgages.....	\$.....
1.64 Total mortgages foreclosed and transferred to real estate.....	\$.....0

2. Operating Percentages:

2.1 A&H loss percent.....
2.2 A&H cost containment percent.....
2.3 A&H expense percent excluding cost containment expenses.....

3.1 Do you act as a custodian for health savings accounts?.....	Yes []	No [X]
3.2 If yes, please provide the amount of custodial funds held as of the reporting date.....	\$.....	
3.3 Do you act as an administrator for health savings accounts?.....	Yes []	No [X]
3.4 If yes, please provide the balance of the funds administered as of the reporting date.....	\$.....	

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Reinsurer	8 Certified Reinsurer Rating (1 through 6)	9 Effective Date of Certified Reinsuer Rating
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NONE

United Benefit Life Insurance Company

SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

States, Etc.	1	Active Status	Life Contracts		Direct Business Only			7	
			2	3	4	5	6		
									Life Insurance Premiums
1. Alabama.....	AL	L						0	
2. Alaska.....	AK	N						0	
3. Arizona.....	AZ	L						0	
4. Arkansas.....	AR	N						0	
5. California.....	CA	L						0	
6. Colorado.....	CO	L						0	
7. Connecticut.....	CT	N						0	
8. Delaware.....	DE	L						0	
9. District of Columbia.....	DC	L						0	
10. Florida.....	FL	N						0	
11. Georgia.....	GA	L						0	
12. Hawaii.....	HI	N						0	
13. Idaho.....	ID	L						0	
14. Illinois.....	IL	L						0	
15. Indiana.....	IN	L						0	
16. Iowa.....	IA	N						0	
17. Kansas.....	KS	L						0	
18. Kentucky.....	KY	L						0	
19. Louisiana.....	LA	L						0	
20. Maine.....	ME	N						0	
21. Maryland.....	MD	N						0	
22. Massachusetts.....	MA	N						0	
23. Michigan.....	MI	N						0	
24. Minnesota.....	MN	N						0	
25. Mississippi.....	MS	N						0	
26. Missouri.....	MO	L						0	
27. Montana.....	MT	L						0	
28. Nebraska.....	NE	L						0	
29. Nevada.....	NV	L						0	
30. New Hampshire.....	NH	N						0	
31. New Jersey.....	NJ	N						0	
32. New Mexico.....	NM	L						0	
33. New York.....	NY	N						0	
34. North Carolina.....	NC	N						0	
35. North Dakota.....	ND	L						0	
36. Ohio.....	OH	L						0	
37. Oklahoma.....	OK	L						0	
38. Oregon.....	OR	L						0	
39. Pennsylvania.....	PA	L						0	
40. Rhode Island.....	RI	N						0	
41. South Carolina.....	SC	N						0	
42. South Dakota.....	SD	L						0	
43. Tennessee.....	TN	L						0	
44. Texas.....	TX	L						0	
45. Utah.....	UT	L						0	
46. Vermont.....	VT	N						0	
47. Virginia.....	VA	N						0	
48. Washington.....	WA	N						0	
49. West Virginia.....	WV	L						0	
50. Wisconsin.....	WI	N						0	
51. Wyoming.....	WY	N						0	
52. American Samoa.....	AS	N						0	
53. Guam.....	GU	N						0	
54. Puerto Rico.....	PR	N						0	
55. US Virgin Islands.....	VI	N						0	
56. Northern Mariana Islands.....	MP	N						0	
57. Canada.....	CAN	N						0	
58. Aggregate Other Alien.....	OT	XXX	0	0	0	0	0	0	0
59. Subtotal.....	(a).....	28	0	0	0	0	0	0	0
90. Reporting entity contributions for employee benefit plans.....	XXX							0	
91. Dividends or refunds applied to purchase paid-up additions and annuities.....	XXX							0	
92. Dividends or refunds applied to shorten endowment or premium paying period.....	XXX							0	
93. Premium or annuity considerations waived under disability or other contract provisions.....	XXX							0	
94. Aggregate other amounts not allocable by State.....	XXX		0	0	0	0	0	0	0
95. Totals (Direct Business).....	XXX		0	0	0	0	0	0	0
96. Plus Reinsurance Assumed.....	XXX							0	
97. Totals (All Business).....	XXX		0	0	0	0	0	0	0
98. Less Reinsurance Ceded.....	XXX							0	
99. Totals (All Business) less Reinsurance Ceded.....	XXX		0	0	0	0	0	0	0

DETAILS OF WRITE-INS

58001.....	XXX							0	
58002.....	XXX							0	
58003.....	XXX							0	
58998. Summary of remaining write-ins for line 58 from overflow page.....	XXX		0	0	0	0	0	0	0
58999. Total (Lines 58001 thru 58003 plus 58998) (Line 58 above).....	XXX		0	0	0	0	0	0	0
9401.....	XXX							0	
9402.....	XXX							0	
9403.....	XXX							0	
9498. Summary of remaining write-ins for line 94 from overflow page.....	XXX		0	0	0	0	0	0	0
9499. Total (Lines 9401 thru 9403 plus 9498) (Line 94 above).....	XXX		0	0	0	0	0	0	0

(L) - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) - Registered - Non-domiciled RRGs; (Q) - Qualified - Qualified or Accredited Reinsurer;

(E) - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) - None of the above - Not allowed to write business in the state.

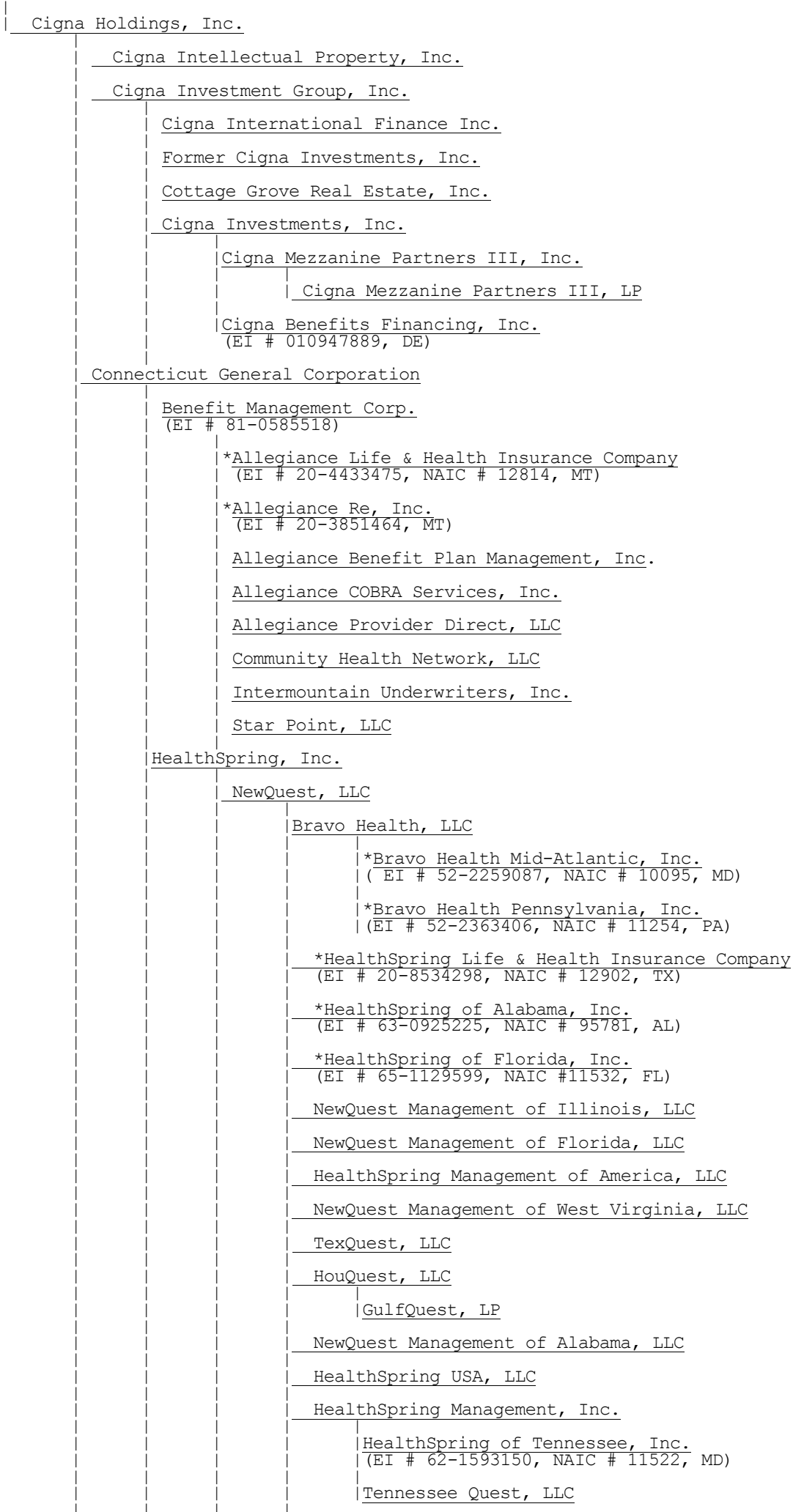
(a) Insert the number of L responses except for Canada and Other Alien.

PART 1 -- ORGANIZATION CHART

The following is a listing identifying and indicating the interrelationships among all affiliated insurers (identified by an asterisk, and if such insurer is incorporated in the United States of America, by a Federal Employer Identification Number, NAIC Company Code and Jurisdiction of Incorporation) and all other affiliates, as of September 30, 2014:

Cigna CORPORATION

(A Delaware corporation and ultimate parent company)



HealthSpring Pharmacy Services, LLCHealthSpring Pharmacy of Tennessee, LLCHome Physicians Management, LLC*Cigna Arbor Life Insurance Company
(EI # 03-0452349, NAIC # 13733, CT)Cigna Behavioral Health, Inc.Cigna Behavioral Health of California, Inc.
(EI# 94-3107309)Cigna Behavioral Health of Texas, Inc.
(EI# 75-2751090)MCC Independent Practice Association of New York, Inc.Cigna Dental Health, Inc.Cigna Dental Health of California, Inc.
(EI# 59-2600475, CA)Cigna Dental Health of Colorado, Inc.
(EI# 59-2675861, NAIC # 11175, CO)Cigna Dental Health of Delaware, Inc.
(EI# 59-2676987, NAIC # 95380, DE)Cigna Dental Health of Florida, Inc.
(EI# 59-1611217, NAIC # 52021, FL)Cigna Dental Health of Illinois, Inc.
(EI# 06-1351097, IL)Cigna Dental Health of Kansas, Inc.
(EI# 59-2625350, NAIC # 52024, KS)Cigna Dental Health of Kentucky, Inc.
(EI# 59-2619589, NAIC # 52108, KY)Cigna Dental Health of Missouri, Inc.
(EI#06-1582068, NAIC # 11160, MO)Cigna Dental Health of New Jersey, Inc.
(EI# 59-2308062, NAIC # 11167, NJ)Cigna Dental Health of North Carolina, Inc.
(EI# 56-1803464 , NAIC # 95179, NC)Cigna Dental Health of Ohio, Inc.
(EI# 59-2579774, NAIC # 47805, OH)Cigna Dental Health of Pennsylvania, Inc.
(EI# 52-1220578, NAIC # 47041, PA)Cigna Dental Health of Texas, Inc.
(EI# 59-2676977, NAIC # 95037, TX)Cigna Dental Health of Virginia, Inc.
(EI# 52-2188914, NAIC # 52617, VA)Cigna Dental Health Plan of Arizona, Inc.
(EI# 86-0807222, NAIC # 47013, AZ)Cigna Dental Health of Maryland, Inc.
(EI#20-2844020, NAIC #48119, MD)Cigna Health CorporationHealthsource, Inc.Cigna HealthCare of Arizona, Inc.
(EI# 86-0334392, NAIC#95125, AZ)Cigna HealthCare of California, Inc.
(EI# 95-3310115, CA)Cigna HealthCare of Colorado, Inc.
(EI# 84-1004500, NAIC # 95604, CO)Cigna HealthCare of Connecticut, Inc.
(EI# 06-1141174, NAIC # 95660, CT)Cigna HealthCare of Florida, Inc.
(EI# 59-2089259, NAIC # 95136, FL)Cigna HealthCare of Illinois, Inc.
(EI# 36-3385638, NAIC # 95602, IL)Cigna HealthCare of Maine, Inc.
(EI# 01-0418220, NAIC # 95447, ME)Cigna HealthCare of Massachusetts, Inc.
(EI# 02-0402111, NAIC # 95220, MA)Cigna HealthCare Mid-Atlantic, Inc.
(EI# 52-1404350, NAIC # 95599, MD)Cigna HealthCare of New Hampshire, Inc.
(EI# 02-0387749, NAIC # 95493, NH)

	<u>Cigna HealthCare of New Jersey, Inc.</u> (EI# 22-2720890, NAIC # 95500, NJ)
	<u>Cigna HealthCare of Pennsylvania, Inc.</u> (EI# 23-2301807, NAIC # 95121, PA)
	<u>Cigna HealthCare of St. Louis, Inc.</u> (EI# 36-3359925, NAIC # 95635, MO)
	<u>Cigna HealthCare of Utah, Inc.</u> (EI# 62-1230908, NAIC # 95518, UT)
	<u>Cigna HealthCare of Georgia, Inc.</u> (EI# 58-1641057, NAIC # 96229, GA)
	<u>Cigna HealthCare of Texas, Inc.</u> (EI# 74-2767437, NAIC # 95383, TX)
	<u>Cigna HealthCare of Indiana, Inc.</u> (EI# 35-1679172, NAIC # 95525, IN)
	<u>Cigna HealthCare of New York, Inc.</u> (EI# 11-2758941, NAIC # 95488, NY)
	<u>Cigna HealthCare of Tennessee, Inc.</u> (EI# 62-1218053, NAIC # 95606, TN)
	<u>Cigna HealthCare of North Carolina, Inc.</u> (EI# 56-1479515, NAIC# 95132, NC)
	<u>Cigna HealthCare of South Carolina, Inc.</u> (EI# 06-1185590, NAIC # 95708, SC)
	<u>*Temple Insurance Company Limited</u>
	<u>Arizona Health Plan, Inc.</u>
	<u>Healthsource Properties, Inc.</u>
	<u>Managed Care Consultants, Inc.</u>
	<u>Choicelinx Corporation</u>
	<u>Sagamore Health Network, Inc.</u>
	<u>Cigna Healthcare Holdings, Inc.</u> (EI# 84-0985843)
	<u>Great-West Healthcare of Illinois, Inc.</u> (EI# 93-1174749, NAIC 95388, IL)
	<u>Cigna Healthcare, Inc.</u>
	<u>*Cigna Life Insurance Company of New York</u> (EI# 13-2556568, NAIC # 64548, NY)
	<u>*Connecticut General Life Insurance Company</u> (EI# 06-0303370, NAIC # 62308, CT)
	<u>CG Gillette Ridge, LLC</u>
	<u>Gillette Ridge Apartments LLC</u>
	<u>CG Merrick, LLC</u>
	<u>Merrick Park LLC</u>
	<u>Merrick Park Parking LLC</u>
	<u>CG Mystic Center LLC</u>
	<u>Station Landing Holding LLC</u>
	<u>CG Mystic Land LLC</u>
	<u>ND/CG Holding LLC</u>
	<u>CG Skyline, LLC</u>
	<u>Skyline ND/CG LLC</u>
	<u>ND Mystic Center Note LLC</u>
	<u>Skyline Mezzanine Borrower, LLC</u>
	<u>Skyline at Station Landing, LLC</u>
	<u>Careallies, LLC</u>
	<u>Carson Bayport 1 LP</u>
	<u>CG Bayport LLC</u>
	<u>Bayport Colony Apartments LLC</u>
	<u>CG-LINA Bayport I LLC</u>
	<u>Cigna Onsite Health, LLC</u>
	<u>CR Longwood Investors, LP</u>
	<u>ND/CR Longwood LLC</u>
	<u>ARE/ND/CR Longwood LLC</u>
	<u>Gillette Ridge Community Council, Inc.</u>

Gillette Ridge Golf LLC
Hazard Center Investment Company LLC
Secon Properties, LP.
Teal Rock 501 Grant Street GP, LLC
Teal Rock 501 Grant Street, LP
Tel-Drug of Pennsylvania, LLC
CG-LINA Realty Investors LLC
 | 115 Sansome Street Associates, LLC
 | 121 Tasman Apartments LLC
 | Alto Apartments LLC
 | CG-LINA Paper Box LLC
GRG Acquisitions LLC
Signa Affiliates Realty Investment Group, LLC
 (EI# 27-5402196, DE)
 | Market Street Residential Holdings LLC
 | Arborpoint at Market Street LLC
 | Market Street Retail Holdings LLC
 | Market Street South LLC
 | Diamondview Tower CM-CG LLC
 | CR Washington Street Investors LP
 | Civic Holding LLC
 | Dulles Town Center Mall, LLC
 | AEW/FDG, LP
 | ND/CR Unicorn LLC
 | Union Wharf Apartments LLC
 | AMD Apartments Limited Partnership
 | SP Newport Crossing LLC
 | PUR Arbors Apartments Venture LLC
 | CG Seventh Street, LLC
 | Ideal Properties II LLC
 | Allesandro Partners, LLC
 | Mallory Square Partners I, LLC
 | Houston Briar Forest Apartments Limited Partnership
 | Newtown Partners II, LP
 | Newtown Square GP LLC
 | AFA Apartments Limited Partnership
 | SB-SNH LLC
 | 680 Investors LLC
 | 685 New Hampshire LLC
 | CGGL 18301 LLC
 | Unico/CG Commonwealth LLC
 | Commonwealth Acquisition LLC
 | Unico-CG Lovejoy LLC
 | 222 Main Street Caring GP LLC
 | 222 Main Street Investors LP
 | Notch 8 Residential, L.L.C.
 | UVL, LLC
 | Agua Mansa Partners LLC
 | 3601 North Fairfax Drive Associates, LLC
CORAC LLC
 | Bridgepoint Office Park Associates, LLC
 (EI# 27-3923999, DE)
 | Fairway Center Associates, LLC
 (EI# 27-3126102, DE)

		<u>Henry on the Park Associates, LLC</u> (EI 27-3582688, DE)
		* <u>Cigna Health and Life Insurance Company</u> (EI # 59-1031071, NAIC # 67369, CT)
		<u>CarePlexus, LLC</u> (EI# 45-2681649; DE)
		<u>Cigna Corporate Services, LLC</u> (EI 27-3396038, DE)
		<u>Cigna Insurance Agency, LLC</u> (EI # 27-1903785, CT)
		<u>Ceres Sales of Ohio, LLC</u> (EI # 34-1970892, OH)
		<u>Central Reserve Life Insurance Company</u> (EI # 34-0970995, NAIC # 61727, OH)
		<u>Provident American Life & Health Insurance Company</u> (EI # 23-1335885, NAIC # 67903, OH)
		<u>United Benefit Life Insurance Company</u> (EI # 75-2305400, NAIC # 65269, OH)
		<u>Loyal American Life Insurance Company</u> (EI # 63-0343428, NAIC # 65722, OH)
		<u>American Retirement Life Insurance Company</u> (EI # 59-2760189, NAIC # 88366, OH)
		<u>Cigna Health Management, Inc.</u> (EI# 23-1728483, DE)
		<u>Kronos Optimal Health Company</u> (20-8064696, AZ)
		* <u>Life Insurance Company of North America</u> (EI# 23-1503749, NAIC # 65498, PA)
		* <u>Cigna & CMC Life Insurance Company Limited</u> (remaining interest owned by an unaffiliated party)
		<u>Cigna Direct Marketing Company, Inc.</u>
		<u>Tel-Drug, Inc.</u>
		<u>Vielife Holdings Limited</u>
		<u>Vielife Limited</u>
		<u>Vielife Services, Inc.</u>
		<u>Businesshealth UK Limited</u>
		<u>CG Individual Tax Benefit Payments, Inc.</u>
		<u>CG Life Pension Benefits Payments, Inc.</u>
		<u>CG LINA Pension Benefits Payments, Inc.</u>
		<u>Cigna Federal Benefits, Inc.</u>
		<u>Cigna Healthcare Benefits, Inc.</u>
		<u>Cigna Integratedcare, Inc.</u>
		<u>Cigna Managed Care Benefits Company</u>
		<u>Cigna Re Corporation</u>
		<u>Blodget & Hazard Limited</u>
		<u>Cigna Resource Manager, Inc.</u>
		<u>Connecticut General Benefit Payments, Inc.</u>
		<u>Healthsource Benefits, Inc.</u>
		<u>IHN, Inc.</u>
		<u>LINA Benefit Payments, Inc.</u>
		<u>Mediversal, Inc.</u>
		<u>Universal Claims Administration</u>
		<u>Cigna Global Holdings, Inc.</u>
		<u>Cigna International Corporation, Inc.</u>
		<u>Cigna International Services, Inc.</u>
		<u>Cigna International Marketing (Thailand) Limited</u>
		<u>CGO Participatos LTDA</u>
		<u>YCFM Servicios LTDA</u>
		* <u>Cigna Global Reinsurance Company, Ltd.</u>
		<u>Cigna Holdings Overseas, Inc.</u>
		<u>Cigna Alder Holdings, LLC</u>
		<u>Cigna Bellevue Alpha LLC</u>

	<u>Cigna Hayat Sigorta, A.S.</u>
	<u>Cigna Linden Holdings, Inc.</u>
	<u>Cigna Laurel Holdings, Ltd.</u>
	<u>Cigna Nederland Alpha Cooperatief U.A.</u>
	<u>Cigna Nederland Beta B.V.</u>
	<u>Cigna Nederland Gamma B.V.</u>
	<u>Cigna Finans Emeklilik Ve Hayat A.S.</u>
	<u>Cigna Magnolia Holdings, Ltd.</u>
	<u>Cigna Health Solution India Pvt. Ltd.</u>
	<u>Cigna Apac Holdings Limited</u>
	<u>Cigna Chestnut Holdings, Ltd.</u>
	<u>*LINA Life Insurance Company of Korea</u>
	<u>LINA Financial Service</u>
	<u>Cigna Korea Foundation</u>
	<u>Cigna International Services Australia Pty Ltd.</u>
	<u>*Cigna Life Insurance New Zealand Limited</u>
	<u>Cigna Hong Kong Holdings Company Limited</u>
	<u>Cigna Data Services (Shanghai) Company Limited</u>
	<u>Cigna HLA Technology Services Limited</u>
	<u>*Cigna Worldwide General Insurance Company Limited</u>
	<u>*Cigna Worldwide Life Insurance Company Limited</u>
	<u>Vanbreda International Sdn. Bhd.</u>
	<u>*Cigna Life Insurance Company of Canada</u> <u>(AA-1560515)</u>
	<u>Cigna Walnut Holdings, Ltd.</u>
	<u>RHP (Thailand) Limited</u>
	<u>*Cigna Brokerage & Marketing (Thailand) Limited</u>
	<u>KDM (Thailand) Limited</u>
	<u>*Cigna Insurance Public Company Limited</u>
	<u>Cigna Taiwan Life Assurance Company Limited</u>
	<u>Cigna Myrtle Holdings, Ltd</u>
	<u>Cigna Elmwood Holdings, SPRL</u>
	<u>Cigna Beechwood Holdings</u>
	<u>*Cigna Life Insurance Company of Europe S.A.-N.V.</u>
	<u>*Cigna Europe Insurance Company S.A.-N.V.</u>
	<u>Cigna European Services (UK) Limited</u>
	<u>Cigna 2000 UK Pension LTD</u>
	<u>FirstAssist Group Holdings Limited</u>
	<u>FirstAssist Group Limited</u>
	<u>FirstAssist Administration Limited</u>
	<u>First Assist Legal Protection Limited</u>
	<u>Cigna Insurance Services (Europe) Ltd.</u>
	<u>Cigna Poplar Holdings, Inc.</u>
	<u>Cigna Sequoia Holdings, SPRL</u>
	<u>PT GAR Indonesia</u>
	<u>PT PGU Indonesia</u>
	<u>*Cigna Global Insurance Company Limited</u>
	<u>Vanbreda International BVBA</u>
	<u>Vanbreda International, LLC</u>
	<u>Cigna TTK Health Insurance Company Limited</u>
	<u>Cigna Saico Benefits Services W.L.L.</u>
	<u>*Cigna Worldwide Insurance Company</u> <u>(EI# 23-2088429, NAIC # 90859, DE)</u>
	<u>*PT. Asuransi Cigna</u>
	<u>Cigna Teak Holdings, LLC</u>

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
Members														
0901	Cigna Group		06-1059331	1591167	0000701221	US	Cigna Corporation	DE	UIP	Cigna Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		06-1072796	1591167	0000701221		Cigna Holdings, Inc	DE	UIP	Cigna Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		51-0402128	1591167	0000701221		Cigna Intellectual Property, Inc	DE	NIA	Cigna Holdings, Inc	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		06-1095823	1591167	0000701221		Cigna Investment Group, Inc	DE	NIA	Cigna Holdings, Inc	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		52-0291385	1591167	0000701221		Cigna International Finance, Inc	DE	NIA	Cigna Investment Group, Inc	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		23-1914061	1591167	0000701221		Former Cigna Investments, Inc	DE	NIA	Cigna Investment Group, Inc	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		06-0861092	1591167	0000701221		Cigna Investments, Inc	DE	NIA	Cigna Investment Group, Inc	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		06-1336442	1591167	0000701221		Cigna Mezzanine Partners III, L.P	DE	NIA	Cigna Mezzanine Partners III, Inc	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		06-1207641	1591167	0000701221		Cottage Grove Real Estate, Inc	DE	NIA	Cigna Investment Group, Inc	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		06-1336442	1591167	0000701221		Cigna Mezzanine Partners III, Inc	DE	NIA	Cigna Investments, Inc	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		01-0947889	1591167	0000701221		Cigna Benefits Financing, Inc	DE	NIA	Cigna Investments, Inc	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		06-0840391	1591167	0000701221		Connecticut General Corporation	CT	UIP	Cigna Holdings, Inc	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		81-0585518	1591167	0000701221		Benefit Management Corp	MT	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	12814	20-4433475	1591167	0000701221		Allegiance Life & Health Insurance Company	MT	IA	Benefit Management Corp	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		20-3851464	1591167	0000701221		Allegiance Re, Inc	MT	IA	Benefit Management Corp	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		81-0400550	1591167	0000701221		Allegiance Benefit Plan Management, Inc	MT	NIA	Benefit Management Corp	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		71-0916514	1591167	0000701221		Allegiance COBRA Services, Inc	MT	NIA	Benefit Management Corp	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Allegiance Provider Direct, LLC	MT	NIA	Benefit Management Corp	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Community Health Network, LLC	MT	NIA	Benefit Management Corp	Ownership	50.000	Cigna Corporation	
0901	Cigna Group		81-0425785	1591167	0000701221		Intermountain Underwriters, Inc	MT	NIA	Benefit Management Corp	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Star Point, LLC	MT	NIA	Benefit Management Corp	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		20-1821898	1591167	0000701221		HealthSpring, Inc	DE	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		76-0628370	1591167	0000701221		NewQuest, LLC	TX	NIA	HealthSpring, Inc	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		52-1929677	1591167	0000701221		Bravo Health, LLC	DE	NIA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	10095	52-2259087	1591167	0000701221		Bravo Health Mid-Atlantic, Inc	MD	IA	Bravo Health, LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	11254	52-2363406	1591167	0000701221		Bravo Health Pennsylvania, Inc	PA	IA	Bravo Health, LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	12902	20-8534298	1591167	0000701221		HealthSpring Life & Health Insurance Company, Inc	TX	IA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	95781	63-0925225	1591167	0000701221		HealthSpring of Alabama, Inc	AL	IA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	11532	65-1129599	1591167	0000701221		HealthSpring of Florida, Inc	FL	IA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		77-0632665	1591167	0000701221		NewQuest Management of Illinois, LLC	IL	NIA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		20-4954206	1591167	0000701221		NewQuest Management of Florida, LLC	FL	NIA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		20-8647386	1591167	0000701221		HealthSpring Management of America, LLC	DE	NIA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		45-0633893	1591167	0000701221		NewQuest Management of West Virginia, LLC	DE	NIA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		75-3108527	1591167	0000701221		TexQuest, LLC	DE	NIA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		75-3108521	1591167	0000701221		HouQuest, LLC	DE	NIA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	

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SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
0901	Cigna Group		76-0657035	1591167	0000701221		GulfQuest, LP	TX	NIA	HouQuest, LLC	Ownership	99.000	Cigna Corporation	
0901	Cigna Group		33-1033586	1591167	0000701221		NewQuest Management of Alabama, LLC	AL	NIA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		72-1559530	1591167	0000701221		HealthSpring USA, LLC	TN	NIA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		62-1540621	1591167	0000701221		HealthSpring Management, Inc.	TN	NIA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	11522	62-1593150	1591167	0000701221		HealthSpring of Tennessee, Inc.	TN	IA	HealthSpring Management, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		20-5524622	1591167	0000701221		Tennessee Quest, LLC	TN	NIA	HealthSpring Management, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		26-2353476	1591167	0000701221		HealthSpring Pharmacy Services, LLC	DE	NIA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		26-2353772	1591167	0000701221		HealthSpring Pharmacy of Tennessee, LLC	DE	NIA	HealthSpring Pharmacy Services, LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	13733	03-0452349	1591167	0000701221		Cigna Arbor Life Insurance Company	CT	IA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		41-1648670	1591167	0000701221		Cigna Behavioral Health, Inc.	MN	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		94-3107309	1591167	0000701221		Cigna Behavioral Health of California, Inc.	CA	IA	Cigna Behavioral Health, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		75-2751090	1591167	0000701221		Cigna Behavioral Health of Texas, Inc.	TX	NIA	Cigna Behavioral Health, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		06-1346406	1591167	0000701221		MCC Independent Practice Association of New York, Inc.	NY	NIA	Cigna Behavioral Health, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		59-2308055	1591167	0000701221		Cigna Dental Health, Inc.	FL	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		59-2600475	1591167	0000701221		Cigna Dental Health Of California, Inc.	CA	IA	Cigna Dental Health, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	11175	59-2675861	1591167	0000701221		Cigna Dental Health Of Colorado, Inc.	CO	IA	Cigna Dental Health, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	95380	59-2676987	1591167	0000701221		Cigna Dental Health Of Delaware, Inc.	DE	IA	Cigna Dental Health, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	52021	59-1611217	1591167	0000701221		Cigna Dental Health Of Florida, Inc.	FL	IA	Cigna Dental Health, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		06-1351097	1591167	0000701221		Cigna Dental Health of Illinois, Inc.	IL	IA	Cigna Dental Health, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	52024	59-2625350	1591167	0000701221		Cigna Dental Health Of Kansas, Inc.	KS	IA	Cigna Dental Health, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	52108	59-2619589	1591167	0000701221		Cigna Dental Health Of Kentucky, Inc.	KY	IA	Cigna Dental Health, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	11160	06-1582068	1591167	0000701221		Cigna Dental Health Of Missouri, Inc.	MO	IA	Cigna Dental Health, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	11167	59-2308062	1591167	0000701221		Cigna Dental Health Of New Jersey, Inc.	NJ	IA	Cigna Dental Health, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	95179	56-1803464	1591167	0000701221		Cigna Dental Health Of North Carolina, Inc.	NC	IA	Cigna Dental Health, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	47805	59-2579774	1591167	0000701221		Cigna Dental Health Of Ohio, Inc.	OH	IA	Cigna Dental Health, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	47041	52-1220578	1591167	0000701221		Cigna Dental Health Of Pennsylvania, Inc.	PA	IA	Cigna Dental Health, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	95037	59-2676977	1591167	0000701221		Cigna Dental Health Of Texas, Inc.	TX	IA	Cigna Dental Health, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	52617	52-2188914	1591167	0000701221		Cigna Dental Health Of Virginia, Inc.	VA	IA	Cigna Dental Health, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	47013	86-0807222	1591167	0000701221		Cigna Dental Health Plan Of Arizona, Inc.	AZ	IA	Cigna Dental Health, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	48119	59-2740468	1591167	0000701221		Cigna Dental Health Of Maryland, Inc.	MD	IA	Cigna Dental Health, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		62-1312478	1591167	0000701221		Cigna Health Corporation	DE	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		02-0387748	1591167	0000701221		Healthsource, Inc.	NH	NIA	Cigna Health Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	95125	86-0334392	1591167	0000701221		Cigna HealthCare of Arizona, Inc.	AZ	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		95-3310115	1591167	0000701221		Cigna HealthCare of California, Inc.	CA	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	95604	84-1004500	1591167	0000701221		Cigna HealthCare of Colorado, Inc.	CO	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	

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SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
0901	Cigna Group	95660	06-1141174	1591167	0000701221		Cigna HealthCare of Connecticut, Inc.	CT	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	95136	59-2089259	1591167	0000701221		Cigna HealthCare of Florida, Inc.	FL	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	95602	36-3385638	1591167	0000701221		Cigna HealthCare of Illinois, Inc.	IL	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	95477	01-0418220	1591167	0000701221		Cigna HealthCare of Maine, Inc.	ME	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	95220	02-0402111	1591167	0000701221		Cigna HealthCare of Massachusetts, Inc.	MA	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	95599	52-1404350	1591167	0000701221		Cigna HealthCare Mid-Atlantic, Inc.	MD	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	95493	02-0387749	1591167	0000701221		Cigna HealthCare of New Hampshire, Inc.	NH	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	95500	22-2720890	1591167	0000701221		Cigna HealthCare of New Jersey, Inc.	NJ	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	95121	23-2301807	1591167	0000701221		Cigna HealthCare of Pennsylvania, Inc.	PA	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	95635	36-3359925	1591167	0000701221		Cigna HealthCare of St. Louis, Inc.	MO	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	95518	62-1230908	1591167	0000701221		Cigna HealthCare of Utah, Inc.	UT	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	96229	58-1641057	1591167	0000701221		Cigna HealthCare of Georgia, Inc.	GA	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	95383	74-2767437	1591167	0000701221		Cigna HealthCare of Texas, Inc.	TX	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	95525	35-1679172	1591167	0000701221		Cigna HealthCare of Indiana, Inc.	IN	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	95488	11-2758941	1591167	0000701221		Cigna HealthCare of New York, Inc.	NY	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	95606	62-1218053	1591167	0000701221		Cigna HealthCare of Tennessee, Inc.	TN	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	95132	56-1479515	1591167	0000701221		Cigna HealthCare of North Carolina, Inc.	NC	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	95708	06-1185590	1591167	0000701221		Cigna HealthCare of South Carolina, Inc.	SC	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Temple Insurance Company Limited	BMU	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		86-3581583	1591167	0000701221		Arizona Health Plan, Inc.	AZ	NIA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		02-0467679	1591167	0000701221		Healthsource Properties, Inc.	NH	NIA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Managed Care Consultants, Inc.	NV	NIA	Cigna Health Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		02-0515554	1591167	0000701221		Choicelinx Corporation	DE	NIA	Cigna Health Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		35-1641636	1591167	0000701221		Sagamore Health Network, Inc.	IN	NIA	Cigna Health Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		84-0985843	1591167	0000701221		Cigna Healthcare Holdings, Inc.	CO	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	95388	93-1174749	1591167	0000701221		Great-West Healthcare of Illinois, Inc.	IL	IA	Cigna Healthcare Holdings, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		02-0495422	1591167	0000701221		Cigna Healthcare, Inc.	VT	NIA	Cigna Healthcare Holdings, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		AA-1560515	1591167	0000701221		Cigna Life Insurance Company of Canada	CAN	IA	Cigna Chestnut Holdings, Ltd	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	64548	13-2556568	3281743	0000701221		Cigna Life Insurance Company of New York	NY	IA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	62308	06-0303370	1591167	0000701221		Connecticut General Life Insurance Company	CT	UIP	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		06-0303370	1591167	0000701221		CG Gillette Ridge, LLC	DE	NIA	Connecticut General Life Insurance Company	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		74-3091940	1591167	0000701221		Gillette Ridge Apartments, LLC	MD	NIA	CG Gillette Ridge LLC	Ownership	65.000	Cigna Corporation	
0901	Cigna Group		06-0303370	1591167	0000701221		CG Merrick, LLC	DE	NIA	Connecticut General Life Insurance Company	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		52-2345309	1591167	0000701221		Merrick Park, LLC	DE	NIA	CG Merrick LLC	Ownership	30.000	General Growth Properties, Inc. (non-affiliate)	
0901	Cigna Group		52-2225244	1591167	0000701221		Merrick Park Parking, LLC	MD	NIA	CG Merrick LLC	Ownership	30.000	General Growth Properties, Inc. (non-affiliate)	
0901	Cigna Group		00-0000000	1591167	0000701221		Civic Holding, LLC	DE	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	85.000	Cigna Corporation	

Q13.2

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
0901	Cigna Group		45-3481107	1591167	0000701221		CG Mystic Center LLC	DE	NIA	Connecticut General Life Insurance Company	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Station Landing Holding, LLC	DE	NIA	CG Mystic Center LLC	Ownership	85.000	Cigna Corporation	
0901	Cigna Group		45-3481241	1591167	0000701221		CG Mystic Land LLC	DE	NIA	Connecticut General Life Insurance Company	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		ND/CG HOLDING, LLC	MA	NIA	CG Mystic Land LLC	Ownership	50.000	Cigna Corporation and ND Mystic Center Holding LLC (non-affiliate)	
0901	Cigna Group		20-3870049	1591167	0000701221		CG Skyline, LLC	DE	NIA	Connecticut General Life Insurance Company	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Skyline ND/CG LLC	MA	NIA	CG Skyline LLC	Ownership	85.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		ND Mystic Center Note LLC	DE	NIA	Skyline ND/CG LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Skyline Mezzanine Borrower LLC	MA	NIA	Skyline ND/CG LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Skyline at Station Landing LLC	MA	NIA	Skyline Mezzanine Borrower LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		26-0180898	1591167	0000701221		CareAllies, LLC	DE	NIA	Connecticut General Life Insurance Company	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Carson Bayport I LP	DE	NIA	Connecticut General Life Insurance Company	Ownership	59.400	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		CG Bayport LLC	DE	NIA	Connecticut General Life Insurance Company	Ownership	75.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Bayport Colony Apartments LLC	FL	NIA	CG Bayport LLC	Ownership	99.900	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		CG-LINA Bayport I LLC	DE	NIA	Connecticut General Life Insurance Company	Ownership	75.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		UNICO/CG Commonwealth LLC	DE	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	80.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Commonwealth Acquisition LLC	DE	NIA	Unico / CG Commonwealth LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		UNICO-CG Lovejoy LLC	OR	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	80.000	Cigna Corporation	
0901	Cigna Group		32-0222252	1591167	0000701221		Cigna Onsite Health, LLC	DE	NIA	Connecticut General Life Insurance Company	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		CR Longwood Investors L.P.	DE	NIA	Connecticut General Life Insurance Company	Ownership	24.600	Charles River Realty Longwood, LLC (non-affiliate)	
0901	Cigna Group		00-0000000	1591167	0000701221		ND/CR Longwood LLC	DE	NIA	CR Longwood Investors L.P.	Ownership	95.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		ARE/ND/CR Longwood LLC	DE	NIA	ND / CR Longwood LLC	Ownership	35.000	ARE-MA Region No. 41, LLC (non-affiliate)	
0901	Cigna Group		00-0000000	1591167	0000701221		Gillette Ridge Community Council, Inc.	CT	NIA	Connecticut General Life Insurance Company	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		20-3700105	1591167	0000701221		Gillette Ridge Golf, LLC	DE	NIA	Connecticut General Life Insurance Company	Ownership	60.000	Cigna Corporation	
0901	Cigna Group		52-2149519	1591167	0000701221		Hazard Center Investment Company LLC	DE	NIA	Connecticut General Life Insurance Company	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Secon Properties, LP	CA	NIA	Connecticut General Life Insurance Company	Ownership	50.000	South Coast Plaza Associates, LLC (non-affiliate)	
0901	Cigna Group		00-0000000	1591167	0000701221		Teal Rock 501 Grant Street GP, LLC	DE	NIA	Connecticut General Life Insurance Company	Ownership	56.273	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Teal Rock 501 Grant Street, LP	DE	NIA	Connecticut General Life Insurance Company	Ownership	55.710	Cigna Corporation	
0901	Cigna Group		23-3074013	1591167	0000701221		TEL-DRUG of Pennsylvania, L.L.C.	PA	NIA	Connecticut General Life Insurance Company	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		AEW/FDG, LP	DE	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	13.640	AEW Core Property Trust Holding LP (non-affiliate)	
0901	Cigna Group		00-0000000	1591167	0000701221		CR Washington Street Investors LP	DE	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	33.820	Charles River Washington Street LLC (non-affiliate)	
0901	Cigna Group		00-0000000	1591167	0000701221		ND/CR Unicorn LLC	DE	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	70.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Union Wharf Apartments LLC	DE	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	80.000	Cigna Corporation	

Q13.3

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
0901	Cigna Group		00-0000000	1591167	0000701221		AMD Apartments Limited Partnership	DE	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	80.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		SP Newport Crossing LLC	DE	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	85.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		PUR Arbors Apartments Venture LLC	DE	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	85.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		CG Seventh Street LLC	DE	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	87.500	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Ideal Properties II LLC	CA	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	85.000	Cigna Corporation	
0901	Cigna Group		41-2189110	1591167	0000701221		CG-LINA Realty Investors LLC	DE	NIA	Connecticut General Life Insurance Company	Ownership	75.000	Cigna Corporation	
0901	Cigna Group		80-0668090	1591167	0000701221		Alessandro Parners, LLC	DE	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	94.700	Cigna Corporation	
0901	Cigna Group		45-2242273	1591167	0000701221		115 Sansome Street Associates, LLC	DE	NIA	CG-LINA Realty Investors, LLC	Ownership	90.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		121 Tasman Apartments LLC	DE	NIA	CG-LINA Realty Investors, LLC	Ownership	85.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Alto Apartments LLC	WA	NIA	CG-LINA Realty Investors, LLC	Ownership	80.000	Cigna Corporation	
0901	Cigna Group		20-4786821	1591167	0000701221		CG-LINA Paper Box LLC	DE	NIA	CG-LINA Realty Investors, LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		27-5402196	1591167	0000701221		Cigna Affiliates Realty Investment Group, LLC	DE	NIA	Connecticut General Life Insurance Company	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Dulles Town Center Mall, LLC	VA	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	50.000	Cigna Corporation	
0901	Cigna Group		27-0268530	1591167	0000701221		CORAC, LLC	DE	NIA	Connecticut General Life Insurance Company	Ownership	50.000	Cigna Corporation	
0901	Cigna Group		27-3923999	1591167	0000701221		Bridgepoint Office Park Associates, LLC	DE	NIA	Corac, LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		27-3126102	1591167	0000701221		Fairway Center Associates, LLC	DE	NIA	Corac, LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		27-3582688	1591167	0000701221		Henry on the Park Associates, LLC	DE	NIA	Corac, LLC	Ownership	80.000	Cigna Corporation	
0901	Cigna Group	67369	59-1031071	1591167	0000701221		Cigna Health and Life Insurance Company	CT	IA	Connecticut General Life Insurance Company	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		45-2681649	1591167	0000701221		CarePlexus, LLC	DE	NIA	Cigna Health and Life Insurance Company	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		27-3396038	1591167	0000701221		Cigna Corporate Services, LLC	DE	NIA	Cigna Health and Life Insurance Company	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		27-1903785	1591167	0000701221		Cigna Insurance Agency, LLC	CT	NIA	Cigna Health and Life Insurance Company	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		34-1970892				Ceres Sales of Ohio, LLC	OH	NIA	Cigna Health and Life Insurance Company	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	88366	59-2760189				American Retirement Life Insurance Company	OH	IA	Loyal American Life Insurance Company	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	61727	34-0970995				Central Reserve Life Insurance Company	OH	UIP	Cigna Health and Life Insurance Company	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	65722	63-0343428				Loyal American Life Insurance Company	OH	IA	Cigna Health and Life Insurance Company	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	67903	23-1335885				Provident American Life & Health Insurance Company	OH	UDP	Central Reserve Life Insurance Company	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	65269	75-2305400				United Benefit Life Insurance Company	OH	RE	Provident American Life and Health Insurance Company	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		23-1728483	1591167	0000701221		Cigna Health Management, Inc.	DE	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		20-8064696	1591167	0000701221		Kronos Optimal Health Company	AZ	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	65498	23-1503749	1591167	0000701221		Life Insurance Company of North America	PA	IA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Cigna & CMC Life Insurance Company Limited	CHN	IA	Life Insurance Company of North America	Ownership	50.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		LINA Life Insurance Company of Korea	KOR	IA	Cigna Chestnut Holdings, Ltd.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		58-1136865	1591167	0000701221		Cigna Direct Marketing Company, Inc.	DE	NIA	Life Insurance Company of North America	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		46-0427127	1591167	0000701221		Tel-Drug, Inc.	SD	IA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	

Q13.4

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
0901	Cigna Group		00-0000000	1591167	0000701221		Vielife Holdings Limited	GBR	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Vielife Limited	GBR	NIA	Vielife Holdings Limited	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		98-0463704	1591167	0000701221		Vielife Services, Inc.	DE	NIA	Vielife Holdings Limited	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Businesshealth UK Limited	GBR	NIA	Vielife Holdings Limited	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		06-1332403	1591167	0000701221		CG Individual Tax Benefits Payments, Inc.	DE	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		06-1332405	1591167	0000701221		CG Life Pension Benefits Payments, Inc.	DE	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		62-1724116	1591167	0000701221		Cigna Federal Benefits, Inc.	DE	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		23-2741293	1591167	0000701221		Cigna Healthcare Benefits, Inc.	DE	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		23-2924152	1591167	0000701221		Cigna Integratedcare, Inc.	DE	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		23-2741294	1591167	0000701221		Cigna Managed Care Benefits Company	DE	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		06-1071502	1591167	0000701221		Cigna RE Corporation	DE	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		06-1522976	1591167	0000701221		Bloodget & Hazard Limited	GBR	NIA	Cigna Re Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		06-1567902	1591167	0000701221		Cigna Resource Manager, Inc.	DE	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		06-1252419	1591167	0000701221		Connecticut General Benefit Payments, Inc.	DE	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		06-1533555	1591167	0000701221		Healthsource Benefits, Inc.	DE	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		35-2041388	1591167	0000701221		IHN, Inc.	IN	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		06-1252418	1591167	0000701221		LINA Benefit Payments, Inc.	DE	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		88-0334401	1591167	0000701221		Mediversal, Inc.	NV	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		88-0344624	1591167	0000701221		Universal Claims Administration	MT	NIA	Mediversal, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		51-0389196	1591167	0000701221		Cigna Global Holdings, Inc.	DE	NIA	Cigna Holdings, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		51-0111677	1591167	0000701221		Cigna International Corporation, Inc.	DE	NIA	Cigna Global Holdings, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		23-2610178	1591167	0000701221		Cigna International Services, Inc.	DE	NIA	Cigna Global Holdings, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		30-3087621	1591167	0000701221		Cigna International Marketing (Thailand) Limited	THA	NIA	Cigna Global Holdings, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		CGO PARTICIPATOS LTDA	BRA	NIA	Cigna Global Holdings, Inc.	Ownership	99.780	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		YCFM Servicios LTDA	BRA	NIA	Cigna Global Holdings, Inc.	Ownership	59.930	Cigna Corporation	
0901	Cigna Group		98-0210110	1591167	0000701221		Cigna Global Reinsurance Company, Ltd.	BMU	IA	Cigna Global Holdings, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		23-3009279	1591167	0000701221		Cigna Holdings Overseas, Inc.	DE	NIA	Cigna Global Reinsurance Company, Ltd.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Cigna Bellevue Alpha LLC	DE	NIA	Cigna Holdings Overseas, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Cigna Hayat Sigorta, A.S.	TUR	IA	Cigna Holdings Overseas, Inc.	Ownership	99.999	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Cigna Nederland Alpha Cooperatief U.A.	NLD	NIA	Cigna Holdings Overseas, Inc.	Ownership	99.999	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Cigna Nederland Beta B.V.	NLD	NIA	Cigna Nederland Alpha Cooperatief U.A.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Cigna Nederland Gamma B.V.	NLD	NIA	Cigna Nederland Alpha Cooperatief U.A.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		AA-1240009	1591167	0000701221		Cigna Life Insurance Company of Europe S.A.-N.V.	BEL	IA	Cigna Beechwood Holdings	Ownership	99.999	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Cigna Europe Insurance Company S.A.-N.V.	BEL	IA	Cigna Beechwood Holdings	Ownership	99.999	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Cigna European Services (UK) Limited	GBR	NIA	Cigna Elmwood Holdings, SPRL	Ownership	100.000	Cigna Corporation	

Q13.5

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
0901	Cigna Group		00-0000000	1591167	0000701221		CIGNA 2000 UK Pension LTD	GBR	NIA	Cigna European Services (UK) Limited	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Cigna Health Solution India Pvt. Ltd.	IND	NIA	Cigna Holdings Overseas, Inc.	Ownership	99.999	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Cigna International Services Australia Pty Ltd.	AUS	NIA	Cigna Chestnut Holdings, Ltd.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Cigna Apac Holdings Limited	BMU	NIA	Cigna Holdings Overseas, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Cigna Life Insurance New Zealand Limited	NZL	IA	Cigna Chestnut Holdings, Inc. Ltd.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Cigna Taiwan Life Assurance Company Limited	TWN	IA	Cigna Apac Holdings Limited	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Cigna Hong Kong Holdings Company Limited	HKG	NIA	Cigna Chestnut Holdings, Ltd.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Cigna Data Services (Shanghai) Company Limited	CHN	NIA	Cigna Hong Kong Holdings Company Limited	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Cigna HLA Technology Services Limited	HKG	NIA	Cigna Hong Kong Holdings Company Limited	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Cigna Worldwide General Insurance Company Limited	HKG	IA	Cigna Hong Kong Holdings Company Limited	Ownership	97.500	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Cigna Worldwide Life Insurance Company Limited	HKG	IA	Cigna Hong Kong Holdings Company Limited	Ownership	97.500	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		PT GAR Indonesia	IDN	NIA	Cigna Holdings Overseas, Inc.	Ownership	99.160	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		PT PGU Indonesia	IDN	NIA	PT GAR Indonesia	Ownership	99.990	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		RHP (Thailand) Limited	THA	NIA	Cigna Apac Holdings Limited	Ownership	49.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Cigna Brokerage & Marketing (Thailand) Limited	THA	NIA	RHP Thailand Limited	Ownership	75.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		KDM (Thailand) Limited	THA	NIA	RHP Thailand Limited	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Cigna Insurance Public Company Limited	THA	IA	KDM Thailand Limited	Ownership	75.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Cigna Global Insurance Company Limited	GBR	IA	Cigna Holdings Overseas, Inc.	Ownership	99.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Vanbreda International BVBA	BEL	NIA	Cigna Holdings Overseas, Inc.	Ownership	99.990	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Vanbreda International Sdn. Bhd.	MYS	NIA	Cigna Hong Kong Holdings Company Ltd.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Vanbreda International, LLC	FL	NIA	Vanbreda International N.V. BVBA	Ownership	100.000	Cigna Corporation	
0901	Cigna Group	90859	23-2088429	1591167	0000701221		Cigna Worldwide Insurance Company	DE	IA	Cigna Global Reinsurance Company, Ltd.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		AA-5360003	1591167	0000701221		PT. Asuransi Cigna	IDN	IA	Cigna Worldwide Insurance Company	Ownership	80.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		FirstAssist Group Holdings Limited	GBR	NIA	Cigna Elmwood Holdings, SPRL	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		FirstAssist Group Limited	GBR	NIA	FirstAssist Group Holdings Limited	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		FirstAssist Administration Limited	GBR	NIA	FirstAssist Group Holdings Limited	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		FirstAssist Legal Protection Limited	GBR	NIA	FirstAssist Group Limited	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000	1591167	0000701221		Cigna Insurance Services (Europe) Limited	GBR	NIA	FirstAssist Group Limited	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000				Market Street Residential Holdings LLC	DE	NIA	Cigna Affiliates Reality Investment Group LLC	Ownership	85.000	Cigna Corporation	
0901	Cigna Group		00-0000000				Arborpoint at Market Street LLC	DE	NIA	Market Street Residential Holdings LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000				Market Street Retail Holdings LLC	DE	NIA	Cigna Affiliates Reality Investment Group LLC	Ownership	60.890	Cigna Corporation	
0901	Cigna Group		00-0000000				Market Street South LLC	DE	NIA	Market Street Retail Holdings LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000				Diamondview Tower CM-CG LLC	DE	NIA	Cigna Affiliates Reality Investment Group LLC	Ownership	90.000	Cigna Corporation	
0901	Cigna Group		00-0000000				Mallory Square Partners I, LLC	DE	NIA	Cigna Affiliates Reality Investment Group LLC	Ownership	80.000	Cigna Corporation	

Q13.6

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
0901	Cigna Group		00-0000000				Houston Briar Forest Apartments Limited Partnership	DE	NIA	Cigna Affiliates Realty Investment Group LLC	Ownership	80.000	Cigna Corporation	
0901	Cigna Group		00-0000000				Cigna Finans Emekilik Ve Hayat A.S.	TUR	NIA	Cigna Nederland Gamma, B.V.	Ownership	51.000	Cigna Corporation	
0901	Cigna Group		00-0000000				CignaTTK Health Insurance Company Limited	IND	IA	Cigna Holdings Overseas, Inc.	Ownership	26.000	TTK (non-affiliate)	
0901	Cigna Group		00-0000000				Newtown Partners II, LP	MD	NIA	Cigna Affiliates Realty Investment Group LLC	Ownership	71.000	Cigna Corporation	
0901	Cigna Group		00-0000000				Newtown Square GP LLC	DE	NIA	Cigna Affiliates Realty Investment Group LLC	Ownership	50.000	Cigna Corporation and Newtown Square	
0901	Cigna Group		06-1332401				CG LINA Pension Benefits Payments, Inc.	DE	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000				AFA Apartments Limited Partnership	DE	NIA	Cigna Affiliates Realty Investment Group LLC	Ownership	85.000	Cigna Corporation	
0901	Cigna Group		20-4266628				Home Physicians Management, LLC	DE	NIA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000				LINA Financial Service	KOR	NIA	LINA Life Insurance Company of Korea	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000				Cigna Korea Foundation	KOR	NIA	LINA Life Insurance Company of Korea	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000				Cigna SAICO Benefits Services W.L.L.	BHR	NIA	Cigna Holdings Overseas, Inc.	Ownership	50.000	Cigna Corporation and SAICO (non affiliate)	
0901	Cigna Group		00-0000000				Cigna Chestnut Holdings, Ltd.	GBR	NIA	Cigna Apac Holdings Limited	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000				Cigna Alder Holdings, LLC	DE	NIA	Cigna Holdings Overseas, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000				Cigna Linden Holdings, Inc.	DE	NIA	Cigna Holdings Overseas, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000				Cigna Laurel Holdings, Ltd.	BMU	NIA	Cigna Linden Holdings, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000				Cigna Magnolia Holdings, Ltd.	BMU	NIA	Cigna Holdings Overseas, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000				Cigna Myrtle Holdings, Ltd.	MLT	NIA	Cigna Apac Holdings, Ltd.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000				Cigna Elmwood Holdings, SPRL	BEL	NIA	Cigna Myrtle Holdings, Ltd.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000				Cigna Poplar Holdings, Inc.	DE	NIA	Cigna Holdings Overseas, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000				SB-SNH LLC	DE	NIA	Cigna Affiliates Realty Investment Group LLC	Ownership	85.000	Cigna Corporation	
0901	Cigna Group		00-0000000				680 Investors LLC	CA	NIA	SB-SNH LLC	Ownership	85.000	Cigna Corporation	
0901	Cigna Group		00-0000000				685 New Hampshire LLC	CA	NIA	SB-SNH LLC	Ownership	85.000	Cigna Corporation	
0901	Cigna Group		00-0000000				CGGL 18301 LLC	DE	NIA	Cigna Affiliates Realty Investment Group LLC	Ownership	90.000	Cigna Corporation	
0901	Cigna Group		00-0000000				Notch 8 Residential, L.L.C.	DE	NIA	Cigna Affiliates Realty Investment Group LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000				Agua Mansa Partners, LLC	DE	NIA	Cigna Affiliates Realty Investment Group LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000				UVL, LLC	DE	NIA	Cigna Affiliates Realty Investment Group LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000				3601 North Fairfax Drive Associates, LLC	DE	NIA	Cigna Affiliates Realty Investment Group LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000				222 Main Street CARING GP LLC	DE	NIA	Cigna Affiliates Realty Investment Group LLC	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000				GRG Acquisitions LLC	DE	NIA	Connecticut General Life Insurance Company	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000				Cigna Sequoia Holdings SPRL	BEL	NIA	Cigna Overseas Holdings, Inc.	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000				222 Main Street Investors LP	DE	NIA	Cigna Affiliates Realty Investment Group LLC	Ownership	90.000	Cigna Corporation	
0901	Cigna Group		00-0000000				Cigna Walnut Holdings, Ltd.	GBR	NIA	Cigna Apac Holdings Limited	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000				Cigna Beechwood Holdings	BEL	NIA	Cigna Elmwood Holdings, SPRL	Ownership	100.000	Cigna Corporation	
0901	Cigna Group		00-0000000				Cigna Teak Holdings, LLC	DE	NIA	Cigna Global Holdings, Inc.	Ownership	100.000	Cigna Corporation	

Q13.7

Asterisk

Explanation

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Q13.8

NONE

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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.

	Response
1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	NO
2. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
3. Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC?	NO
4. 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?	NO
5. 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?	NO
6. 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?	NO
7. 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?	NO

Explanations:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.

Bar Code:



NONE

United Benefit Life Insurance Company
SCHEDULE A - VERIFICATION

Real Estate

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	0	
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....		
2.2 Additional investment made after acquisition.....		
3. Current year change in encumbrances.....		
4. Total gain (loss) on disposals.....		
5. Deduct amounts received on disposals.....		
6. Total foreign exchange change in book/adjusted carrying value.....		
7. Deduct current year's other than temporary impairment recognized.....		
8. Deduct current year's depreciation.....		
9. Book/adjusted carrying value at end of current period (Lines 1+2+3+4-5+6-7-8).....	0	0
10. Deduct total nonadmitted amounts.....		
11. Statement value at end of current period (Line 9 minus Line 10).....	0	0

SCHEDULE B - VERIFICATION

Mortgage Loans

	1 Year to Date	2 Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year.....	0	
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....		
2.2 Additional investment made after acquisition.....		
3. Capitalized deferred interest and other.....		
4. Accrual of discount.....		
5. Unrealized valuation increase (decrease).....		
6. Total gain (loss) on disposals.....		
7. Deduct amounts received on disposals.....		
8. Deduct amortization of premium and mortgage interest points and commitment fees.....		
9. Total foreign exchange change in book value/recorded investment excluding accrued interest.....		
10. Deduct current year's other than temporary impairment recognized.....		
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	0	0
12. Total valuation allowance.....		
13. Subtotal (Line 11 plus Line 12).....	0	0
14. Deduct total nonadmitted amounts.....		
15. Statement value at end of current period (Line 13 minus Line 14).....	0	0

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	0	
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....		
2.2 Additional investment made after acquisition.....		
3. Capitalized deferred interest and other.....		
4. Accrual of discount.....		
5. Unrealized valuation increase (decrease).....		
6. Total gain (loss) on disposals.....		
7. Deduct amounts received on disposals.....		
8. Deduct amortization of premium and depreciation.....		
9. Total foreign exchange change in book/adjusted carrying value.....		
10. Deduct current year's other than temporary impairment recognized.....		
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	0	0
12. Deduct total nonadmitted amounts.....		
13. Statement value at end of current period (Line 11 minus Line 12).....	0	0

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year.....	1,727,151	2,000,053
2. Cost of bonds and stocks acquired.....		833,977
3. Accrual of discount.....		1,109
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....		
6. Deduct consideration for bonds and stocks disposed of.....		1,100,000
7. Deduct amortization of premium.....	5,136	7,988
8. Total foreign exchange change in book/adjusted carrying value.....		
9. Deduct current year's other than temporary impairment recognized.....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	1,722,015	1,727,151
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	1,722,015	1,727,151

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

	1	2	3	4	5	6	7	8
NAIC Designation	Book/Adjusted Carrying Value Beginning of Current Quarter	Acquisitions During Current Quarter	Dispositions During Current Quarter	Non-Trading Activity During Current Quarter	Book/Adjusted Carrying Value End of First Quarter	Book/Adjusted Carrying Value End of Second Quarter	Book/Adjusted Carrying Value End of Third Quarter	Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a).....	3,026,121	519		(1,735)	3,027,356	3,026,121	3,024,905	3,028,620
2. NAIC 2 (a).....								
3. NAIC 3 (a).....								
4. NAIC 4 (a).....								
5. NAIC 5 (a).....								
6. NAIC 6 (a).....								
7. Total Bonds.....	3,026,121	519	0	(1,735)	3,027,356	3,026,121	3,024,905	3,028,620
PREFERRED STOCK								
8. NAIC 1.....								
9. NAIC 2.....								
10. NAIC 3.....								
11. NAIC 4.....								
12. NAIC 5.....								
13. NAIC 6.....								
14. Total Preferred Stock.....	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock.....	3,026,121	519	0	(1,735)	3,027,356	3,026,121	3,024,905	3,028,620

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(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation:
NAIC 1 \$.....1,302,890; NAIC 2 \$.....0; NAIC 3 \$.....0; NAIC 4 \$.....0; NAIC 5 \$.....0; NAIC 6 \$.....0.

SCHEDULE DA - PART 1

Short-Term Investments

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year To Date	5 Paid for Accrued Interest Year To Date
9199999.....	1,302,890	XXX		1,423	

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	1,301,468	1,148,920
2. Cost of short-term investments acquired.....	1,423	2,121,473
3. Accrual of discount.....		
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....		
6. Deduct consideration received on disposals.....		1,968,925
7. Deduct amortization of premium.....		
8. Total foreign exchange change in book/adjusted carrying value.....		
9. Deduct current year's other than temporary impairment recognized.....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	1,302,891	1,301,468
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	1,302,891	1,301,468

Sch. DB-Pt A-Verification
NONE

Sch. DB-Pt B-Verification
NONE

Sch. DB-Pt C-Sn 1
NONE

Sch. DB-Pt C-Sn 2
NONE

Sch. DB-Verification
NONE

Sch. E-Verification
NONE

Sch. A-Pt 2
NONE

Sch. A-Pt 3
NONE

Sch. B-Pt 2
NONE

Sch. B-Pt 3
NONE

Sch. BA-Pt 2
NONE

Sch. BA-Pt 3
NONE

Sch. D-Pt 3
NONE

Sch. D-Pt 4
NONE

Sch. DB-Pt A-Sn 1
NONE

Sch. DB-Pt A-Sn 1-Footer A
NONE

Sch. DB-Pt A-Sn 1-Footer B
NONE

**Sch. DB-Pt B-Sn 1
NONE**

**Sch. DB-Pt B-Sn 1-Footer A
NONE**

**Sch. DB-Pt B-Sn 1-Footer B
NONE**

**Sch. DB-Pt B-Sn 1B-Broker List
NONE**

**Sch. DB-Pt D-Sn 1
NONE**

**Sch. DB-Pt D-Sn 2
NONE**

**Sch. DL-Pt. 1
NONE**

**Sch. DL-Pt. 2
NONE**

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1 Depository	2 Code	3 Rate of Interest	4 Amount of Interest Received During Current Quarter	5 Amount of Interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			9 *
					6 First Month	7 Second Month	8 Third Month	
Open Depositories								
JP Morgan Chase Austin, TX.....					29,049	24,019	15,151	XXX..
JP Morgan Chase New York, NY.....					3,264	3,239	8,239	XXX..
0199999. Total Open Depositories.....	...XXX	...XXX	0	0	32,313	27,258	23,390	XXX..
0399999. Total Cash on Deposit.....	...XXX	...XXX	0	0	32,313	27,258	23,390	XXX..
0599999. Total Cash.....	...XXX	...XXX	0	0	32,313	27,258	23,390	XXX..

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1 Description	2 Code	3 Date Acquired	4 Rate of Interest	5 Maturity Date	6 Book/Adjusted Carrying Value	7 Amount of Interest Due & Accrued	8 Amount Received During Year
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NONE