



ANNUAL STATEMENT

For the Year Ended December 31, 2014

of the Condition and Affairs of the

MANHATTAN NATIONAL LIFE INSURANCE COMPANY

NAIC Group Code.....0084, 0084	NAIC Company Code..... 67083	Employer's ID Number..... 45-0252531
(Current Period) (Prior Period)		
Organized under the Laws of Ohio	State of Domicile or Port of Entry Ohio	Country of Domicile US
Incorporated/Organized..... December 20, 1956	Commenced Business..... January 4, 1957	
Statutory Home Office	301 East Fourth Street..... Cincinnati OH US 45202	
	(Street and Number) (City or Town, State, Country and Zip Code)	
Main Administrative Office	301 East Fourth Street..... Cincinnati OH US..... 45202	513-357-3300
	(Street and Number) (City or Town, State, Country and Zip Code)	(Area Code) (Telephone Number)
Mail Address	Post Office Box 5420..... Cincinnati OH US 45202	
	(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)	
Primary Location of Books and Records	301 East Fourth Street..... Cincinnati OH US 45202	513-357-3300
	(Street and Number) (City or Town, State, Country and Zip Code)	(Area Code) (Telephone Number)
Internet Web Site Address	www.gaig.com	
Statutory Statement Contact	Brian Patrick Sponaugle	513-412-2931
	(Name)	(Area Code) (Telephone Number) (Extension)
	bsponaugle@gaig.com	513-412-1673
	(E-Mail Address)	(Fax Number)

OFFICERS

Name	Title	Name	Title
1. Stephen Craig Lindner	President	2. Mark Francis Muething	Secretary
3. Christopher Patrick Miliano	Treasurer	4. Michael Joseph Lesar	Appointed Actuary
OTHER			
John Paul Gruber	Senior Vice President	Adrienne Susan Kessling	Senior Vice President
Brian Patrick Sponaugle	Vice President		

DIRECTORS OR TRUSTEES

John Paul Gruber	Jeffrey Gene Hester	Stephen Craig Lindner	Christopher Patrick Miliano
Mark Francis Muething	Michael James Prager	Brian Patrick Sponaugle	

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

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

(Signature)	(Signature)	(Signature)
Mark Francis Muething	Christopher Patrick Miliano	John Paul Gruber
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
Secretary	Treasurer	Senior Vice President
(Title)	(Title)	(Title)
Subscribed and sworn to before me	a. Is this an original filing?	Yes [X] No []
This _____ day of February 2015	b. If no	1. State the amendment number
		2. Date filed
		3. Number of pages attached



DIRECT BUSINESS IN Other Alien # 1 DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	35,344				35,344
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	35,344	0	0	0	35,344
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	8				8
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	8	0	0	0	8
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	8	0	0	0	8
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					0
10. Matured endowments.....					0
11. Annuity benefits.....	39,095				39,095
12. Surrender values and withdrawals for life contracts.....	120				120
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	39,215	0	0	0	39,215

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	23	3,110,746		(a).....					23	3,110,746
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(2)	(201,809)							(2)	(201,809)
23. In force December 31 of current year.....	21	2,908,937	0	(a).....0	0	0	0	0	21	2,908,937

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN Other Alien # 2 DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

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

DETAILS OF WRITE-INS

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF ALASKA DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	24,214				24,214
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	24,214	0	0	0	24,214
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	8				8
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	15				15
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	23	0	0	0	23
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	23	0	0	0	23
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	25,000				25,000
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....	29,020				29,020
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	54,020	0	0	0	54,020

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....		(0)							0	(0)
17. Incurred during current year.....	1	25,641							1	25,641
Settled during current year:										
18.1 By payment in full.....	1	25,641							1	25,641
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	1	25,641	0	0	0	0	0	0	1	25,641
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	1	25,641	0	0	0	0	0	0	1	25,641
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	(0)	0	0	0	0	0	0	0	(0)
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	30	4,215,629	(a).....						30	4,215,629
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(5)	(473,175)							(5)	(473,175)
23. In force December 31 of current year.....	25	3,742,454	0	0	0	0	0	0	25	3,742,454

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF ALABAMA DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	108,870				108,870
2. Annuity considerations.....	15				15
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	108,885	0	0	0	108,885
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	25,333				25,333
10. Matured endowments.....					0
11. Annuity benefits.....	11,588				11,588
12. Surrender values and withdrawals for life contracts.....	89,762				89,762
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	126,683	0	0	0	126,683

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	3	135,000							3	135,000
17. Incurred during current year.....	2	10,496							2	10,496
Settled during current year:										
18.1 By payment in full.....	3	35,496							3	35,496
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	3	35,496	0	0	0	0	0	0	3	35,496
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	3	35,496	0	0	0	0	0	0	3	35,496
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	110,000	0	0	0	0	0	0	2	110,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	99	9,304,607	(a).....						99	9,304,607
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(9)	(792,337)							(9)	(792,337)
23. In force December 31 of current year.....	90	8,512,270	0	0	0	0	0	0	90	8,512,270

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF ARKANSAS DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	211,419				211,419
2. Annuity considerations.....	500				500
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	211,919	0	0	0	211,919
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	2				2
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	2	0	0	0	2
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	2	0	0	0	2
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	71,142				71,142
10. Matured endowments.....					0
11. Annuity benefits.....	(1,778)				(1,778)
12. Surrender values and withdrawals for life contracts.....	1,111				1,111
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	70,475	0	0	0	70,475

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	142							1	142
17. Incurred during current year.....	4	71,816							4	71,816
Settled during current year:										
18.1 By payment in full.....	5	71,958							5	71,958
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	5	71,958	0	0	0	0	0	0	5	71,958
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	5	71,958	0	0	0	0	0	0	5	71,958
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	(0)	0	0	0	0	0	0	0	(0)
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	204	23,752,194	(a).....						204	23,752,194
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(13)	(911,989)							(13)	(911,989)
23. In force December 31 of current year.....	191	22,840,205	0	0	0	0	0	0	191	22,840,205

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF ARIZONA DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	268,426				268,426
2. Annuity considerations.....	400				400
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	268,826	0	0	0	268,826
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	969				969
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	62				62
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,031	0	0	0	1,031
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	1,031	0	0	0	1,031
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	423,500				423,500
10. Matured endowments.....					0
11. Annuity benefits.....	29,122				29,122
12. Surrender values and withdrawals for life contracts.....	47,870				47,870
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	500,491	0	0	0	500,491

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	50,000							1	50,000
17. Incurred during current year.....	7	385,632							7	385,632
Settled during current year:										
18.1 By payment in full.....	7	435,432							7	435,432
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	7	435,432	0	0	0	0	0	0	7	435,432
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	7	435,432	0	0	0	0	0	0	7	435,432
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	200	0	0	0	0	0	0	1	200
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	340	43,189,232	(a).....						340	43,189,232
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(31)	(2,982,828)							(31)	(2,982,828)
23. In force December 31 of current year.....	309	40,206,404	0	0	0	0	0	0	309	40,206,404

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF CALIFORNIA DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	2,999,977				2,999,977
2. Annuity considerations.....	2,302				2,302
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	3,002,279	.0	.0	.0	3,002,279
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	369				369
6.2 Applied to pay renewal premiums.....	.58				.58
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	118				118
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	546	.0	.0	.0	546
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	546	.0	.0	.0	546
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	3,829,926				3,829,926
10. Matured endowments.....					.0
11. Annuity benefits.....	409,840				409,840
12. Surrender values and withdrawals for life contracts.....	488,393				488,393
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....					.0
15. Totals.....	4,728,158	.0	.0	.0	4,728,158

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	7	515,282							7	515,282
17. Incurred during current year.....	50	3,673,430							50	3,673,430
Settled during current year:										
18.1 By payment in full.....	45	3,851,240							45	3,851,240
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	45	3,851,240	.0	.0	.0	.0	.0	.0	45	3,851,240
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	45	3,851,240	.0	.0	.0	.0	.0	.0	45	3,851,240
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	12	337,473	.0	.0	.0	.0	.0	.0	12	337,473
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,120	487,156,914	(a).....						3,120	487,156,914
21. Issued during year.....									.0	.0
22. Other changes to in force (Net).....	(225)	(38,134,794)							(225)	(38,134,794)
23. In force December 31 of current year.....	2,895	449,022,120	.0	(a)......0	.0	.0	.0	.0	2,895	449,022,120

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF CANADA DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

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

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF COLORADO DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	386,957				386,957
2. Annuity considerations.....	2,700				2,700
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	389,657	.0	.0	.0	389,657
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	3,812				3,812
6.2 Applied to pay renewal premiums.....					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					.0
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	3,812	.0	.0	.0	3,812
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	3,812	.0	.0	.0	3,812
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	367,099				367,099
10. Matured endowments.....					.0
11. Annuity benefits.....	9,196				9,196
12. Surrender values and withdrawals for life contracts.....	99,737				99,737
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....					.0
15. Totals.....	476,032	.0	.0	.0	476,032

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pol. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....		(0)							.0	(0)
17. Incurred during current year.....	.8	369,767							.8	369,767
Settled during current year:										
18.1 By payment in full.....	.7	369,727							.7	369,727
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	.7	369,727	.0	.0	.0	.0	.0	.0	.7	369,727
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	.7	369,727	.0	.0	.0	.0	.0	.0	.7	369,727
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.1	.40	.0	.0	.0	.0	.0	.0	.1	.40
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	.451	59,157,446	(a)						.451	59,157,446
21. Issued during year.....									.0	.0
22. Other changes to in force (Net).....	(27)	(6,951,083)							(27)	(6,951,083)
23. In force December 31 of current year.....	.424	52,206,363	.0	(a)	.0	.0	.0	.0	.424	52,206,363

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF CONNECTICUT DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	186,015				186,015
2. Annuity considerations.....					.0
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	186,015	.0	.0	.0	186,015
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	14				14
6.2 Applied to pay renewal premiums.....					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	9				9
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	23	.0	.0	.0	23
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	23	.0	.0	.0	23
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	250,000				250,000
10. Matured endowments.....					.0
11. Annuity benefits.....	10,705				10,705
12. Surrender values and withdrawals for life contracts.....	18,936				18,936
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....					.0
15. Totals.....	279,641	.0	.0	.0	279,641

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	250,000							1	250,000
17. Incurred during current year.....	1	52,304							1	52,304
Settled during current year:										
18.1 By payment in full.....	1	252,304							1	252,304
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	1	252,304	.0	.0	.0	.0	.0	.0	1	252,304
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	1	252,304	.0	.0	.0	.0	.0	.0	1	252,304
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	50,000	.0	.0	.0	.0	.0	.0	1	50,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	206	33,290,422	(a).....						206	33,290,422
21. Issued during year.....									.0	.0
22. Other changes to in force (Net).....	(20)	(4,729,863)							(20)	(4,729,863)
23. In force December 31 of current year.....	186	28,560,559	.0	.0	.0	.0	.0	.0	186	28,560,559

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF DISTRICT OF COLUMBIA DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	36,409				36,409
2. Annuity considerations.....					.0
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	36,409	.0	.0	.0	36,409
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					.0
6.2 Applied to pay renewal premiums.....					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					.0
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	.0	.0	.0	.0	.0
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	.0	.0	.0	.0	.0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	20,000				20,000
10. Matured endowments.....					.0
11. Annuity benefits.....					.0
12. Surrender values and withdrawals for life contracts.....	2,297				2,297
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....					.0
15. Totals.....	22,297	.0	.0	.0	22,297

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....		(0)							.0	(0)
17. Incurred during current year.....	1	20,058							1	20,058
Settled during current year:										
18.1 By payment in full.....	1	20,058							1	20,058
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	1	20,058	.0	.0	.0	.0	.0	.0	1	20,058
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	1	20,058	.0	.0	.0	.0	.0	.0	1	20,058
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	35	3,769,053	(a)						35	3,769,053
21. Issued during year.....									.0	.0
22. Other changes to in force (Net).....	(3)	(304,610)							(3)	(304,610)
23. In force December 31 of current year.....	32	3,464,443	.0	(a)	.0	.0	.0	.0	32	3,464,443

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF DELAWARE DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	51,243				51,243
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	51,243	0	0	0	51,243
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	5,097				5,097
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....	127,096				127,096
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	132,193	0	0	0	132,193

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....		(0)							0	(0)
17. Incurred during current year.....	2	5,118							2	5,118
Settled during current year:										
18.1 By payment in full.....	2	5,118							2	5,118
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	2	5,118	0	0	0	0	0	0	2	5,118
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	2	5,118	0	0	0	0	0	0	2	5,118
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	(0)	0	0	0	0	0	0	0	(0)
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	45	6,453,097	(a)						45	6,453,097
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(3)	(414,097)							(3)	(414,097)
23. In force December 31 of current year.....	42	6,039,000	0	0	0	0	0	0	42	6,039,000

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	1,186,896				1,186,896
2. Annuity considerations.....	3,883				3,883
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	1,190,779	.0	.0	.0	1,190,779
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	.86				.86
6.2 Applied to pay renewal premiums.....					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	.15				.15
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	.101	.0	.0	.0	.101
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	.101	.0	.0	.0	.101
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	2,566,112				2,566,112
10. Matured endowments.....					.0
11. Annuity benefits.....	133,322				133,322
12. Surrender values and withdrawals for life contracts.....	239,887				239,887
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....					.0
15. Totals.....	2,939,321	.0	.0	.0	2,939,321

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	2	75,000							2	75,000
17. Incurred during current year.....	39	2,728,451							39	2,728,451
Settled during current year:										
18.1 By payment in full.....	37	2,744,614							37	2,744,614
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	37	2,744,614	.0	.0	.0	.0	.0	.0	37	2,744,614
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	37	2,744,614	.0	.0	.0	.0	.0	.0	37	2,744,614
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	4	58,838	.0	.0	.0	.0	.0	.0	4	58,838
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,262	169,386,922		(a).....					1,262	169,386,922
21. Issued during year.....									.0	.0
22. Other changes to in force (Net).....	(98)	(11,840,532)							(98)	(11,840,532)
23. In force December 31 of current year.....	1,164	157,546,390	.0	(a)......0	.0	.0	.0	.0	1,164	157,546,390

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancelable (b).....					
25.2 Guaranteed renewable (b).....	150,074	150,150		176,632	183,395
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....	150,074	150,150	.0	176,632	183,395
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	150,074	150,150	.0	176,632	183,395

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



DIRECT BUSINESS IN THE STATE OF GEORGIA DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	656,641				656,641
2. Annuity considerations.....	2,340				2,340
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	658,981	0	0	0	658,981
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	44				44
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	44	0	0	0	44
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	44	0	0	0	44
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	356,838				356,838
10. Matured endowments.....					0
11. Annuity benefits.....	2,348				2,348
12. Surrender values and withdrawals for life contracts.....	72,794				72,794
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	431,979	0	0	0	431,979

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	2	104,337							2	104,337
17. Incurred during current year.....	26	336,851							26	336,851
Settled during current year:										
18.1 By payment in full.....	22	363,266							22	363,266
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	22	363,266	0	0	0	0	0	0	22	363,266
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	22	363,266	0	0	0	0	0	0	22	363,266
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	6	77,922	0	0	0	0	0	0	6	77,922
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	871	82,706,289	(a)						871	82,706,289
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(34)	(2,686,378)							(34)	(2,686,378)
23. In force December 31 of current year.....	837	80,019,911	0	(a)	0	0	0	0	837	80,019,911

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN GRAND TOTAL DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	20,974,938				20,974,938
2. Annuity considerations.....	104,654				104,654
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	21,079,592	.0	.0	.0	21,079,592
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	73,300				73,300
6.2 Applied to pay renewal premiums.....	3,598				3,598
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	1,625				1,625
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	78,523	.0	.0	.0	78,523
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	78,523	.0	.0	.0	78,523
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	30,702,659				30,702,659
10. Matured endowments.....	7,514				7,514
11. Annuity benefits.....	1,791,504				1,791,504
12. Surrender values and withdrawals for life contracts.....	4,766,694				4,766,694
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....					.0
15. Totals.....	37,268,371	.0	.0	.0	37,268,371

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	115	3,145,872							115	3,145,872
17. Incurred during current year.....	714	30,782,731							714	30,782,731
Settled during current year:										
18.1 By payment in full.....	693	31,233,681							693	31,233,681
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	693	31,233,681	.0	.0	.0	.0	.0	.0	693	31,233,681
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	693	31,233,681	.0	.0	.0	.0	.0	.0	693	31,233,681
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	136	2,694,922	.0	.0	.0	.0	.0	.0	136	2,694,922
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	30,295	3,050,409,798	(a).....						30,295	3,050,409,798
21. Issued during year.....	9	220,000							9	220,000
22. Other changes to in force (Net).....	(2,134)	(234,810,286)							(2,134)	(234,810,286)
23. In force December 31 of current year.....	28,170	2,815,819,512	.0 (a).....	.0	.0	.0	.0	.0	28,170	2,815,819,512

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancelable (b).....	5,742	5,696			4,809
25.2 Guaranteed renewable (b).....	150,766	150,842		176,632	183,395
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....	156,508	156,538	.0	176,632	188,204
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	156,508	156,538	.0	176,632	188,204

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



DIRECT BUSINESS IN GUAM DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

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

DETAILS OF WRITE-INS

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF HAWAII DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	109,435				109,435
2. Annuity considerations.....	885				885
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	110,320	0	0	0	110,320
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....	17				17
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	17	0	0	0	17
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	17	0	0	0	17
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					0
10. Matured endowments.....					0
11. Annuity benefits.....	7,729				7,729
12. Surrender values and withdrawals for life contracts.....	340				340
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	8,069	0	0	0	8,069

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....		(0)							0	(0)
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	(0)	0	0	0	0	0	0	0	(0)
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	88	11,149,552	(a).....						88	11,149,552
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(6)	(380,000)							(6)	(380,000)
23. In force December 31 of current year.....	82	10,769,552	(a).....	0	0	0	0	0	82	10,769,552

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF IOWA DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	255,662				255,662
2. Annuity considerations.....	6,187				6,187
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	261,850	0	0	0	261,850
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	60				60
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	137				137
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	196	0	0	0	196
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	196	0	0	0	196
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	382,000				382,000
10. Matured endowments.....					0
11. Annuity benefits.....	82,054				82,054
12. Surrender values and withdrawals for life contracts.....	99,388				99,388
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	563,442	0	0	0	563,442

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	6,000							1	6,000
17. Incurred during current year.....	7	394,339							7	394,339
Settled during current year:										
18.1 By payment in full.....	6	384,339							6	384,339
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	6	384,339	0	0	0	0	0	0	6	384,339
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	6	384,339	0	0	0	0	0	0	6	384,339
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	16,000	0	0	0	0	0	0	2	16,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	374	28,686,299	(a).....						374	28,686,299
21. Issued during year.....	1	15,000							1	15,000
22. Other changes to in force (Net).....	(31)	(1,991,617)							(31)	(1,991,617)
23. In force December 31 of current year.....	344	26,709,682	0	0	0	0	0	0	344	26,709,682

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancelable (b).....	606	600			
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....	606	600	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	606	600	0	0	0

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



DIRECT BUSINESS IN THE STATE OF IDAHO DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	26,713				26,713
2. Annuity considerations.....					.0
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	26,713	.0	.0	.0	26,713
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	.47				.47
6.2 Applied to pay renewal premiums.....					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	.43				.43
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	.90	.0	.0	.0	.90
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	.90	.0	.0	.0	.90
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	50,000				50,000
10. Matured endowments.....					.0
11. Annuity benefits.....					.0
12. Surrender values and withdrawals for life contracts.....	37,821				37,821
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....					.0
15. Totals.....	87,821	.0	.0	.0	87,821

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									.0	.0
17. Incurred during current year.....	2	50,465							2	50,465
Settled during current year:										
18.1 By payment in full.....	1	50,272							1	50,272
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	1	50,272	.0	.0	.0	.0	.0	.0	1	50,272
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	1	50,272	.0	.0	.0	.0	.0	.0	1	50,272
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	193	.0	.0	.0	.0	.0	.0	1	193
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	54	5,848,789	(a).....						54	5,848,789
21. Issued during year.....									.0	.0
22. Other changes to in force (Net).....	(5)	(1,106,165)							(5)	(1,106,165)
23. In force December 31 of current year.....	49	4,742,624	.0	.0	.0	.0	.0	.0	49	4,742,624

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	638,121				638,121
2. Annuity considerations.....	14,853				14,853
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	652,974	0	0	0	652,974
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	1,065				1,065
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	8				8
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,072	0	0	0	1,072
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	1,072	0	0	0	1,072
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	787,742				787,742
10. Matured endowments.....					0
11. Annuity benefits.....	248,484				248,484
12. Surrender values and withdrawals for life contracts.....	242,982				242,982
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	1,279,207	0	0	0	1,279,207

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	308							1	308
17. Incurred during current year.....	16	833,006							16	833,006
Settled during current year:										
18.1 By payment in full.....	14	795,506							14	795,506
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	14	795,506	0	0	0	0	0	0	14	795,506
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	14	795,506	0	0	0	0	0	0	14	795,506
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	3	37,808	0	0	0	0	0	0	3	37,808
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,023	87,174,778	(a).....						1,023	87,174,778
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(74)	(9,238,533)							(74)	(9,238,533)
23. In force December 31 of current year.....	949	77,936,245	0	(a).....0	0	0	0	0	949	77,936,245

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF INDIANA DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	521,673				521,673
2. Annuity considerations.....	2,171				2,171
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	523,844	0	0	0	523,844
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	17				17
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	3				3
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	20	0	0	0	20
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	20	0	0	0	20
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	655,780				655,780
10. Matured endowments.....					0
11. Annuity benefits.....	43,454				43,454
12. Surrender values and withdrawals for life contracts.....	253,830				253,830
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	953,064	0	0	0	953,064

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	4	43,401							4	43,401
17. Incurred during current year.....	14	696,021							14	696,021
Settled during current year:										
18.1 By payment in full.....	18	739,422							18	739,422
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	18	739,422	0	0	0	0	0	0	18	739,422
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	18	739,422	0	0	0	0	0	0	18	739,422
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	(0)	0	0	0	0	0	0	0	(0)
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,001	71,567,398	(a)						1,001	71,567,398
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(70)	(6,957,724)							(70)	(6,957,724)
23. In force December 31 of current year.....	931	64,609,674	0	(a)	0	0	0	0	931	64,609,674

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancelable (b).....	266	264			4,809
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....	266	264	0	0	4,809
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	266	264	0	0	4,809

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



DIRECT BUSINESS IN THE STATE OF KANSAS DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	280,018				280,018
2. Annuity considerations.....	2,847				2,847
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	282,865	.0	.0	.0	282,865
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	.8				.8
6.2 Applied to pay renewal premiums.....					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					.0
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	.8	.0	.0	.0	.8
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	.8	.0	.0	.0	.8
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	587,627				587,627
10. Matured endowments.....					.0
11. Annuity benefits.....	3,000				3,000
12. Surrender values and withdrawals for life contracts.....	8,417				8,417
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....					.0
15. Totals.....	599,044	.0	.0	.0	599,044

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....		(0)							.0	(0)
17. Incurred during current year.....	.6	591,243							.6	591,243
Settled during current year:										
18.1 By payment in full.....	.5	590,543							.5	590,543
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	.5	590,543	.0	.0	.0	.0	.0	.0	.5	590,543
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	.5	590,543	.0	.0	.0	.0	.0	.0	.5	590,543
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.1	700	.0	.0	.0	.0	.0	.0	.1	700
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	.268	44,013,318	(a).						.268	44,013,318
21. Issued during year.....									.0	.0
22. Other changes to in force (Net).....	(18)	(3,488,540)							(18)	(3,488,540)
23. In force December 31 of current year.....	.250	40,524,778	.0	(a).	.0	.0	.0	.0	.250	40,524,778

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF KENTUCKY DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	276,072				276,072
2. Annuity considerations.....					.0
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	276,072	.0	.0	.0	276,072
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					.0
6.2 Applied to pay renewal premiums.....					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	.8				.8
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	.8	.0	.0	.0	.8
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	.8	.0	.0	.0	.8
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	500,000				500,000
10. Matured endowments.....					.0
11. Annuity benefits.....	21,263				21,263
12. Surrender values and withdrawals for life contracts.....	9,853				9,853
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....					.0
15. Totals.....	531,117	.0	.0	.0	531,117

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	2	200,000							2	200,000
17. Incurred during current year.....	5	302,782							5	302,782
Settled during current year:										
18.1 By payment in full.....	7	502,782							7	502,782
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	7	502,782	.0	.0	.0	.0	.0	.0	7	502,782
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	7	502,782	.0	.0	.0	.0	.0	.0	7	502,782
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	258	35,343,507	(a).....						258	35,343,507
21. Issued during year.....									.0	.0
22. Other changes to in force (Net).....	(21)	(3,996,732)							(21)	(3,996,732)
23. In force December 31 of current year.....	237	31,346,775	.0	(a)......0	.0	.0	.0	.0	237	31,346,775

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF LOUISIANA DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	251,488				251,488
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	251,488	0	0	0	251,488
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....	83				83
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	83	0	0	0	83
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	83	0	0	0	83
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	138,781				138,781
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....	18,657				18,657
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	157,438	0	0	0	157,438

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....	11	218,031							11	218,031
Settled during current year:										
18.1 By payment in full.....	9	142,729							9	142,729
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	9	142,729	0	0	0	0	0	0	9	142,729
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	9	142,729	0	0	0	0	0	0	9	142,729
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	75,302	0	0	0	0	0	0	2	75,302
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	308	35,148,712	(a).....						308	35,148,712
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(17)	(1,383,213)							(17)	(1,383,213)
23. In force December 31 of current year.....	291	33,765,499	0	0	0	0	0	0	291	33,765,499

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF MASSACHUSETTS DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	499,028				499,028
2. Annuity considerations.....	40				40
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	499,068	0	0	0	499,068
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	216,994				216,994
10. Matured endowments.....					0
11. Annuity benefits.....	12,730				12,730
12. Surrender values and withdrawals for life contracts.....	401,885				401,885
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	631,608	0	0	0	631,608

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....		1							0	1
17. Incurred during current year.....	9	218,982							9	218,982
Settled during current year:										
18.1 By payment in full.....	8	218,866							8	218,866
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	8	218,866	0	0	0	0	0	0	8	218,866
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	8	218,866	0	0	0	0	0	0	8	218,866
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	117	0	0	0	0	0	0	1	117
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	706	94,338,602	(a).....						706	94,338,602
21. Issued during year.....		5,000							0	5,000
22. Other changes to in force (Net).....	(48)	(6,001,418)							(48)	(6,001,418)
23. In force December 31 of current year.....	658	88,342,184	0	0	0	0	0	0	658	88,342,184

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF MARYLAND DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	872,796				872,796
2. Annuity considerations.....	500				500
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	873,296	.0	.0	.0	873,296
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					.0
6.2 Applied to pay renewal premiums.....					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					.0
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	.0	.0	.0	.0	.0
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	.0	.0	.0	.0	.0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	411,000				411,000
10. Matured endowments.....					.0
11. Annuity benefits.....	5,226				5,226
12. Surrender values and withdrawals for life contracts.....	113,792				113,792
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....					.0
15. Totals.....	530,018	.0	.0	.0	530,018

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	2	350,000							2	350,000
17. Incurred during current year.....	9	418,740							9	418,740
Settled during current year:										
18.1 By payment in full.....	8	418,636							8	418,636
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	8	418,636	.0	.0	.0	.0	.0	.0	8	418,636
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	8	418,636	.0	.0	.0	.0	.0	.0	8	418,636
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	3	350,104	.0	.0	.0	.0	.0	.0	3	350,104
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	728	103,903,941	(a).....						728	103,903,941
21. Issued during year.....									.0	.0
22. Other changes to in force (Net).....	(64)	(8,574,052)							(64)	(8,574,052)
23. In force December 31 of current year.....	664	95,329,889	.0	.0	.0	.0	.0	.0	664	95,329,889

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF MAINE DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	140,731				140,731
2. Annuity considerations.....					.0
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	140,731	.0	.0	.0	140,731
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					.0
6.2 Applied to pay renewal premiums.....					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	.3				.3
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	.3	.0	.0	.0	.3
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	.3	.0	.0	.0	.3
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	23,827				23,827
10. Matured endowments.....					.0
11. Annuity benefits.....					.0
12. Surrender values and withdrawals for life contracts.....	53,884				53,884
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....					.0
15. Totals.....	77,712	.0	.0	.0	77,712

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	3,827							1	3,827
17. Incurred during current year.....	2	36,974							2	36,974
Settled during current year:										
18.1 By payment in full.....	3	40,801							3	40,801
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	3	40,801	.0	.0	.0	.0	.0	.0	3	40,801
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	3	40,801	.0	.0	.0	.0	.0	.0	3	40,801
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	213	32,754,042	(a).						213	32,754,042
21. Issued during year.....									.0	.0
22. Other changes to in force (Net).....	(14)	(2,078,416)							(14)	(2,078,416)
23. In force December 31 of current year.....	199	30,675,626	(a).	.0	.0	.0	.0	.0	199	30,675,626

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	651,465				651,465
2. Annuity considerations.....	4,476				4,476
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	655,941	0	0	0	655,941
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	17				17
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	38				38
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	55	0	0	0	55
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	55	0	0	0	55
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	1,298,017				1,298,017
10. Matured endowments.....	5,000				5,000
11. Annuity benefits.....	86,585				86,585
12. Surrender values and withdrawals for life contracts.....	229,414				229,414
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	1,619,016	0	0	0	1,619,016

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	10	61,402							10	61,402
17. Incurred during current year.....	128	1,330,339							128	1,330,339
Settled during current year:										
18.1 By payment in full.....	117	1,175,777							117	1,175,777
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	117	1,175,777	0	0	0	0	0	0	117	1,175,777
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	117	1,175,777	0	0	0	0	0	0	117	1,175,777
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	21	215,964	0	0	0	0	0	0	21	215,964
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	2,520	111,069,270	(a).....						2,520	111,069,270
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(200)	(8,968,941)							(200)	(8,968,941)
23. In force December 31 of current year.....	2,320	102,100,329	0	(a).....0	0	0	0	0	2,320	102,100,329

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancelable (b).....	538	534			
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....	538	534	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	538	534	0	0	0

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



DIRECT BUSINESS IN THE STATE OF MINNESOTA DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	726,529				726,529
2. Annuity considerations.....	4,300				4,300
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	730,829	.0	.0	.0	730,829
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	500				500
6.2 Applied to pay renewal premiums.....	40				40
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	192				192
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	731	.0	.0	.0	731
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	731	.0	.0	.0	731
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	514,686				514,686
10. Matured endowments.....					.0
11. Annuity benefits.....	58,679				58,679
12. Surrender values and withdrawals for life contracts.....	171,338				171,338
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....					.0
15. Totals.....	744,703	.0	.0	.0	744,703

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	6	125,000							6	125,000
17. Incurred during current year.....	13	394,629							13	394,629
Settled during current year:										
18.1 By payment in full.....	19	519,629							19	519,629
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	19	519,629	.0	.0	.0	.0	.0	.0	19	519,629
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	19	519,629	.0	.0	.0	.0	.0	.0	19	519,629
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.0	(0)	.0	.0	.0	.0	.0	.0	.0	(0)
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,326	107,115,800	(a).....						1,326	107,115,800
21. Issued during year.....	1	22,500							1	22,500
22. Other changes to in force (Net).....	(72)	(7,546,849)							(72)	(7,546,849)
23. In force December 31 of current year.....	1,255	99,591,451	.0 (a).....	.0	.0	.0	.0	.0	1,255	99,591,451

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF MISSOURI DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	706,977				706,977
2. Annuity considerations.....	10,984				10,984
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	717,961	.0	.0	.0	717,961
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	.38				.38
6.2 Applied to pay renewal premiums.....					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					.0
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	.38	.0	.0	.0	.38
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	.38	.0	.0	.0	.38
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	1,414,546				1,414,546
10. Matured endowments.....					.0
11. Annuity benefits.....	112,455				112,455
12. Surrender values and withdrawals for life contracts.....	85,666				85,666
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....					.0
15. Totals.....	1,612,667	.0	.0	.0	1,612,667

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	2	45,000							2	45,000
17. Incurred during current year.....	21	1,535,718							21	1,535,718
Settled during current year:										
18.1 By payment in full.....	20	1,430,718							20	1,430,718
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	20	1,430,718	.0	.0	.0	.0	.0	.0	20	1,430,718
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	20	1,430,718	.0	.0	.0	.0	.0	.0	20	1,430,718
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	3	150,000	.0	.0	.0	.0	.0	.0	3	150,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,006	94,705,438		(a).....					1,006	94,705,438
21. Issued during year.....	2	15,000							2	15,000
22. Other changes to in force (Net).....	(85)	(9,222,468)							(85)	(9,222,468)
23. In force December 31 of current year.....	923	85,497,970	.0	(a)......0	.0	.0	.0	.0	923	85,497,970

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF MISSISSIPPI DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	236,597				236,597
2. Annuity considerations.....	540				540
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	237,137	0	0	0	237,137
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	109,000				109,000
10. Matured endowments.....					0
11. Annuity benefits.....	2,018				2,018
12. Surrender values and withdrawals for life contracts.....	24,505				24,505
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	135,523	0	0	0	135,523

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	2	10,000							2	10,000
17. Incurred during current year.....	5	299,533							5	299,533
Settled during current year:										
18.1 By payment in full.....	6	109,533							6	109,533
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	6	109,533	0	0	0	0	0	0	6	109,533
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	6	109,533	0	0	0	0	0	0	6	109,533
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	200,000	0	0	0	0	0	0	1	200,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	261	33,333,896	(a).....						261	33,333,896
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(20)	(2,544,141)							(20)	(2,544,141)
23. In force December 31 of current year.....	241	30,789,755	0	0	0	0	0	0	241	30,789,755

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF MONTANA DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	16,762				16,762
2. Annuity considerations.....					.0
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	16,762	.0	.0	.0	16,762
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	.3				.3
6.2 Applied to pay renewal premiums.....					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	.48				.48
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	.51	.0	.0	.0	.51
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	.51	.0	.0	.0	.51
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	125,000				125,000
10. Matured endowments.....					.0
11. Annuity benefits.....	237				.237
12. Surrender values and withdrawals for life contracts.....	1,714				1,714
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....					.0
15. Totals.....	126,951	.0	.0	.0	126,951

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	25,000							1	25,000
17. Incurred during current year.....	1	107,962							1	107,962
Settled during current year:										
18.1 By payment in full.....	2	132,962							2	132,962
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	2	132,962	.0	.0	.0	.0	.0	.0	2	132,962
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	2	132,962	.0	.0	.0	.0	.0	.0	2	132,962
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.0	(.0)	.0	.0	.0	.0	.0	.0	.0	(.0)
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	48	3,221,581	(a)						48	3,221,581
21. Issued during year.....									.0	.0
22. Other changes to in force (Net).....	(2)	(218,075)							(2)	(218,075)
23. In force December 31 of current year.....	46	3,003,506	.0	(a).....0	.0	.0	.0	.0	46	3,003,506

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	418,719				418,719
2. Annuity considerations.....	1,140				1,140
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	419,859	0	0	0	419,859
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	243,434				243,434
10. Matured endowments.....					0
11. Annuity benefits.....	4,914				4,914
12. Surrender values and withdrawals for life contracts.....	160,947				160,947
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	409,296	0	0	0	409,296

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	3,001							1	3,001
17. Incurred during current year.....	14	277,188							14	277,188
Settled during current year:										
18.1 By payment in full.....	12	245,188							12	245,188
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	12	245,188	0	0	0	0	0	0	12	245,188
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	12	245,188	0	0	0	0	0	0	12	245,188
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	3	35,001	0	0	0	0	0	0	3	35,001
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	529	59,530,271	(a).....						529	59,530,271
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(28)	(3,546,736)							(28)	(3,546,736)
23. In force December 31 of current year.....	501	55,983,535	0	0	0	0	0	0	501	55,983,535

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF NORTH DAKOTA DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	240,158				240,158
2. Annuity considerations.....	200				200
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	240,358	0	0	0	240,358
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	54,001				54,001
6.2 Applied to pay renewal premiums.....	3,175				3,175
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	456				456
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	57,633	0	0	0	57,633
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	57,633	0	0	0	57,633
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	584,676				584,676
10. Matured endowments.....					0
11. Annuity benefits.....	35,267				35,267
12. Surrender values and withdrawals for life contracts.....	95,215				95,215
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	715,158	0	0	0	715,158

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	10	19,019							10	19,019
17. Incurred during current year.....	54	753,254							54	753,254
Settled during current year:										
18.1 By payment in full.....	47	703,555							47	703,555
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	47	703,555	0	0	0	0	0	0	47	703,555
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	47	703,555	0	0	0	0	0	0	47	703,555
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	17	68,719	0	0	0	0	0	0	17	68,719
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,084	24,393,315	(a).....						1,084	24,393,315
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(91)	(1,475,523)							(91)	(1,475,523)
23. In force December 31 of current year.....	993	22,917,792	0	0	0	0	0	0	993	22,917,792

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF NEBRASKA DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	79,724				79,724
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	79,724	0	0	0	79,724
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	4				4
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	3				3
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	7	0	0	0	7
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	7	0	0	0	7
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					0
10. Matured endowments.....					0
11. Annuity benefits.....	1,070				1,070
12. Surrender values and withdrawals for life contracts.....	57,154				57,154
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	58,225	0	0	0	58,225

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....		0							0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	94	12,394,075	(a).....						94	12,394,075
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(4)	(564,172)							(4)	(564,172)
23. In force December 31 of current year.....	90	11,829,903	(a).....	0	0	0	0	0	90	11,829,903

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF NEW HAMPSHIRE DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	128,822				128,822
2. Annuity considerations.....					.0
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	128,822	.0	.0	.0	128,822
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					.0
6.2 Applied to pay renewal premiums.....					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					.0
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	.0	.0	.0	.0	.0
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	.0	.0	.0	.0	.0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	10,000				10,000
10. Matured endowments.....					.0
11. Annuity benefits.....					.0
12. Surrender values and withdrawals for life contracts.....	4,800				4,800
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....					.0
15. Totals.....	14,800	.0	.0	.0	14,800

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									.0	.0
17. Incurred during current year.....	1	5,521							1	5,521
Settled during current year:										
18.1 By payment in full.....	1	5,521							1	5,521
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	1	5,521	.0	.0	.0	.0	.0	.0	1	5,521
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	1	5,521	.0	.0	.0	.0	.0	.0	1	5,521
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	165	23,429,791	(a).....						165	23,429,791
21. Issued during year.....									.0	.0
22. Other changes to in force (Net).....	(10)	(597,412)							(10)	(597,412)
23. In force December 31 of current year.....	155	22,832,379	.0	.0	.0	.0	.0	.0	155	22,832,379

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF NEW JERSEY DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	733,062				733,062
2. Annuity considerations.....					.0
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	733,062	.0	.0	.0	733,062
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					.0
6.2 Applied to pay renewal premiums.....					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					.0
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	.0	.0	.0	.0	.0
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	.0	.0	.0	.0	.0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	5,259,476				5,259,476
10. Matured endowments.....					.0
11. Annuity benefits.....					.0
12. Surrender values and withdrawals for life contracts.....	174,350				174,350
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....					.0
15. Totals.....	5,433,827	.0	.0	.0	5,433,827

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	3	55,634							3	55,634
17. Incurred during current year.....	12	5,303,794							12	5,303,794
Settled during current year:										
18.1 By payment in full.....	13	5,308,794							13	5,308,794
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	13	5,308,794	.0	.0	.0	.0	.0	.0	13	5,308,794
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	13	5,308,794	.0	.0	.0	.0	.0	.0	13	5,308,794
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	50,635	.0	.0	.0	.0	.0	.0	2	50,635
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	636	67,099,291	(a)						636	67,099,291
21. Issued during year.....									.0	.0
22. Other changes to in force (Net).....	(55)	(9,261,434)							(55)	(9,261,434)
23. In force December 31 of current year.....	581	57,837,857	.0	.0	.0	.0	.0	.0	581	57,837,857

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF NEW MEXICO DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	66,512				66,512
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	66,512	0	0	0	66,512
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	3				3
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	3	0	0	0	3
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	3	0	0	0	3
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	206,000				206,000
10. Matured endowments.....					0
11. Annuity benefits.....	11,664				11,664
12. Surrender values and withdrawals for life contracts.....	2,625				2,625
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	220,289	0	0	0	220,289

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	2	6,000							2	6,000
17. Incurred during current year.....	2	202,501							2	202,501
Settled during current year:										
18.1 By payment in full.....	4	208,501							4	208,501
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	4	208,501	0	0	0	0	0	0	4	208,501
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	4	208,501	0	0	0	0	0	0	4	208,501
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	138	14,118,211	(a).....						138	14,118,211
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(11)	(1,424,055)							(11)	(1,424,055)
23. In force December 31 of current year.....	127	12,694,156	(a).....	0	0	0	0	0	127	12,694,156

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF NEVADA DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	151,819				151,819
2. Annuity considerations.....					.0
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	151,819	.0	.0	.0	151,819
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					.0
6.2 Applied to pay renewal premiums.....	.43				.43
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					.0
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	.43	.0	.0	.0	.43
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	.43	.0	.0	.0	.43
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	212,000				212,000
10. Matured endowments.....					.0
11. Annuity benefits.....					.0
12. Surrender values and withdrawals for life contracts.....	1,217				1,217
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....					.0
15. Totals.....	213,217	.0	.0	.0	213,217

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....		.0							.0	.0
17. Incurred during current year.....	.5	212,959							.5	212,959
Settled during current year:										
18.1 By payment in full.....	.5	212,959							.5	212,959
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	.5	212,959	.0	.0	.0	.0	.0	.0	.5	212,959
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	.5	212,959	.0	.0	.0	.0	.0	.0	.5	212,959
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.0	.1	.0	.0	.0	.0	.0	.0	.0	.1
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	.237	32,871,002	(a).....						.237	32,871,002
21. Issued during year.....									.0	.0
22. Other changes to in force (Net).....	(26)	(3,218,819)							(26)	(3,218,819)
23. In force December 31 of current year.....	.211	29,652,183	.0	.0	.0	.0	.0	.0	.211	29,652,183

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF NEW YORK DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	227,452				227,452
2. Annuity considerations.....					.0
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	227,452	.0	.0	.0	227,452
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	.39				.39
6.2 Applied to pay renewal premiums.....					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					.0
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	.39	.0	.0	.0	.39
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	.39	.0	.0	.0	.39
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	535,000				535,000
10. Matured endowments.....					.0
11. Annuity benefits.....	17,169				17,169
12. Surrender values and withdrawals for life contracts.....	30,721				30,721
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....					.0
15. Totals.....	582,889	.0	.0	.0	582,889

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....		(0)							.0	(0)
17. Incurred during current year.....	3	638,278							3	638,278
Settled during current year:										
18.1 By payment in full.....	2	538,278							2	538,278
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	2	538,278	.0	.0	.0	.0	.0	.0	2	538,278
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	2	538,278	.0	.0	.0	.0	.0	.0	2	538,278
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	100,000	.0	.0	.0	.0	.0	.0	1	100,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	168	23,690,685	(a)						168	23,690,685
21. Issued during year.....									.0	.0
22. Other changes to in force (Net).....	(12)	(2,872,225)							(12)	(2,872,225)
23. In force December 31 of current year.....	156	20,818,460	.0	(a)	.0	.0	.0	.0	156	20,818,460

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF OHIO DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	770,378				770,378
2. Annuity considerations.....	369				369
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	770,747	0	0	0	770,747
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	6				6
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	5				5
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	12	0	0	0	12
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	12	0	0	0	12
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	1,696,123				1,696,123
10. Matured endowments.....					0
11. Annuity benefits.....	30,456				30,456
12. Surrender values and withdrawals for life contracts.....	533,691				533,691
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	2,260,271	0	0	0	2,260,271

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	8	541,666							8	541,666
17. Incurred during current year.....	74	1,235,005							74	1,235,005
Settled during current year:										
18.1 By payment in full.....	73	1,710,840							73	1,710,840
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	73	1,710,840	0	0	0	0	0	0	73	1,710,840
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	73	1,710,840	0	0	0	0	0	0	73	1,710,840
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	9	65,830	0	0	0	0	0	0	9	65,830
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,410	118,295,869	(a).....						1,410	118,295,869
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(124)	(10,993,998)							(124)	(10,993,998)
23. In force December 31 of current year.....	1,286	107,301,871	0	0	0	0	0	0	1,286	107,301,871

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF OKLAHOMA DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	252,861				252,861
2. Annuity considerations.....					.0
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	252,861	.0	.0	.0	252,861
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					.0
6.2 Applied to pay renewal premiums.....					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	.4				.4
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	.4	.0	.0	.0	.4
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	.4	.0	.0	.0	.4
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	23,500				23,500
10. Matured endowments.....					.0
11. Annuity benefits.....	19,127				19,127
12. Surrender values and withdrawals for life contracts.....	11,985				11,985
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....					.0
15. Totals.....	54,612	.0	.0	.0	54,612

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	2,500							1	2,500
17. Incurred during current year.....	6	223,595							6	223,595
Settled during current year:										
18.1 By payment in full.....	3	23,595							3	23,595
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	3	23,595	.0	.0	.0	.0	.0	.0	3	23,595
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	3	23,595	.0	.0	.0	.0	.0	.0	3	23,595
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	4	202,500	.0	.0	.0	.0	.0	.0	4	202,500
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	247	30,199,752	(a).						247	30,199,752
21. Issued during year.....									.0	.0
22. Other changes to in force (Net).....	(13)	(1,865,000)							(13)	(1,865,000)
23. In force December 31 of current year.....	234	28,334,752	.0	(a).0	.0	.0	.0	.0	234	28,334,752

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF OREGON DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	120,011				120,011
2. Annuity considerations.....					.0
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	120,011	.0	.0	.0	120,011
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	.68				.68
6.2 Applied to pay renewal premiums.....					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					.0
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	.68	.0	.0	.0	.68
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	.68	.0	.0	.0	.68
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	51,105				51,105
10. Matured endowments.....	814				814
11. Annuity benefits.....	7,865				7,865
12. Surrender values and withdrawals for life contracts.....	2,047				2,047
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....					.0
15. Totals.....	61,831	.0	.0	.0	61,831

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	1,000							1	1,000
17. Incurred during current year.....	3	60,470							3	60,470
Settled during current year:										
18.1 By payment in full.....	3	61,447							3	61,447
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	3	61,447	.0	.0	.0	.0	.0	.0	3	61,447
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	3	61,447	.0	.0	.0	.0	.0	.0	3	61,447
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	23	.0	.0	.0	.0	.0	.0	1	23
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	209	18,645,707		(a).....					209	18,645,707
21. Issued during year.....									.0	.0
22. Other changes to in force (Net).....	(19)	(1,867,744)							(19)	(1,867,744)
23. In force December 31 of current year.....	190	16,777,963	.0	(a).....	.0	.0	.0	.0	190	16,777,963

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN OTHER ALIEN GRAND TOTAL DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	35,344				35,344
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	35,344	0	0	0	35,344
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	8				8
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	8	0	0	0	8
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	8	0	0	0	8
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					0
10. Matured endowments.....					0
11. Annuity benefits.....	39,095				39,095
12. Surrender values and withdrawals for life contracts.....	120				120
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	39,215	0	0	0	39,215

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	23	3,110,746		(a).....					23	3,110,746
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(2)	(201,809)							(2)	(201,809)
23. In force December 31 of current year.....	21	2,908,937	0	(a).....0	0	0	0	0	21	2,908,937

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	674,623				674,623
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	674,623	0	0	0	674,623
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	717,683				717,683
10. Matured endowments.....					0
11. Annuity benefits.....	151,808				151,808
12. Surrender values and withdrawals for life contracts.....	(103,363)				(103,363)
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	766,128	0	0	0	766,128

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....		0							0	0
17. Incurred during current year.....	18	847,294							18	847,294
Settled during current year:										
18.1 By payment in full.....	15	747,294							15	747,294
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	15	747,294	0	0	0	0	0	0	15	747,294
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	15	747,294	0	0	0	0	0	0	15	747,294
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	3	100,000	0	0	0	0	0	0	3	100,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	707	90,990,981	(a).....						707	90,990,981
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(46)	(5,675,483)							(46)	(5,675,483)
23. In force December 31 of current year.....	661	85,315,498	0	0	0	0	0	0	661	85,315,498

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN PUERTO RICO DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

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

DETAILS OF WRITE-INS

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF RHODE ISLAND DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	27,495				27,495
2. Annuity considerations.....	1,650				1,650
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	29,145	.0	.0	.0	29,145
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					.0
6.2 Applied to pay renewal premiums.....					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					.0
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	.0	.0	.0	.0	.0
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	.0	.0	.0	.0	.0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	15,000				15,000
10. Matured endowments.....					.0
11. Annuity benefits.....					.0
12. Surrender values and withdrawals for life contracts.....					.0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....					.0
15. Totals.....	15,000	.0	.0	.0	15,000

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....		(.0)							.0	(.0)
17. Incurred during current year.....	2	20,085							2	20,085
Settled during current year:										
18.1 By payment in full.....	1	15,085							1	15,085
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	1	15,085	.0	.0	.0	.0	.0	.0	1	15,085
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	1	15,085	.0	.0	.0	.0	.0	.0	1	15,085
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	5,000	.0	.0	.0	.0	.0	.0	1	5,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	40	4,817,571	(a).						40	4,817,571
21. Issued during year.....									.0	.0
22. Other changes to in force (Net).....	(3)	(749,875)							(3)	(749,875)
23. In force December 31 of current year.....	37	4,067,696	.0	(a).	.0	.0	.0	.0	37	4,067,696

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF SOUTH CAROLINA DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	325,867				325,867
2. Annuity considerations.....	960				960
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	326,827	.0	.0	.0	326,827
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					.0
6.2 Applied to pay renewal premiums.....	.61				.61
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					.0
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	.61	.0	.0	.0	.61
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	.61	.0	.0	.0	.61
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	590,011				590,011
10. Matured endowments.....					.0
11. Annuity benefits.....	11,574				11,574
12. Surrender values and withdrawals for life contracts.....	124,957				124,957
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....					.0
15. Totals.....	726,542	.0	.0	.0	726,542

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	10,607							1	10,607
17. Incurred during current year.....	17	589,911							17	589,911
Settled during current year:										
18.1 By payment in full.....	17	594,911							17	594,911
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	17	594,911	.0	.0	.0	.0	.0	.0	17	594,911
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	17	594,911	.0	.0	.0	.0	.0	.0	17	594,911
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	5,607	.0	.0	.0	.0	.0	.0	1	5,607
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	462	42,681,275	(a).....						462	42,681,275
21. Issued during year.....									.0	.0
22. Other changes to in force (Net).....	(35)	(3,953,600)							(35)	(3,953,600)
23. In force December 31 of current year.....	427	38,727,675	.0	(a)......0	.0	.0	.0	.0	427	38,727,675

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF SOUTH DAKOTA DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	46,987				46,987
2. Annuity considerations.....	400				400
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	47,387	0	0	0	47,387
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	2,163				2,163
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	3				3
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	2,166	0	0	0	2,166
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	2,166	0	0	0	2,166
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	109,144				109,144
10. Matured endowments.....					0
11. Annuity benefits.....	3,800				3,800
12. Surrender values and withdrawals for life contracts.....	17,964				17,964
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	130,908	0	0	0	130,908

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	2	3,748							2	3,748
17. Incurred during current year.....	3	6,047							3	6,047
Settled during current year:										
18.1 By payment in full.....	4	9,785							4	9,785
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	4	9,785	0	0	0	0	0	0	4	9,785
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	4	9,785	0	0	0	0	0	0	4	9,785
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	10	0	0	0	0	0	0	1	10
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	124	6,391,670	(a).....						124	6,391,670
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(7)	(166,597)							(7)	(166,597)
23. In force December 31 of current year.....	117	6,225,073	0	0	0	0	0	0	117	6,225,073

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF TENNESSEE DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	463,828				463,828
2. Annuity considerations.....					.0
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	463,828	.0	.0	.0	463,828
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	8,161				8,161
6.2 Applied to pay renewal premiums.....					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					.0
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	8,161	.0	.0	.0	8,161
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	8,161	.0	.0	.0	8,161
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	362,565				362,565
10. Matured endowments.....					.0
11. Annuity benefits.....	19,352				19,352
12. Surrender values and withdrawals for life contracts.....	39,098				39,098
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....					.0
15. Totals.....	421,015	.0	.0	.0	421,015

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	100,000							1	100,000
17. Incurred during current year.....	4	266,050							4	266,050
Settled during current year:										
18.1 By payment in full.....	5	366,050							5	366,050
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	5	366,050	.0	.0	.0	.0	.0	.0	5	366,050
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	5	366,050	.0	.0	.0	.0	.0	.0	5	366,050
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.0	(1)	.0	.0	.0	.0	.0	.0	.0	(1)
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	418	58,682,367	(a).....						418	58,682,367
21. Issued during year.....	1	100,000							1	100,000
22. Other changes to in force (Net).....	(30)	(4,489,334)							(30)	(4,489,334)
23. In force December 31 of current year.....	389	54,293,033	.0	(a)......0	.0	.0	.0	.0	389	54,293,033

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF TEXAS DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	1,490,830				1,490,830
2. Annuity considerations.....	780				780
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	1,491,610	0	0	0	1,491,610
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	60				60
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	29				29
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	89	0	0	0	89
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	89	0	0	0	89
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	1,868,665				1,868,665
10. Matured endowments.....					0
11. Annuity benefits.....	10,385				10,385
12. Surrender values and withdrawals for life contracts.....	66,784				66,784
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	1,945,834	0	0	0	1,945,834

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	5	110,422							5	110,422
17. Incurred during current year.....	28	1,833,482							28	1,833,482
Settled during current year:										
18.1 By payment in full.....	26	1,918,553							26	1,918,553
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	26	1,918,553	0	0	0	0	0	0	26	1,918,553
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	26	1,918,553	0	0	0	0	0	0	26	1,918,553
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	7	25,350	0	0	0	0	0	0	7	25,350
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,641	239,287,286	(a).....						1,641	239,287,286
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(91)	(17,236,469)							(91)	(17,236,469)
23. In force December 31 of current year.....	1,550	222,050,817	0	0	0	0	0	0	1,550	222,050,817

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF UTAH DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	51,187				51,187
2. Annuity considerations.....	142				142
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	51,329	0	0	0	51,329
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	273				273
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	273	0	0	0	273
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	273	0	0	0	273
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					0
10. Matured endowments.....					0
11. Annuity benefits.....	301				301
12. Surrender values and withdrawals for life contracts.....	31,012				31,012
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	31,313	0	0	0	31,313

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....		(0)							0	(0)
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	(0)	0	0	0	0	0	0	0	(0)
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	81	12,554,914	(a).....						81	12,554,914
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	3	394,223							3	394,223
23. In force December 31 of current year.....	84	12,949,137	(a).....	0	0	0	0	0	84	12,949,137

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF VIRGINIA DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	500,807				500,807
2. Annuity considerations.....	240				240
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	501,047	0	0	0	501,047
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	4				4
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	4				4
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	8	0	0	0	8
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	8	0	0	0	8
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	775,001				775,001
10. Matured endowments.....					0
11. Annuity benefits.....	1,696				1,696
12. Surrender values and withdrawals for life contracts.....	43,861				43,861
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	820,558	0	0	0	820,558

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	2	53,499							2	53,499
17. Incurred during current year.....	16	780,599							16	780,599
Settled during current year:										
18.1 By payment in full.....	16	779,099							16	779,099
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	16	779,099	0	0	0	0	0	0	16	779,099
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	16	779,099	0	0	0	0	0	0	16	779,099
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	54,999	0	0	0	0	0	0	2	54,999
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	652	76,455,609	(a).....						652	76,455,609
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(51)	(6,096,792)							(51)	(6,096,792)
23. In force December 31 of current year.....	601	70,358,817	(a).....	0	0	0	0	0	601	70,358,817

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN U.S. VIRGIN ISLANDS DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	336				336
2. Annuity considerations.....					.0
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	336	.0	.0	.0	336
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					.0
6.2 Applied to pay renewal premiums.....					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					.0
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	.0	.0	.0	.0	.0
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	.0	.0	.0	.0	.0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					.0
10. Matured endowments.....					.0
11. Annuity benefits.....					.0
12. Surrender values and withdrawals for life contracts.....					.0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....	.0				.0
15. Totals.....	.0	.0	.0	.0	.0

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF VERMONT DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	19,942				19,942
2. Annuity considerations.....					.0
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	19,942	.0	.0	.0	19,942
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					.0
6.2 Applied to pay renewal premiums.....					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					.0
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	.0	.0	.0	.0	.0
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	.0	.0	.0	.0	.0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					.0
10. Matured endowments.....					.0
11. Annuity benefits.....					.0
12. Surrender values and withdrawals for life contracts.....					.0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....	.0				.0
15. Totals.....	.0	.0	.0	.0	.0

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....		.0							.0	.0
17. Incurred during current year.....									.0	.0
Settled during current year:										
18.1 By payment in full.....									.0	.0
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	.25	3,829,665	(a).....						.25	3,829,665
21. Issued during year.....									.0	.0
22. Other changes to in force (Net).....	.1	123,574							.1	123,574
23. In force December 31 of current year.....	.26	3,953,239	(a).....	.0	.0	.0	.0	.0	.26	3,953,239

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF WASHINGTON DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	273,148				273,148
2. Annuity considerations.....					.0
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	273,148	.0	.0	.0	273,148
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	1,420				1,420
6.2 Applied to pay renewal premiums.....					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	374				374
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,795	.0	.0	.0	1,795
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	1,795	.0	.0	.0	1,795
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	432,633				432,633
10. Matured endowments.....	200				200
11. Annuity benefits.....	16,341				16,341
12. Surrender values and withdrawals for life contracts.....	27,656				27,656
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....					.0
15. Totals.....	476,830	.0	.0	.0	476,830

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	19	13,800							19	13,800
17. Incurred during current year.....	23	448,184							23	448,184
Settled during current year:										
18.1 By payment in full.....	29	445,237							29	445,237
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	29	445,237	.0	.0	.0	.0	.0	.0	29	445,237
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	29	445,237	.0	.0	.0	.0	.0	.0	29	445,237
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	13	16,747	.0	.0	.0	.0	.0	.0	13	16,747
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	490	27,513,667	(a).....						490	27,513,667
21. Issued during year.....									.0	.0
22. Other changes to in force (Net).....	(29)	(478,205)							(29)	(478,205)
23. In force December 31 of current year.....	461	27,035,462	(a).....	.0	.0	.0	.0	.0	461	27,035,462

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF WISCONSIN DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	1,470,806				1,470,806
2. Annuity considerations.....	38,850				38,850
3. Deposit-type contract funds.....		XXX		XXX	.0
4. Other considerations.....					.0
5. Totals (Sum of Lines 1 to 4).....	1,509,656	.0	.0	.0	1,509,656
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	.77				.77
6.2 Applied to pay renewal premiums.....	106				106
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					.0
6.4 Other.....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	184	.0	.0	.0	184
Annuities:					
7.1 Paid in cash or left on deposit.....					.0
7.2 Applied to provide paid-up annuities.....					.0
7.3 Other.....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	184	.0	.0	.0	184
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	1,598,597				1,598,597
10. Matured endowments.....	1,500				1,500
11. Annuity benefits.....	117,592				117,592
12. Surrender values and withdrawals for life contracts.....	432,228				432,228
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....					.0
15. Totals.....	2,149,917	.0	.0	.0	2,149,917

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	9	218,276							9	218,276
17. Incurred during current year.....	37	1,717,148							37	1,717,148
Settled during current year:										
18.1 By payment in full.....	40	1,651,583							40	1,651,583
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	40	1,651,583	.0	.0	.0	.0	.0	.0	40	1,651,583
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	40	1,651,583	.0	.0	.0	.0	.0	.0	40	1,651,583
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	6	283,841	.0	.0	.0	.0	.0	.0	6	283,841
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,744	221,528,719	(a).....						3,744	221,528,719
21. Issued during year.....	4	62,500							4	62,500
22. Other changes to in force (Net).....	(221)	(12,128,625)							(221)	(12,128,625)
23. In force December 31 of current year.....	3,527	209,462,594	.0 (a).....	.0	.0	.0	.0	.0	3,527	209,462,594

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancelable (b).....	4,332	4,298			
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....	4,332	4,298	.0	.0	.0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	4,332	4,298	.0	.0	.0

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



DIRECT BUSINESS IN THE STATE OF WEST VIRGINIA DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	47,316				47,316
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	47,316	0	0	0	47,316
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	207,000				207,000
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....	29,443				29,443
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	236,443	0	0	0	236,443

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	7,000							1	7,000
17. Incurred during current year.....	1	202,914							1	202,914
Settled during current year:										
18.1 By payment in full.....	2	209,914							2	209,914
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	2	209,914	0	0	0	0	0	0	2	209,914
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	2	209,914	0	0	0	0	0	0	2	209,914
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	76	10,154,646	(a).....						76	10,154,646
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(8)	(1,676,767)							(8)	(1,676,767)
23. In force December 31 of current year.....	68	8,477,879	0	0	0	0	0	0	68	8,477,879

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF WYOMING DURING THE YEAR
NAIC Group Code.....0084 NAIC Company Code.....67083

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	26,661				26,661
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	26,661	0	0	0	26,661
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....	15				15
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	15	0	0	0	15
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	15	0	0	0	15
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	50,000				50,000
10. Matured endowments.....					0
11. Annuity benefits.....	3,770				3,770
12. Surrender values and withdrawals for life contracts.....	11,792				11,792
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	65,562	0	0	0	65,562

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pol. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....		(0)							0	(0)
17. Incurred during current year.....	1	50,123							1	50,123
Settled during current year:										
18.1 By payment in full.....	1	50,123							1	50,123
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	1	50,123	0	0	0	0	0	0	1	50,123
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	1	50,123	0	0	0	0	0	0	1	50,123
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	(0)	0	0	0	0	0	0	0	(0)
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	49	5,885,985	(a)						49	5,885,985
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(6)	(768,839)							(6)	(768,839)
23. In force December 31 of current year.....	43	5,117,146	0	0	0	0	0	0	43	5,117,146

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

ACCIDENT AND HEALTH INSURANCE

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

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

Annual Statement for the year 2014 of the

MANHATTAN NATIONAL LIFE INSURANCE COMPANY

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

Interest Maintenance Reserve

	1 Amount
1. Reserve as of December 31, prior year.....	552,852
2. Current year's realized pre-tax capital gains/(losses) of \$.....440,204 transferred into the reserve net of taxes of \$.....154,071.....	286,133
3. Adjustment for current year's liability gains/(losses) released from the reserve.....	0
4. Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3).....	838,985
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4).....	(18,277)
6. Reserve as of December 31, current year (Line 4 minus Line 5).....	857,262

Amortization

Year of Amortization	1 Reserve as of December 31, Prior Year	2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3 Adjustment for Current Year's Liability Gains/(Losses) Released from the Reserve	4 Balance Before Reduction for the Current Year's Amortization (Cols. 1 + 2 + 3)
1. 2014.....	(50,045)	31,768		(18,277)
2. 2015.....	(71,909)	32,293		(39,616)
3. 2016.....	(47,786)	33,087		(14,699)
4. 2017.....	(14,150)	33,320		19,170
5. 2018.....	29,986	33,767		63,752
6. 2019.....	59,298	33,655		92,953
7. 2020.....	69,841	30,923		100,764
8. 2021.....	75,091	24,638		99,729
9. 2022.....	83,767	17,850		101,617
10. 2023.....	90,766	11,062		101,827
11. 2024.....	95,193	3,771		98,964
12. 2025.....	95,378			95,378
13. 2026.....	87,857			87,857
14. 2027.....	69,250			69,250
15. 2028.....	44,112			44,112
16. 2029.....	22,999			22,999
17. 2030.....	6,772			6,772
18. 2031.....	(4,923)			(4,923)
19. 2032.....	(11,913)			(11,913)
20. 2033.....	(14,969)			(14,969)
21. 2034.....	(16,948)			(16,948)
22. 2035.....	(17,411)			(17,411)
23. 2036.....	(14,911)			(14,911)
24. 2037.....	(9,369)			(9,369)
25. 2038.....	(3,122)			(3,122)
26. 2039.....				0
27. 2040.....				0
28. 2041.....				0
29. 2042.....				0
30. 2043.....				0
31. 2044 and Later.....				0
32. Total (Lines 1 to 31).....	552,852	286,133	0	838,985

ASSET VALUATION RESERVE

	Default Component			Equity Component			7 Total Amount (Cols. 3 + 6)
	1 Other Than Mortgage Loans	2 Mortgage Loans	3 Total (Cols. 1 + 2)	4 Common Stock	5 Real Estate and Other Invested Assets	6 Total (Cols. 4 + 5)	
1. Reserve as of December 31, prior year.....	747,255		747,255	11,310		11,310	758,565
2. Realized capital gains/(losses) net of taxes - General Account.....			0			0	0
3. Realized capital gains/(losses) net of taxes - Separate Accounts.....			0			0	0
4. Unrealized capital gains/(losses) - net of deferred taxes - General Account.....	(32)		(32)	25,831		25,831	25,799
5. Unrealized capital gains/(losses) - net of deferred taxes - Separate Accounts.....			0			0	0
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves.....			0			0	0
7. Basic contribution.....	138,478		138,478	0		0	138,478
8. Accumulated balances (Lines 1 through 5, minus 6 plus 7).....	885,701	0	885,701	37,141	0	37,141	922,842
9. Maximum reserve.....	722,369		722,369	8,400		8,400	730,769
10. Reserve objective.....	513,200		513,200	8,400		8,400	521,600
11. 20% of (Line 10 minus Line 8).....	(74,500)	0	(74,500)	(5,748)	0	(5,748)	(80,248)
12. Balance before transfers (Lines 8 + 11).....	811,201	0	811,201	31,393	0	31,393	842,594
13. Transfers.....			0			0	0
14. Voluntary contribution.....			0			0	0
15. Adjustment down to maximum/up to zero.....	(88,832)		(88,832)	(22,993)		(22,993)	(111,825)
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15).....	722,369	0	722,369	8,400	0	8,400	730,769

ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

Line Number	NAIC Desig- nation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols. 4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
LONG-TERM BONDS												
1		Exempt obligations	7,613,761	XXX	XXX	7,613,761	0.0000	0	0.0000	0	0.0000	0
2	1	Highest quality	100,185,505	XXX	XXX	100,185,505	0.0004	40,074	0.0023	230,427	0.0030	300,557
3	2	High quality	23,686,684	XXX	XXX	23,686,684	0.0019	45,005	0.0058	137,383	0.0090	213,180
4	3	Medium quality	3,742,776	XXX	XXX	3,742,776	0.0093	34,808	0.0230	86,084	0.0340	127,254
5	4	Low quality	685,039	XXX	XXX	685,039	0.0213	14,591	0.0530	36,307	0.0750	51,378
6	5	Lower quality		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
7	6	In or near default		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
8		Total unrated multi-class securities acquired by conversion		XXX	XXX	0	XXX	0	XXX	0	XXX	
9		Total bonds (sum of Lines 1 through 8)	135,913,766	XXX	XXX	135,913,766	XXX	134,478	XXX	490,200	XXX	692,369
PREFERRED STOCKS												
10	1	Highest quality		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
11	2	High quality		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
12	3	Medium quality		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
13	4	Low quality		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
14	5	Lower quality		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
15	6	In or near default		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
16		Affiliated life with AVR		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
17		Total preferred stocks (sum of Lines 10 through 16)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
SHORT-TERM BONDS												
18		Exempt obligations	13,871,636	XXX	XXX	13,871,636	0.0000	0	0.0000	0	0.0000	0
19	1	Highest quality	10,000,011	XXX	XXX	10,000,011	0.0004	4,000	0.0023	23,000	0.0030	30,000
20	2	High quality		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
21	3	Medium quality		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
22	4	Low quality		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
23	5	Lower quality		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
24	6	In or near default		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
25		Total short-term bonds (sum of Lines 18 thru 24)	23,871,647	XXX	XXX	23,871,647	XXX	4,000	XXX	23,000	XXX	30,000
DERIVATIVE INSTRUMENTS												
26		Exchange traded		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
27	1	Highest quality		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
28	2	High quality		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
29	3	Medium quality		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
30	4	Low quality		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
31	5	Lower quality		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
32	6	In or near default		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
33		Total derivative instruments	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
34		Total (Lines 9 + 17 + 25 + 33)	159,785,413	XXX	XXX	159,785,413	XXX	138,478	XXX	513,200	XXX	722,369

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MANHATTAN NATIONAL LIFE INSURANCE COMPANY

ASSET VALUATION RESERVE (continued)

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

Line Number	NAIC Desig- nation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols. 4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
31		MORTGAGE LOANS										
		In good standing:										
	35	Farm mortgages - CM1 - highest quality.....			XXX	0	0.0010	0	0.0050	0	0.0065	0
	36	Farm mortgages - CM2 - high quality.....			XXX	0	0.0035	0	0.0100	0	0.0130	0
	37	Farm mortgages - CM3 - medium quality.....			XXX	0	0.0060	0	0.0175	0	0.0225	0
	38	Farm mortgages - CM4 - low medium quality.....			XXX	0	0.0105	0	0.0300	0	0.0375	0
	39	Farm mortgages - CM5 - low quality.....			XXX	0	0.0160	0	0.0425	0	0.0550	0
	40	Residential mortgages-insured or guaranteed.....			XXX	0	0.0003	0	0.0006	0	0.0010	0
	41	Residential mortgages-all other.....			XXX	0	0.0013	0	0.0030	0	0.0040	0
	42	Commercial mortgages-insured or guaranteed.....			XXX	0	0.0003	0	0.0006	0	0.0010	0
	43	Commercial mortgages-all other - CM1 - highest quality.....			XXX	0	0.0010	0	0.0050	0	0.0065	0
	44	Commercial mortgages-all other - CM2 - high quality.....			XXX	0	0.0035	0	0.0100	0	0.0130	0
	45	Commercial mortgages-all other - CM3 - medium quality.....			XXX	0	0.0060	0	0.0175	0	0.0225	0
	46	Commercial mortgages-all other - CM4 - low medium quality.....			XXX	0	0.0105	0	0.0300	0	0.0375	0
	47	Commercial mortgages-all other - CM5 - low quality.....			XXX	0	0.0160	0	0.0425	0	0.0550	0
		Overdue, not in process:										
	48	Farm mortgages.....			XXX	0	0.0420	0	0.0760	0	0.1200	0
	49	Residential mortgages-insured or guaranteed.....			XXX	0	0.0005	0	0.0012	0	0.0020	0
	50	Residential mortgages-all other.....			XXX	0	0.0025	0	0.0058	0	0.0090	0
	51	Commercial mortgages-insured or guaranteed.....			XXX	0	0.0005	0	0.0012	0	0.0020	0
	52	Commercial mortgages-all other.....			XXX	0	0.0420	0	0.0760	0	0.1200	0
		In process of foreclosure:										
	53	Farm mortgages.....			XXX	0	0.0000	0	0.1700	0	0.1700	0
	54	Residential mortgages-insured or guaranteed.....			XXX	0	0.0000	0	0.0040	0	0.0040	0
	55	Residential mortgages-all other.....			XXX	0	0.0000	0	0.0130	0	0.0130	0
	56	Commercial mortgages-insured or guaranteed.....			XXX	0	0.0000	0	0.0040	0	0.0040	0
	57	Commercial mortgages-all other.....			XXX	0	0.0000	0	0.1700	0	0.1700	0
	58	Total Schedule B mortgages (sum of Lines 35 through 57).....	0	0	XXX	0	XXX	0	XXX	0	XXX	0
	59	Schedule DA mortgages.....			XXX	0	0.0030	0	0.0100	0	0.0130	0
	60	Total mortgage loans on real estate (Lines 58 + 59).....	0	0	XXX	0	XXX	0	XXX	0	XXX	0

ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Equity and Other Invested Asset Component

Line Number	NAIC Design- nation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols. 4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
COMMON STOCK												
1		Unaffiliated public.....	75,132	XXX	XXX	75,132	0.0000	0	(a).....0.1118	8,400	(a).....0.1118	8,400
2		Unaffiliated private.....		XXX	XXX	0	0.0000	0	0.1600	0	0.1600	0
3		Federal Home Loan Bank.....		XXX	XXX	0	0.0000	0	0.0050	0	0.0080	0
4		Affiliated life with AVR.....		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
Affiliated Investment Subsidiary:												
5		Fixed income exempt obligations.....				0	XXX		XXX		XXX	
6		Fixed income highest quality.....				0	XXX		XXX		XXX	
7		Fixed income high quality.....				0	XXX		XXX		XXX	
8		Fixed income medium quality.....				0	XXX		XXX		XXX	
9		Fixed income low quality.....				0	XXX		XXX		XXX	
10		Fixed income lower quality.....				0	XXX		XXX		XXX	
11		Fixed income in or near default.....				0	XXX		XXX		XXX	
12		Unaffiliated common stock public.....				0	0.0000	0	(a).....	0	(a).....	0
13		Unaffiliated common stock private.....				0	0.0000	0	0.1600	0	0.1600	0
14		Real estate.....				0	(b).....	0	(b).....	0	(b).....	0
15		Affiliated - certain other (see SVO Purposes and Procedures manual).....		XXX	XXX	0	0.0000	0	0.1300	0	0.1300	0
16		Affiliated - all other.....		XXX	XXX	0	0.0000	0	0.1600	0	0.1600	0
17		Total common stock (sum of Lines 1 through 16).....	75,132	0	0	75,132	XXX	0	XXX	8,400	XXX	8,400
REAL ESTATE												
18		Home office property (General Account only).....				0	0.0000	0	0.0750	0	0.0750	0
19		Investment properties.....				0	0.0000	0	0.0750	0	0.0750	0
20		Properties acquired in satisfaction of debt.....				0	0.0000	0	0.1100	0	0.1100	0
21		Total real estate (sum of Lines 18 through 20).....	0	0	0	0	XXX	0	XXX	0	XXX	0
OTHER INVESTED ASSETS												
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS												
22		Exempt obligations.....		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
23	1	Highest quality.....		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
24	2	High quality.....		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
25	3	Medium quality.....		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
26	4	Low quality.....		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
27	5	Lower quality.....		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
28	6	In or near default.....		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
29		Total with bond characteristics (sum of Lines 22 through 28).....	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0

AVR-Equity Component (Lines 30-64)
NONE

AVR-Equity Component (Lines 65-86)
NONE

AVR-Replications (Synthetic) Assets
NONE

Sch. F
NONE

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

			Total		Group Accident and Health		Credit Accident and Health (Group and Individual)		Collectively Renewable		Other Individual Contracts								
											Non-Cancelable		Guaranteed Renewable		Non-Renewable for Stated Reasons Only		Other Accident Only		All Other
			1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %	15 Amount	16 %	17 Amount	18 %
PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS																			
1.	Premiums written.....	5,728	XXX		XXX		XXX		XXX	4,909	XXX	819	XXX		XXX		XXX		XXX
2.	Premiums earned.....	5,792	XXX		XXX		XXX		XXX	4,961	XXX	831	XXX		XXX		XXX		XXX
3.	Incurred claims.....	4,809	83.0	0	0.0	0	0.0	0	0.0	4,809	96.9	0	0.0	0	0.0	0	0.0	0	0.0
4.	Cost containment expenses.....	0	0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0
5.	Incurred claims and cost containment expenses (Lines 3 and 4).....	4,809	83.0	0	0.0	0	0.0	0	0.0	4,809	96.9	0	0.0	0	0.0	0	0.0	0	0.0
6.	Increase in contract reserves.....	(559)	(9.7)	0	0.0	0	0.0	0	0.0	(559)	(11.3)	0	0.0	0	0.0	0	0.0	0	0.0
7.	Commissions (a).....	(6,733)	(116.2)		0.0		0.0		0.0		0.0	(6,733)	(810.2)		0.0		0.0		0.0
8.	Other general insurance expenses.....	0	0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0
9.	Taxes, licenses and fees.....	0	0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0
10.	Total other expenses incurred.....	(6,733)	(116.2)	0	0.0	0	0.0	0	0.0	0	0.0	(6,733)	(810.2)	0	0.0	0	0.0	0	0.0
11.	Aggregate write-ins for deductions.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
12.	Gain from underwriting before dividends or refunds.....	8,275	142.9	0	0.0	0	0.0	0	0.0	711	14.3	7,564	910.2	0	0.0	0	0.0	0	0.0
13.	Dividends or refunds.....	0	0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0
14.	Gain from underwriting after dividends or refunds.....	8,275	142.9	0	0.0	0	0.0	0	0.0	711	14.3	7,564	910.2	0	0.0	0	0.0	0	0.0
DETAILS OF WRITE-INS																			
1101.	.....	0	0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0
1102.	.....	0	0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0
1103.	.....	0	0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0
1198.	Summary of remaining write-ins for Line 11 from overflow page.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1199.	Total (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0

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

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (continued)

	1	2	3	4	Other Individual Contracts				
		Group Accident and Health	Credit Accident and Health (Group and Individual)	Collectively Renewable	5	6	7	8	9
	Total				Non-Cancelable	Guaranteed Renewable	Non-Renewable for Stated Reasons Only	Other Accident Only	All Other
PART 2 - RESERVES AND LIABILITIES									
A. Premium Reserves:									
1. Unearned premiums.....	150				96	54			
2. Advance premiums.....	0								
3. Reserve for rate credits.....	0								
4. Total premium reserves, current year.....	150	0	0	0	96	54	0	0	0
5. Total premium reserves, prior year.....	214				148	66			
6. Increase in total premium reserves.....	(64)	0	0	0	(52)	(12)	0	0	0
B. Contract Reserves:									
1. Additional reserves (a).....	10,257				10,257				
2. Reserve for future contingent benefits.....	0								
3. Total contract reserves, current year.....	10,257	0	0	0	10,257	0	0	0	0
4. Total contract reserves, prior year.....	10,816				10,816				
5. Increase in contract reserves.....	(559)	0	0	0	(559)	0	0	0	0
C. Claim Reserves and Liabilities:									
1. Total current year.....	115,055	0	0	0	115,055	0	0	0	0
2. Total prior year.....	110,246				110,246				
3. Increase.....	4,809	0	0	0	4,809	0	0	0	0

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

1. Claims Paid During the Year:									
1.1 On claims incurred prior to current year.....	0								
1.2 On claims incurred during current year.....	0								
2. Claim Reserves and Liabilities, December 31, Current Year:									
2.1 On claims incurred prior to current year.....	115,055				115,055				
2.2 On claims incurred during current year.....	0								
3. Test:									
3.1 Lines 1.1 and 2.1.....	115,055	0	0	0	115,055	0	0	0	0
3.2 Claim reserves and liabilities, December 31, prior year.....	110,246				110,246				
3.3 Line 3.1 minus Line 3.2.....	4,809	0	0	0	4,809	0	0	0	0

PART 4 - REINSURANCE

A. Reinsurance Assumed:									
1. Premiums written.....	0								
2. Premiums earned.....	0								
3. Incurred claims.....	0								
4. Commissions.....	0								
B. Reinsurance Ceded:									
1. Premiums written.....	150,844				833	150,011			
2. Premiums earned.....	150,747				736	150,011			
3. Incurred claims.....	183,395					183,395			
4. Commissions.....	6,750					6,750			

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

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MANHATTAN NATIONAL LIFE INSURANCE COMPANY

SCHEDULE H - PART 5 - HEALTH CLAIMS

	1 Medical	2 Dental	3 Other	4 Total
A. Direct:				
1. Incurred claims.....			188,204	188,204
2. Beginning claim reserves and liabilities.....			476,758	476,758
3. Ending claim reserves and liabilities.....			488,330	488,330
4. Claims paid.....	0	0	176,632	176,632
B. Assumed Reinsurance:				
5. Incurred claims.....				0
6. Beginning claim reserves and liabilities.....				0
7. Ending claim reserves and liabilities.....				0
8. Claims paid.....	0	0	0	0
C. Ceded Reinsurance:				
9. Incurred claims.....			183,395	183,395
10. Beginning claim reserves and liabilities.....			366,512	366,512
11. Ending claim reserves and liabilities.....			373,275	373,275
12. Claims paid.....	0	0	176,632	176,632
D. Net:				
13. Incurred claims.....	0	0	4,809	4,809
14. Beginning claim reserves and liabilities.....	0	0	110,246	110,246
15. Ending claim reserves and liabilities.....	0	0	115,055	115,055
16. Claims paid.....	0	0	0	0
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred claims and cost containment expenses.....			4,809	4,809
18. Beginning reserves and liabilities.....			110,246	110,246
19. Ending reserves and liabilities.....			115,055	115,055
20. Paid claims and cost containment expenses.....	0	0	0	0

SCHEDULE S - PART 1 - SECTION 1

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

1	2	3	4	5	6	7	8	9	10	11	12
NAIC Company Code	ID Number	Effective Date	Name of Reinsured	Domiciliary Jurisdiction	Type of Reinsurance Assumed	Amount of In Force at End of Year	Reserve	Premiums	Reinsurance Payable on Paid and Unpaid Losses	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
General Account - Non-Affiliates - U.S. Non-Affiliates											
65870.....	13-1004640....	12/01/1988	The Manhattan Life Insurance Company.....	NY.....	YRT/i.....	91,107	753	3,253			
0899999	Total - General Account - Non-Affiliates - U.S. Non-Affiliates.....					91,107	753	3,253	0	0	0
1099999	Total - General Account - Non-Affiliates.....					91,107	753	3,253	0	0	0
1199999	Total - General Account.....					91,107	753	3,253	0	0	0
2399999	Total U.S.....					91,107	753	3,253	0	0	0
9999999	Total.....					91,107	753	3,253	0	0	0

SCHEDULE S - PART 1 - SECTION 2

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

1	2	3	4	5	6	7	8	9	10	11	12
NAIC Company Code	ID Number	Effective Date	Name of Reinsured	Domiciliary Jurisdiction	Type of Reinsurance Assumed	Premiums	Unearned Premiums	Reserve Liability Other Than for Unearned Premiums	Reinsurance Payable on Paid and Unpaid Losses	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance

NONE

Annual Statement for the year 2014 of the

MANHATTAN NATIONAL LIFE INSURANCE COMPANY

SCHEDULE S - PART 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 Unpaid Losses
Life and Annuity - Non-Affiliates - U.S. Non-Affiliates						
68276.....	48-1024691....	02/01/1996	Employers Reassurance Corporation.....	KS.....	37,500	
88340.....	59-2859797....	07/01/1995	Hannover Life Reassurance Co of America.....	FL.....	37,500	
88340.....	59-2859797....	11/01/1996	Hannover Life Reassurance Co of America.....	FL.....	166,675	
66346.....	58-0828824....	04/01/1991	Munich American Reassurance Company.....	GA.....	39,362	42,623
88099.....	75-1608507....	01/01/1977	Optimum Re Insurance Company.....	TX.....		60,000
67105.....	41-0451140....	04/01/1991	Reliastar Life Insurance Company.....	MN.....	39,362	42,623
93572.....	43-1235868....	01/01/1992	RGA Reinsurance Company.....	MO.....	130,000	
68713.....	84-0499703....	01/01/1996	Security Life of Denver Insurance Company.....	CO.....	200,825	
82627.....	06-0839705....	01/01/1981	Swiss Re Life and Health of America Inc.....	CT.....	5,000	
82627.....	06-0839705....	08/01/1981	Swiss Re Life and Health of America Inc.....	CT.....	25,000	
82627.....	06-0839705....	03/01/1993	Swiss Re Life and Health of America Inc.....	CT.....		241,431
82627.....	06-0839705....	01/01/1996	Swiss Re Life and Health of America Inc.....	CT.....	37,500	
0899999.	Total - Life and Annuity Non-Affiliates - U.S. Non-Affiliates.....				718,724	386,677
1099999.	Total - Life and Annuity Non-Affiliates.....				718,724	386,677
1199999.	Total - Life and Annuity.....				718,724	386,677
Accident and Health - Non-Affiliates - U.S. Non-Affiliates						
86258.....	13-2572994....	01/01/1997	General Re Life Corporation.....	CT.....		128,429
1999999.	Total - Accident and Health Non-Affiliates - U.S. Non-Affiliates.....				0	128,429
2199999.	Total - Accident and Health Non-Affiliates.....				0	128,429
2299999.	Total - Accident and Health.....				0	128,429
2399999.	Total U.S.....				718,724	515,106
9999999.	Total.....				718,724	515,106

SCHEDULE S - PART 3 - SECTION 1

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount In Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9	10		12	13		
								Current Year	Prior Year		Current Year	Prior Year		
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates														
68276.....	48-1024691....	03/01/1974	Employers Reassurance Corporation.....	KS.....	YRT/I.....	OL.....	1,098	725	3,046	.....	.....	.....	.....	.....
68276.....	48-1024691....	11/01/1979	Employers Reassurance Corporation.....	KS.....	CO/I.....	OL.....	5,199,628	1,695	1,905	51,410	.....	.....	.....	.....
68276.....	48-1024691....	10/01/1983	Employers Reassurance Corporation.....	KS.....	YRT/I.....	OL.....	4,708,593	63,698	63,698	71,984	.....	.....	.....	.....
68276.....	48-1024691....	07/01/1989	Employers Reassurance Corporation.....	KS.....	YRT/I.....	OL.....	1,649,956	27,969	.....	.....48,995	.....	.....	.....	.....
68276.....	48-1024691....	01/01/1990	Employers Reassurance Corporation.....	KS.....	YRT/I.....	OL.....	739,560	4,340	2,750	10,726	.....	.....	.....	.....
68276.....	48-1024691....	06/01/1990	Employers Reassurance Corporation.....	KS.....	CO/I.....	OL.....	7,016,303	54,955	74,446	85,817	.....	.....	.....	.....
68276.....	48-1024691....	06/01/1990	Employers Reassurance Corporation.....	KS.....	YRT/I.....	OL.....	1,289,468	48,116	.....	.....98,268	.....	.....	.....	.....
68276.....	48-1024691....	06/01/1990	Employers Reassurance Corporation.....	KS.....	YRT/I.....	OL.....	347,243	434	423	4,036	.....	.....	.....	.....
68276.....	48-1024691....	11/01/1993	Employers Reassurance Corporation.....	KS.....	DIS/I.....	OL.....	.....	.....57,042	54,799	.....	.....	.....	.....	.....
68276.....	48-1024691....	02/01/1996	Employers Reassurance Corporation.....	KS.....	CO/I.....	OL.....	12,552,100	82,387	91,677	100,973	.....	.....	.....	.....
68276.....	48-1024691....	02/01/1996	Employers Reassurance Corporation.....	KS.....	CO/I.....	OL.....	43,607,302	236,292	226,362	131,994	.....	.....	.....	.....
86258.....	13-2572994....	10/01/1972	General Re Life Corporation.....	CT.....	CO/I.....	OL.....	25,000	644	586	(9,578)	.....	.....	.....	.....
86258.....	13-2572994....	10/01/1972	General Re Life Corporation.....	CT.....	YRT/I.....	OL.....	186,167	32,284	31,253	9,787	.....	.....	.....	.....
88340.....	59-2859797....	07/01/1995	Hannover Life Reassurance Co of America.....	FL.....	YRT/I.....	OL.....	5,637,196	31,727	32,731	32,735	.....	.....	.....	.....
88340.....	59-2859797....	07/01/1995	Hannover Life Reassurance Co of America.....	FL.....	YRT/I.....	OL.....	42,541,052	231,663	221,300	92,405	.....	.....	.....	.....
88340.....	59-2859797....	11/01/1996	Hannover Life Reassurance Co of America.....	FL.....	YRT/I.....	OL.....	11,495,205	73,653	65,820	34,907	.....	.....	.....	.....
88340.....	59-2859797....	11/01/1996	Hannover Life Reassurance Co of America.....	FL.....	YRT/I.....	OL.....	347,241	434	423	4,265	.....	.....	.....	.....
65676.....	35-0472300....	08/01/1979	Lincoln National Life Insurance Co.....	IN.....	CO/I.....	OL.....	106,177	764	698	937	.....	.....	.....	.....
65676.....	35-0472300....	08/01/1979	Lincoln National Life Insurance Co.....	IN.....	YRT/I.....	OL.....	19,830	11,593	14,580	(4,585)	.....	.....	.....	.....
65676.....	35-0472300....	06/01/1990	Lincoln National Life Insurance Co.....	IN.....	CO/I.....	OL.....	2,489,833	17,726	13,078	33,911	.....	.....	.....	.....
65676.....	35-0472300....	06/01/1991	Lincoln National Life Insurance Co.....	IN.....	YRT/I.....	OL.....	250,662	8,686	.....	.....9,591	.....	.....	.....	.....
65676.....	35-0472300....	01/01/1993	Lincoln National Life Insurance Co.....	IN.....	CO/I.....	OL.....	53,400	1,934	1,934	(133)	.....	.....	.....	.....
65676.....	35-0472300....	03/01/1993	Lincoln National Life Insurance Co.....	IN.....	YRT/I.....	OL.....	3,388,940	62,312	.....	.....48,305	.....	.....	.....	.....
66346.....	58-0828824....	01/01/1969	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	45,028	12,300	11,738	241	.....	.....	.....	.....
66346.....	58-0828824....	01/01/1969	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	1,496	.....	.....	.....	.....	.....	.....	.....
66346.....	58-0828824....	01/01/1981	Munich American Reassurance Company.....	GA.....	CO/I.....	OL.....	65,000	8,152	7,749	2,823	.....	.....	.....	.....
66346.....	58-0828824....	03/01/1982	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	614,367	734	755	11,815	.....	.....	.....	.....
66346.....	58-0828824....	04/01/1991	Munich American Reassurance Company.....	GA.....	CO/I.....	OL.....	3,349,606	3,085,660	3,324,215	.....	.....	.....	.....	.....
88099.....	75-1608507....	07/01/1989	Optimum Re Insurance Company.....	TX.....	YRT/I.....	OL.....	2,588,440	46,301	46,301	65,558	.....	.....	.....	.....
88099.....	75-1608507....	07/04/1989	Optimum Re Insurance Company.....	TX.....	CO/I.....	OL.....	3,594,399	868	790	20,103	.....	.....	.....	.....
88099.....	75-1608507....	10/01/1991	Optimum Re Insurance Company.....	TX.....	CO/I.....	OL.....	22,772,601	123,943	128,758	73,068	.....	.....	.....	.....
67105.....	41-0451140....	04/01/1991	Reliastar Life Insurance Company.....	MN.....	CO/I.....	OL.....	3,349,606	3,085,660	3,324,215	.....	.....	.....	.....	.....
93572.....	43-1235868....	05/02/1974	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	.....	.....	.....20,725	985	.....	.....	.....	.....
93572.....	43-1235868....	11/01/1985	RGA Reinsurance Company.....	MO.....	CO/I.....	OL.....	6,263,325	56,540	56,535	46,335	.....	.....	.....	.....
93572.....	43-1235868....	01/01/1992	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	25,253,000	149,200	147,945	111,698	.....	.....	.....	.....
87572.....	23-2038295....	12/01/1980	Scottish Re, Inc.....	DE.....	CO/I.....	OL.....	25,000	7,703	7,358	271	.....	.....	.....	.....
87572.....	23-2038295....	02/01/1981	Scottish Re, Inc.....	DE.....	YRT/I.....	OL.....	8,894	127	127	218	.....	.....	.....	.....

SCHEDULE S - PART 3 - SECTION 1

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

43.1

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount In Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9 Current Year	10 Prior Year		12 Current Year	13 Prior Year		
68713.....	84-0499703....	09/01/1986	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	18,284,481	.....	.....	.....340,980	.....	.....	.....	.....
68713.....	84-0499703....	09/01/1986	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	2,556,360	.....	.....	.....161,449	.....	.....	.....	.....
68713.....	84-0499703....	04/01/1988	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	5,854,138	14,773	14,964	53,723	.....	.....	.....	.....
68713.....	84-0499703....	01/01/1992	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	997,000	3,631	4,699	3,362	.....	.....	.....	.....
68713.....	84-0499703....	11/01/1993	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	12,713,800	83,593	93,000	85,996	.....	.....	.....	.....
68713.....	84-0499703....	01/01/1996	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	99,584,552	570,344	617,517	303,151	.....	.....	.....	.....
68713.....	84-0499703....	01/01/1996	Security Life of Denver Insurance Company.....	CO.....	DIS/I.....	OL.....	.....	.....200,139	202,038	.....	.....	.....	.....	.....
68713.....	84-0499703....	05/01/1996	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	347,240	434	423	4,041	.....	.....	.....	.....
68713.....	84-0499703....	11/01/1996	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	5,790,269	37,726	33,830	16,574	.....	.....	.....	.....
82627.....	06-0839705....	01/01/1967	Swiss Re Life and Health of America Inc.....	CT.....	DIS/I.....	OL.....	.....	.....299,046	273,590	.....	.....	.....	.....	.....
82627.....	06-0839705....	01/01/1967	Swiss Re Life and Health of America Inc.....	CT.....	YRT/I.....	OL.....	162,254	8,128	8,128	2,381	.....	.....	.....	.....
82627.....	06-0839705....	01/01/1967	Swiss Re Life and Health of America Inc.....	CT.....	YRT/I.....	OL.....	23,147,448	208,150	208,150	180,763	.....	.....	.....	.....
82627.....	06-0839705....	05/01/1978	Swiss Re Life and Health of America Inc.....	CT.....	CO/I.....	OL.....	25,000	16,039	16,039	.....	.....	.....	.....	.....
82627.....	06-0839705....	05/01/1978	Swiss Re Life and Health of America Inc.....	CT.....	YRT/I.....	OL.....	7,295	4,565	4,442	.....	.....	.....	.....	.....
82627.....	06-0839705....	01/01/1980	Swiss Re Life and Health of America Inc.....	CT.....	CO/I.....	OL.....	370,000	9,597	12,704	19,806	.....	.....	.....	.....
82627.....	06-0839705....	01/01/1980	Swiss Re Life and Health of America Inc.....	CT.....	YRT/I.....	OL.....	4,000	.....	.....	.....523	.....	.....	.....	.....
82627.....	06-0839705....	01/01/1980	Swiss Re Life and Health of America Inc.....	CT.....	YRT/I.....	OL.....	4,633	6	.....	.....45	.....	.....	.....	.....
82627.....	06-0839705....	01/01/1981	Swiss Re Life and Health of America Inc.....	CT.....	CO/I.....	OL.....	6,046,370	91,437	105,469	121,570	.....	.....	.....	.....
82627.....	06-0839705....	01/01/1981	Swiss Re Life and Health of America Inc.....	CT.....	YRT/I.....	OL.....	228,760	25,390	25,345	3,276	.....	.....	.....	.....
82627.....	06-0839705....	08/01/1981	Swiss Re Life and Health of America Inc.....	CT.....	YRT/I.....	OL.....	235,000	2,504	2,504	5,840	.....	.....	.....	.....
82627.....	06-0839705....	10/01/1981	Swiss Re Life and Health of America Inc.....	CT.....	CO/I.....	OL.....	4,252,500	1,513,536	1,415,413	114,901	.....	.....	.....	.....
82627.....	06-0839705....	11/01/1981	Swiss Re Life and Health of America Inc.....	CT.....	YRT/I.....	OL.....	12,307,146	33,955	25,920	403,234	.....	.....	.....	.....
82627.....	06-0839705....	01/01/1983	Swiss Re Life and Health of America Inc.....	CT.....	CO/I.....	OL.....	5,607,313	2,074	2,021	48,844	.....	.....	.....	.....
82627.....	06-0839705....	07/01/1983	Swiss Re Life and Health of America Inc.....	CT.....	CO/I.....	OL.....	635,000	206,462	242,917	18,206	.....	.....	.....	.....
82627.....	06-0839705....	07/01/1983	Swiss Re Life and Health of America Inc.....	CT.....	YRT/I.....	OL.....	831,892	968	959	15,936	.....	.....	.....	.....
82627.....	06-0839705....	03/01/1986	Swiss Re Life and Health of America Inc.....	CT.....	CO/I.....	OL.....	5,846,781	53,825	57,277	83,602	.....	.....	.....	.....
82627.....	06-0839705....	02/01/1987	Swiss Re Life and Health of America Inc.....	CT.....	CO/I.....	OL.....	2,505,242	455	582	11,863	.....	.....	.....	.....
82627.....	06-0839705....	07/01/1989	Swiss Re Life and Health of America Inc.....	CT.....	YRT/I.....	OL.....	2,415,355	11,580	12,210	29,851	.....	.....	.....	.....
82627.....	06-0839705....	07/01/1989	Swiss Re Life and Health of America Inc.....	CT.....	YRT/I.....	OL.....	11,457,659	207,881	.....	.....308,136	.....	.....	.....	.....
82627.....	06-0839705....	04/01/1990	Swiss Re Life and Health of America Inc.....	CT.....	CO/I.....	OL.....	8,016,303	60,285	79,286	105,143	.....	.....	.....	.....
82627.....	06-0839705....	05/14/1990	Swiss Re Life and Health of America Inc.....	CT.....	YRT/I.....	OL.....	252,910	4,582	.....	.....361	.....	.....	.....	.....
82627.....	06-0839705....	03/01/1993	Swiss Re Life and Health of America Inc.....	CT.....	YRT/I.....	OL.....	3,630,371	82,541	.....	.....56,605	.....	.....	.....	.....
82627.....	06-0839705....	11/01/1993	Swiss Re Life and Health of America Inc.....	CT.....	CO/I.....	OL.....	9,100,600	62,503	68,499	88,395	.....	.....	.....	.....
82627.....	06-0839705....	01/01/1996	Swiss Re Life and Health of America Inc.....	CT.....	YRT/I.....	OL.....	43,607,302	236,292	226,362	99,697	.....	.....	.....	.....
82627.....	06-0839705....	01/01/1996	Swiss Re Life and Health of America Inc.....	CT.....	YRT/I.....	OL.....	347,241	434	423	3,925	.....	.....	.....	.....
65870.....	13-1004640....	01/01/1979	Manhattan Life Insurance Company.....	NY.....	CO/I.....	OL.....	62,000	1,040	5,690	(180)	.....	.....	.....	.....
65870.....	13-1004640....	12/01/1988	Manhattan Life Insurance Company.....	NY.....	YRT/I.....	OL.....	11,885,835	19,554	20,808	230,438	.....	.....	.....	.....
65870.....	13-1004640....	12/01/1988	Manhattan Life Insurance Company.....	NY.....	YRT/I.....	OL.....	4,526,468	.....	.....	.....72,278	.....	.....	.....	.....

SCHEDULE S - PART 3 - SECTION 1

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount In Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9 Current Year	10 Prior Year		12 Current Year	13 Prior Year		
65870.....	13-1004640....	12/01/1988	Manhattan Life Insurance Company.....	NY.....	YRT/I.....	OL.....	1,463,706	.....	.....	.....38,576	.....	.....	.....	.....
65870.....	13-1004640....	12/01/1988	Manhattan Life Insurance Company.....	NY.....	DIS/I.....	OL.....	.....	.....141,796	136,243	.....	.....	.....	.....	.....
97071.....	13-3126819....	12/01/1979	SCOR Global Life Americas Reinsurance Company.....	DE.....	YRT/I.....	OL.....	740	451	443	5	.....	.....	.....	.....
64688.....	75-6020048....	01/01/1981	SCOR Global Life Americas Reinsurance Company.....	DE.....	CO/I.....	OL.....	50,000	2,599	1,409	2,169	.....	.....	.....	.....
64688.....	75-6020048....	02/01/1988	SCOR Global Life Americas Reinsurance Company.....	DE.....	YRT/I.....	OL.....	2,970,913	19,026	5,252	56,174	.....	.....	.....	.....
64688.....	75-6020048....	02/01/1988	SCOR Global Life Americas Reinsurance Company.....	DE.....	DIS/I.....	OL.....	.....	.....35,055	33,869	.....	.....	.....	.....	.....
64688.....	75-6020048....	11/01/1981	SCOR Global Life Americas Reinsurance Company.....	DE.....	YRT/I.....	OL.....	2,013,018	2,418	2,262	30,482	.....	.....	.....	.....
64688.....	75-6020048....	09/01/1991	SCOR Global Life Americas Reinsurance Company.....	DE.....	CO/I.....	OL.....	87,820	270	246	328	.....	.....	.....	.....
64688.....	75-6020048....	09/15/1992	SCOR Global Life Americas Reinsurance Company.....	DE.....	CO/I.....	OL.....	15,138,423	90,296	94,479	62,398	.....	.....	.....	.....
0899999.	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates.....						536,953,854	11,993,641	12,034,132	4,374,712	0	0	0	0
1099999.	Total - General Account - Authorized - Non-Affiliates.....						536,953,854	11,993,641	12,034,132	4,374,712	0	0	0	0
1199999.	Total - General Account - Authorized.....						536,953,854	11,993,641	12,034,132	4,374,712	0	0	0	0
General Account - Unauthorized - Non-Affiliates - Non-U.S. Non-Affiliates														
00000.....	AA-1780044...	01/01/2002	Hannover Life Reassurance of Ireland.....	IRL.....	COFW/I.....	OL, FL, SC	2,051,061,086	137,574,083	143,559,447	15,267,616	.....	.....	.....	.....136,677,513
2099999.	Total - General Account - Unauthorized - Non-Affiliates - Non-U.S. Non-Affiliates.....						2,051,061,086	137,574,083	143,559,447	15,267,616	0	0	0	136,677,513
2199999.	Total - General Account - Unauthorized - Non-Affiliates.....						2,051,061,086	137,574,083	143,559,447	15,267,616	0	0	0	136,677,513
2299999.	Total - General Account - Unauthorized.....						2,051,061,086	137,574,083	143,559,447	15,267,616	0	0	0	136,677,513
3499999.	Total - General Account - Authorized, Unauthorized and Certified.....						2,588,014,940	149,567,724	155,593,579	19,642,328	0	0	0	136,677,513
6999999.	Total U.S.....						536,953,854	11,993,641	12,034,132	4,374,712	0	0	0	0
7099999.	Total Non-U.S.....						2,051,061,086	137,574,083	143,559,447	15,267,616	0	0	0	136,677,513
9999999.	Total.....						2,588,014,940	149,567,724	155,593,579	19,642,328	0	0	0	136,677,513

SCHEDULE S - PART 3 - SECTION 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type	7 Type of Business Ceded	8 Premiums	9 Unearned Premiums (estimated)	10 Reserve Credit Taken Other Than for Unearned Premiums	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
										11	12		
										Current Year	Prior Year		
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates													
97071.....	13-3126819....	..12/01/1979	SCOR Global Life Americas Reinsurance Company.....	DE.....	CO/i.....	LTDI.....	833	473	3,934	.....	.....	.....	.....
86258.....	13-2572994....	..01/01/1997	General Re Life Corporation.....	CT.....	CO/i.....	LTC.....	150,011	.....	.....2,148,757	.....	.....	.....	.....
0899999	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates.....						150,844	473	2,152,691	0	0	0	0
1099999	Total - General Account - Authorized - Non-Affiliates.....						150,844	473	2,152,691	0	0	0	0
1199999	Total - General Account - Authorized.....						150,844	473	2,152,691	0	0	0	0
3499999	Total - General Account - Authorized, Unauthorized and Certified.....						150,844	473	2,152,691	0	0	0	0
6999999	Total - U.S.....						150,844	473	2,152,691	0	0	0	0
9999999	Total.....						150,844	473	2,152,691	0	0	0	0

SCHEDULE S - PART 4

Reinsurance Ceded To Unauthorized Companies

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
NAIC Company Code	ID Number	Effective Date	Name of Reinsurer	Reserve Credit Taken	Paid and Unpaid Losses Recoverable (Debit)	Other Debits	Total (Cols. 5 + 6 + 7)	Letters of Credit	Issuing or Confirming Bank Reference Number (a)	Trust Agreements	Funds Deposited by and Withheld from Reinsurers	Other	Miscellaneous Balances (Credit)	Sum of Cols. 9 + 11 + 12 + 13 + 14 But Not in Excess of Col. 8
General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates														
00000.....	AA-1780044.	..01/01/2002	Hannover Life Reassurance of Ireland.....	137,574,083	.....	.....	.....137,574,083	.....	N/A.....	N/A.....	147,886,498	1	.....	.....137,574,083
0999999.	Total - General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates.....			137,574,083	0	0	137,574,083	0	XXX.....	0	147,886,498	1	0	137,574,083
1099999.	Total - General Account - Life and Annuity - Non-Affiliates.....			137,574,083	0	0	137,574,083	0	XXX.....	0	147,886,498	1	0	137,574,083
1199999.	Total - General Account - Life and Annuity.....			137,574,083	0	0	137,574,083	0	XXX.....	0	147,886,498	1	0	137,574,083
2399999.	Total - General Account.....			137,574,083	0	0	137,574,083	0	XXX.....	0	147,886,498	1	0	137,574,083
3699999.	Total - Non-U.S.....			137,574,083	0	0	137,574,083	0	XXX.....	0	147,886,498	1	0	137,574,083
9999999.	Total.....			137,574,083	0	0	137,574,083	0	XXX.....	0	147,886,498	1	0	137,574,083

SCHEDULE S - PART 5

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	Collateral						23	24	25	26	
NAIC Company Code	ID Number	Effective Date	Name of Reinsurer	Domi- ciliary Juris- diction	Certi- fied Rein- surer Rating (1 thru 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% - 100%)	Reserve Credit Taken	Paid and Unpaid Losses Recoverable (Debit)	Other Debits	Total Recoverable Reserve Credit Taken (Cols. 9 + 10 + 11)	Miscellaneous Balances (Credit)	Net Obligation Subject to Collateral (Col. 12 - 13)	Dollar Amount of Collateral Required for Full Credit (Col. 14 x Col. 8)	16	17	18	19	20	21	22	Percent of Collateral Provided for Net Obligation Subject to Collateral (Col. 22 / Col. 14)	Percent Credit Allowed on Net Obligation Subject to Collateral (Col. 23 / Col. 8, not to Exceed 100%)	Amount of Credit Allowed for Net Obligation Subject to Collateral (Col. 14 x Col. 24)	Liability for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 14 - Col. 25)
															Multiple Beneficiary Trust	Letters of Credit	Issuing or Confirming Bank Reference Number (a)	Trust Agreements	Funds Deposited by and Withheld from Reinsurers	Other	Total Collateral Provided (Cols. 16 + 17 + 19 + 20 + 21)				

NONE

Annual Statement for the year 2014 of the

MANHATTAN NATIONAL LIFE INSURANCE COMPANY

SCHEDULE S - PART 6

Five-Year Exhibit of Reinsurance Ceded Business

(000 Omitted)

	1 2014	2 2013	3 2012	4 2011	5 2010
A. OPERATIONS ITEMS					
1. Premiums and annuity considerations for life and accident and health contracts.....	19,793	20,953	22,578	24,638	26,032
2. Commissions and reinsurance expense allowances.....	1,600	1,711	1,731	2,112	2,315
3. Contract claims.....	30,049	28,976	30,809	34,730	36,343
4. Surrender benefits and withdrawals for life contracts.....	4,704	4,149	3,901	4,178	5,187
5. Dividends to policyholders.....	49	47	47	48	57
6. Reserve adjustments on reinsurance ceded.....					
7. Increase in aggregate reserves for life and accident and health contracts.....	(5,998)	(6,201)	(6,942)	(4,668)	(9,207)
B. BALANCE SHEET ITEMS					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected.....					
9. Aggregate reserves for life and accident and health contracts.....	151,721	157,719	163,921	170,862	175,530
10. Liability for deposit-type contracts.....					
11. Contract claims unpaid.....	515	874	678	1,176	109
12. Amounts recoverable on reinsurance.....	719	614	562	856	1,454
13. Experience rating refunds due or unpaid.....					1,333
14. Policyholders' dividends (not included in Line 10).....					
15. Commissions and reinsurance expense allowances due.....					
16. Unauthorized reinsurance offset.....					
17. Offset for reinsurance with certified reinsurers.....				XXX	XXX
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
18. Funds deposited by and withheld from (F).....	147,886	150,102	168,000	171,468	173,704
19. Letters of credit (L).....			1,200		
20. Trust agreements (T).....					
21. Other (O).....	0	96	13	170	2,561
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
22. Multiple beneficiary trust.....				XXX	XXX
23. Funds deposited by and withheld from (F).....				XXX	XXX
24. Letters of credit (L).....				XXX	XXX
25. Trust agreements (T).....				XXX	XXX
26. Other (O).....				XXX	XXX

Annual Statement for the year 2014 of the

MANHATTAN NATIONAL LIFE INSURANCE COMPANY

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1	2	3
	As Reported (Net of Ceded)	Restatement Adjustments	Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12).....	167,033,588		167,033,588
2. Reinsurance (Line 16).....	718,725	(718,725)	(0)
3. Premiums and considerations (Line 15).....	5,721,339		5,721,339
4. Net credit for ceded reinsurance.....	XXX	15,645,625	15,645,625
5. All other admitted assets (balance).....	3,453,922		3,453,922
6. Total assets excluding Separate Accounts (Line 26).....	176,927,574	14,926,900	191,854,474
7. Separate Account Assets (Line 27).....			0
8. Total assets (Line 28).....	176,927,574	14,926,900	191,854,474
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9. Contract reserves (Lines 1 and 2).....	14,110,969	151,720,889	165,831,858
10. Liability for deposit-type contracts (Line 3).....	2,338,570		2,338,570
11. Claim reserves (Line 4).....	4,749,322	515,106	5,264,428
12. Policyholder dividends/reserves (Lines 5 through 7).....	12,000		12,000
13. Premium & annuity considerations received in advance (Line 8).....	35,078		35,078
14. Other contract liabilities (Line 9).....	857,262		857,262
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount).....			0
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount).....	136,677,514	(136,677,514)	(0)
17. Reinsurance with certified reinsurers (Line 24.02 inset amount).....			0
18. Funds held under reinsurance treaties with certified reinsurers (Line 24.03 inset amount).....			0
19. All other liabilities (balance).....	5,011,595	(631,581)	4,380,014
20. Total liabilities excluding Separate Accounts (Line 26).....	163,792,310	14,926,900	178,719,210
21. Separate Account liabilities (Line 27).....			0
22. Total liabilities (Line 28).....	163,792,310	14,926,900	178,719,210
23. Capital & surplus (Line 38).....	13,135,264	XXX	13,135,264
24. Total liabilities, capital & surplus (Line 39).....	176,927,574	14,926,900	191,854,474
NET CREDIT FOR CEDED REINSURANCE			
25. Contract reserves.....	151,720,889		
26. Claim reserves.....	515,106		
27. Policyholder dividends/reserves.....	0		
28. Premium & annuity considerations received in advance.....	0		
29. Liability for deposit-type contracts.....	0		
30. Other contract liabilities.....	0		
31. Reinsurance ceded assets.....	718,725		
32. Other ceded reinsurance recoverables.....	0		
33. Total ceded reinsurance recoverables.....	152,954,720		
34. Premiums and considerations.....	0		
35. Reinsurance in unauthorized companies.....	0		
36. Funds held under reinsurance treaties with unauthorized reinsurers.....	136,677,514		
37. Reinsurance with certified reinsurers.....	0		
38. Funds held under reinsurance treaties with certified reinsurers.....	0		
39. Other ceded reinsurance payables/offsets.....	631,581		
40. Total ceded reinsurance payables/offsets.....	137,309,095		
41. Total net credit for ceded reinsurance.....	15,645,625		

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.			Direct Business Only				Totals
			1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts
1.	Alabama.....	AL	108,870	15	191		109,076
2.	Alaska.....	AK	24,214				24,214
3.	Arizona.....	AZ	268,426	400			268,826
4.	Arkansas.....	AR	211,419	500			211,919
5.	California.....	CA	2,999,977	2,302			3,002,279
6.	Colorado.....	CO	386,957	2,700			389,657
7.	Connecticut.....	CT	186,015				186,015
8.	Delaware.....	DE	51,243				51,243
9.	District of Columbia.....	DC	36,409				36,409
10.	Florida.....	FL	1,186,896	3,883	63	150,011	1,340,853
11.	Georgia.....	GA	656,641	2,340			658,981
12.	Hawaii.....	HI	109,435	885			110,320
13.	Idaho.....	ID	26,713				26,713
14.	Illinois.....	IL	638,121	14,853			652,974
15.	Indiana.....	IN	521,673	2,171	266		524,110
16.	Iowa.....	IA	255,662	6,187	606		262,455
17.	Kansas.....	KS	280,018	2,847			282,865
18.	Kentucky.....	KY	276,072				276,072
19.	Louisiana.....	LA	251,488				251,488
20.	Maine.....	ME	140,731				140,731
21.	Maryland.....	MD	872,796	500			873,296
22.	Massachusetts.....	MA	499,028	40			499,068
23.	Michigan.....	MI	651,465	4,476	538		656,479
24.	Minnesota.....	MN	726,529	4,300			730,829
25.	Mississippi.....	MS	236,597	540			237,137
26.	Missouri.....	MO	706,977	10,984			717,961
27.	Montana.....	MT	16,762				16,762
28.	Nebraska.....	NE	79,724				79,724
29.	Nevada.....	NV	151,819				151,819
30.	New Hampshire.....	NH	128,822				128,822
31.	New Jersey.....	NJ	733,062				733,062
32.	New Mexico.....	NM	66,512				66,512
33.	New York.....	NY	227,452				227,452
34.	North Carolina.....	NC	418,719	1,140			419,859
35.	North Dakota.....	ND	240,158	200			240,358
36.	Ohio.....	OH	770,378	369			770,747
37.	Oklahoma.....	OK	252,861				252,861
38.	Oregon.....	OR	120,011				120,011
39.	Pennsylvania.....	PA	674,623				674,623
40.	Rhode Island.....	RI	27,495	1,650			29,145
41.	South Carolina.....	SC	325,867	960	354		327,181
42.	South Dakota.....	SD	46,987	400			47,387
43.	Tennessee.....	TN	463,828		147		463,975
44.	Texas.....	TX	1,490,830	780			1,491,610
45.	Utah.....	UT	51,187	142			51,329
46.	Vermont.....	VT	19,942				19,942
47.	Virginia.....	VA	500,807	240			501,047
48.	Washington.....	WA	273,148				273,148
49.	West Virginia.....	WV	47,316				47,316
50.	Wisconsin.....	WI	1,470,806	38,850	4,332		1,513,988
51.	Wyoming.....	WY	26,661				26,661
52.	American Samoa.....	AS					0
53.	Guam.....	GU					0
54.	Puerto Rico.....	PR					0
55.	US Virgin Islands.....	VI	336				336
56.	Northern Mariana Islands.....	MP					0
57.	Canada.....	CAN	3,109				3,109
58.	Aggregate Other Alien.....	OT	35,344				35,344
59.	Totals.....		20,974,938	104,654	6,497	150,011	21,236,100

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	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)	*
52	Members													
			31-1544320..		0000944707	NYSE.....	American Financial Group, Inc.....	OH.....	UIP.....		Ownership.....			
			31-6549738..				American Financial Capital Trust II.....	DE.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	
			16-6543606..				American Financial Capital Trust III.....	DE.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	
			16-6543609..				American Financial Capital Trust IV.....	DE.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	
			31-0996797..				American Financial Enterprises, Inc.....	CT.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	
			31-0828578..				American Money Management Corporation.....	OH.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	
			27-1577326..				American Real Estate Capital Company, LLC.....	OH.....	NIA.....	American Money Management Corporation.....	Ownership.....	...80.000	American Financial Group, Inc....	
			27-2829629..				MidMarket Capital Partners, LLC.....	DE.....	NIA.....	American Money Management Corporation.....	Ownership.....	...65.000	American Financial Group, Inc....	
			41-2112001..				APU Holding Company.....	OH.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	
			23-6000765..				American Premier Underwriters, Inc.....	PA.....	NIA.....	APU Holding Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
			23-6297584..				The Associates of the Jersey Company.....	NJ.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	
			37-1094159..				Cal Coal, Inc.....	IL.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	
			95-2802826..				Great Southwest Corporation.....	DE.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	
			35-6001691..				The Indianapolis Union Railway Company.....	IN.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	
			13-6400464..				Lehigh Valley Railroad Company.....	PA.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	
			46-1665396..				Pennsylvania Lehigh Oil & Gas Holdings LLC.....	PA.....	NIA.....	Lehigh Valley Railroad Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
			20-1548213..				Magnolia Alabama Holdings, Inc.....	DE.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	
			20-1574094..				Magnolia Alabama Holdings LLC.....	AL.....	NIA.....	Magnolia Alabama Holdings, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	
			46-1852532..				Michigan Oil & Gas Holdings, LLC.....	MI.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	
			46-1480078..				Ohio Oil & Gas Holdings, LLC.....	OH.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	
			13-6021353..				The Owasco River Railway, Inc.....	NY.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	
			31-1236926..				PCC Real Estate, Inc.....	NY.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	
			76-0080537..				PCC Technical Industries, Inc.....	DE.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	
			31-1388401..				PCC Maryland Realty Corp.....	MD.....	NIA.....	PCC Technical Industries, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	
			06-1209709..				Penn Central Energy Management Company.....	DE.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	
			23-1537928..				Penn Towers, Inc.....	PA.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	
			46-3246684..				Pennsylvania Oil & Gas Holdings, LLC.....	PA.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	
			23-6000766..				Pennsylvania-Reading Seashore Lines.....	NJ.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...66.670	American Financial Group, Inc....	
			23-6207599..				Pittsburgh and Cross Creek Railroad Company.....	PA.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...83.000	American Financial Group, Inc....	
			23-1707450..				Terminal Realty Penn Co.....	DC.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	
			23-1675796..				Waynesburg Southern Railroad Company.....	PA.....	NIA.....	American Premier Underwriters, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	
							GAI Insurance Company, Ltd.....	BMU.....	IA.....	APU Holding Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
							Great American Specialty & Affinity Limited.....	GBR.....	NIA.....	APU Holding Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
			31-1446308..				Hangar Acquisition Corp.....	OH.....	NIA.....	APU Holding Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
			91-1242743..				Premier Lease & Loan Services Insurance Agency, Inc.....	WA.....	NIA.....	APU Holding Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
			91-1508644..				Premier Lease & Loan Services of Canada, Inc.....	WA.....	NIA.....	APU Holding Company.....	Ownership.....	...100.000	American Financial Group, Inc....	

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

52.1

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	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)	*
0084	American Financial Group, Inc.	71404	31-1262960				Risico Management Corporation	DE	NIA	APU Holding Company	Ownership	100.000	American Financial Group, Inc.	
			31-0823725				Dixie Terminal Corporation	OH	NIA	American Financial Group, Inc.	Ownership	100.000	American Financial Group, Inc.	
			98-0606803				GAI Holding Bermuda Ltd	BMU	NIA	American Financial Group, Inc.	Ownership	100.000	American Financial Group, Inc.	
			98-0556144				GAI Indemnity, Ltd	GBR	IA	GAI Holding Bermuda Ltd	Ownership	100.000	American Financial Group, Inc.	
							Marketform Group Limited	GBR	NIA	GAI Holding Bermuda Ltd	Ownership	100.000	American Financial Group, Inc.	
							Marketform Holdings Limited	GBR	NIA	Marketform Group Limited	Ownership	100.000	American Financial Group, Inc.	
			98-0412245				Lavenham Underwriting Limited	GBR	IA	Marketform Holdings Limited	Ownership	100.000	American Financial Group, Inc.	
							Marketform Hong Kong Limited	HKG	NIA	Marketform Holdings Limited	Ownership	100.000	American Financial Group, Inc.	
							Marketform Limited	GBR	NIA	Marketform Holdings Limited	Ownership	100.000	American Financial Group, Inc.	
							Gabinete Marketform SL	ESP	NIA	Marketform Limited	Ownership	100.000	American Financial Group, Inc.	
							Marketform Australia Pty Limited	AUS	NIA	Marketform Limited	Ownership	100.000	American Financial Group, Inc.	
							Studio Marketform SRL	ITA	NIA	Marketform Limited	Ownership	100.000	American Financial Group, Inc.	
							Marketform Management Services Limited	GBR	NIA	Marketform Holdings Limited	Ownership	100.000	American Financial Group, Inc.	
							Marketform Managing Agency Limited	GBR	NIA	Marketform Holdings Limited	Ownership	100.000	American Financial Group, Inc.	
			98-0431601				Sampford Underwriting Limited	GBR	IA	Marketform Holdings Limited	Ownership	100.000	American Financial Group, Inc.	
							Marketform Trust Company Limited	GBR	NIA	Marketform Group Limited	Ownership	100.000	American Financial Group, Inc.	
			06-1356481				Great American Financial Resources, Inc.	DE	UIP	American Financial Group, Inc.	Ownership	100.000	American Financial Group, Inc.	1
			31-1422717				AAG Insurance Agency, Inc.	KY	NIA	Great American Financial Resources, Inc.	Ownership	100.000	American Financial Group, Inc.	
			34-1017531				Ceres Group, Inc.	DE	NIA	Great American Financial Resources, Inc.	Ownership	100.000	American Financial Group, Inc.	
			47-0717079				Continental General Corporation	NE	NIA	Ceres Group, Inc.	Ownership	100.000	American Financial Group, Inc.	
			47-0463747				Continental General Insurance Company	OH	IA	Continental General Corporation	Ownership	100.000	American Financial Group, Inc.	
			34-1947042				QQAgency of Texas, Inc.	TX	NIA	Ceres Group, Inc.	Ownership	100.000	American Financial Group, Inc.	
			31-1395344				Great American Advisors, Inc.	OH	NIA	Great American Financial Resources, Inc.	Ownership	100.000	American Financial Group, Inc.	
			13-1935920				Great American Life Insurance Company	OH	UDP	Great American Financial Resources, Inc.	Ownership	100.000	American Financial Group, Inc.	
			45-2969767				Aerielle IP Holdings, LLC	OH	NIA	Great American Life Insurance Company	Ownership	62.500	American Financial Group, Inc.	2
			26-4391696				Aerielle, LLC	DE	NIA	Great American Life Insurance Company	Ownership	62.500	American Financial Group, Inc.	2
			31-1021738				Annuity Investors Life Insurance Company	OH	IA	Great American Life Insurance Company	Ownership	100.000	American Financial Group, Inc.	
			27-4078277				Bay Bridge Marina Hemingway's Restaurant, LLC	MD	NIA	Great American Life Insurance Company	Ownership	85.000	American Financial Group, Inc.	
			27-0513333				Bay Bridge Marina Management, LLC	MD	NIA	Great American Life Insurance Company	Ownership	85.000	American Financial Group, Inc.	
			20-1246122				Brothers Management, LLC	FL	NIA	Great American Life Insurance Company	Ownership	99.000	American Financial Group, Inc.	
			45-3988240				FT Liquidation, LLC	OH	NIA	Great American Life Insurance Company	Ownership	100.000	American Financial Group, Inc.	
			20-4604276				GALIC - Bay Bridge Marina, LLC	MD	NIA	Great American Life Insurance Company	Ownership	100.000	American Financial Group, Inc.	
			45-5565693				GALIC - Sorrento, LLC	FL	NIA	Great American Life Insurance Company	Ownership	65.000	American Financial Group, Inc.	2
			31-1391777				GALIC Brothers, Inc.	OH	NIA	Great American Life Insurance Company	Ownership	80.000	American Financial Group, Inc.	
			45-1144095				GALIC Pointe, LLC	FL	NIA	Great American Life Insurance Company	Ownership	65.000	American Financial Group, Inc.	2
			26-3260520				Manhattan National Holding Corporation	OH	UDP	Great American Life Insurance Company	Ownership	100.000	American Financial Group, Inc.	
0084	American Financial Group, Inc.	67083	45-0252531				Manhattan National Life Insurance Company	OH	RE	Manhattan National Holding Corporation	Ownership	100.000	American Financial Group, Inc.	

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

52.2

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

52.3

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	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)	*
							El Aguila, Compañía de Seguros, S.A. de C.V.....	MEX.....	IA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
							Financiadora de Primas Condor, S.A. de C.V.....	MEX.....	NIA.....	El Aguila, Compañía de Seguros, S.A. de C.V.....	Ownership.....	...99.000	American Financial Group, Inc....	
			39-1404033..				Farmers Crop Insurance Alliance, Inc.....	KS.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
			13-3628555..				FCIA Management Company, Inc.....	NY.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
							Foreign Credit Insurance Association.....	NY.....	OTH.....	Great American Insurance Company.....	Management....		American Financial Group, Inc....	3....
			31-1753938..				GAI Warranty Company.....	OH.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
			31-1765544..				GAI Warranty Company of Florida.....	FL.....	NIA.....	GAI Warranty Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
							GAI Warranty Company of Canada Inc.....	CAN.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
			45-5565693..				GALIC - Sorrento, LLC.....	FL.....	NIA.....	Great American Insurance Company.....	Ownership.....	...35.000	American Financial Group, Inc....	2....
			45-1144095..				GALIC Pointe, LLC.....	FL.....	NIA.....	Great American Insurance Company.....	Ownership.....	...35.000	American Financial Group, Inc....	2....
			61-1329718..				Global Premier Finance Company.....	OH.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
			74-2693636..				Great American Agency of Texas, Inc.....	TX.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
0084.....	American Financial Group, Inc.....	26832	95-1542353..				Great American Alliance Insurance Company.....	OH.....	IA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
0084.....	American Financial Group, Inc.....	26344	15-6020948..				Great American Assurance Company.....	OH.....	IA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
0084.....	American Financial Group, Inc.....	39896	61-0983091..				Great American Casualty Insurance Company.....	OH.....	IA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
			31-1228726..				Great American Claims Services, Inc.....	DE.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
0084.....	American Financial Group, Inc.....	10646	36-4079497..				Great American Contemporary Insurance Company.....	OH.....	IA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
0084.....	American Financial Group, Inc.....	37532	31-0954439..				Great American E & S Insurance Company.....	DE.....	IA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
0084.....	American Financial Group, Inc.....	41858	31-1036473..				Great American Fidelity Insurance Company.....	DE.....	IA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
			31-1652643..				Great American Insurance Agency, Inc.....	OH.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
0084.....	American Financial Group, Inc.....	22136	13-5539046..				Great American Insurance Company of New York.....	NY.....	IA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
0084.....	American Financial Group, Inc.....	38024	31-0974853..				Great American Lloyd's Insurance Company.....	TX.....	IA.....	Great American Insurance Company.....	Other.....		American Financial Group, Inc....	4....
			31-1073664..				Great American Lloyd's, Inc.....	TX.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
			31-0856644..				Great American Management Services, Inc.....	OH.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
0084.....	American Financial Group, Inc.....	38580	31-1288778..				Great American Protection Insurance Company.....	OH.....	IA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
			31-0918893..				Great American Re Inc.....	DE.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
0084.....	American Financial Group, Inc.....	31135	31-1209419..				Great American Security Insurance Company.....	OH.....	IA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
0084.....	American Financial Group, Inc.....	33723	31-1237970..				Great American Spirit Insurance Company.....	OH.....	IA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
							Insurance (GB) Limited.....	GBR.....	IA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
			59-1263251..				Key Largo Group, Inc.....	FL.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	
			34-1607394..		0001301106	NASDAQ.....	National Interstate Corporation.....	OH.....	NIA.....	Great American Insurance Company.....	Ownership.....	...51.400	American Financial Group, Inc....	
			34-1899058..				American Highways Insurance Agency, Inc.....	OH.....	NIA.....	National Interstate Corporation.....	Ownership.....	...100.000	American Financial Group, Inc....	
			31-1548235..				Explorer RV Insurance Agency, Inc.....	OH.....	NIA.....	National Interstate Corporation.....	Ownership.....	...100.000	American Financial Group, Inc....	
			98-0191335..				Hudson Indemnity, Ltd.....	KY.....	IA.....	National Interstate Corporation.....	Ownership.....	...100.000	American Financial Group, Inc....	
			66-0660039..				Hudson Management Group, Ltd.....	CYM.....	NIA.....	National Interstate Corporation.....	Ownership.....	...100.000	American Financial Group, Inc....	
			34-1607396..				National Interstate Insurance Agency, Inc.....	OH.....	NIA.....	National Interstate Corporation.....	Ownership.....	...100.000	American Financial Group, Inc....	
							Commercial For Hire Transportation Purchasing Group.....	SC.....	NIA.....	National Interstate Insurance Agency, Inc.....	Management....		American Financial Group, Inc....	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	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)	*
0084.....	American Financial Group, Inc.....	32620.....	34-1607395..	.....	.....	.....	National Interstate Insurance Company.....	OH.....	IA.....	National Interstate Corporation.....	Ownership.....	...100.000	American Financial Group, Inc....	.....
0084.....	American Financial Group, Inc.....	11051.....	99-0345306..	.....	.....	.....	National Interstate Insurance Company of Hawaii, Inc.....	OH.....	IA.....	National Interstate Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	.....
.....	.....	.....	43-1254631..	.....	.....	.....	TransProtection Service Company.....	MO.....	NIA.....	National Interstate Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	.....
0084.....	American Financial Group, Inc.....	41106.....	95-3623282..	.....	.....	.....	Triumphe Casualty Company.....	OH.....	IA.....	National Interstate Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	.....
0084.....	American Financial Group, Inc.....	21172.....	86-0114294..	.....	.....	.....	Vanliner Insurance Company.....	MO.....	IA.....	National Interstate Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	.....
.....	.....	.....	.....	.....	.....	.....	Vanliner Reinsurance Limited.....	BMU.....	IA.....	National Interstate Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	.....
.....	.....	.....	20-5546054..	.....	.....	.....	Safety Claims & Litigation Services, LLC.....	MT.....	NIA.....	National Interstate Corporation.....	Ownership.....	...100.000	American Financial Group, Inc....	.....
.....	.....	.....	46-4570914..	.....	.....	.....	Safety, Claims and Litigation Services, LLC.....	OH.....	NIA.....	National Interstate Corporation.....	Ownership.....	...100.000	American Financial Group, Inc....	.....
.....	.....	.....	27-2226948..	.....	.....	.....	Pinecrest Place LLC.....	FL.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	.....
.....	.....	.....	871850814..	.....	.....	.....	PLLS Canada Insurance Brokers Inc.....	CAN.....	NIA.....	Great American Insurance Company.....	Ownership.....	49.000	American Financial Group, Inc....	.....
.....	.....	.....	31-1293064..	.....	.....	.....	Professional Risk Brokers, Inc.....	IL.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	.....
.....	.....	.....	72-1331800..	.....	.....	.....	Strategic Comp Holdings, L.L.C.....	LA.....	NIA.....	Great American Insurance Company.....	Ownership.....	...100.000	American Financial Group, Inc....	.....
.....	.....	.....	36-4517754..	.....	.....	.....	Strategic Comp Services, L.L.C.....	LA.....	NIA.....	Strategic Comp Holdings, L.L.C.....	Ownership.....	...100.000	American Financial Group, Inc....	.....
.....	.....	.....	32-0050970..	.....	.....	.....	Strategic Comp, L.L.C.....	LA.....	NIA.....	Strategic Comp Holdings, L.L.C.....	Ownership.....	...100.000	American Financial Group, Inc....	.....
.....	.....	.....	31-0686194..	.....	.....	.....	One East Fourth, Inc.....	OH.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	.....
.....	.....	.....	31-0883227..	.....	.....	.....	Pioneer Carpet Mills, Inc.....	OH.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	.....
.....	.....	.....	31-1119320..	.....	.....	.....	TEJ Holdings, Inc.....	OH.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	.....
.....	.....	.....	31-0728327..	.....	.....	.....	Three East Fourth, Inc.....	OH.....	NIA.....	American Financial Group, Inc.....	Ownership.....	...100.000	American Financial Group, Inc....	.....

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
Affiliated Transactions												
00000.....	31-1544320.....	American Financial Group, Inc.....	265,000,000	.....	.....	.....	.....272,948,635	.....	.....	.....	.....537,948,635	.....
00000.....	.....	GAI Insurance Company, Ltd.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	(3,464,000)
00000.....	.....	Lloyd's Syndicate 2468 (United Kingdom).....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	(4,477,000)
00000.....	98-0412245.....	Lavenham Underwriting Limited.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	11,632,124
00000.....	98-0431601.....	Sampford Underwriting Limited.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	12,381,893
00000.....	06-1356481.....	Great American Financial Resources, Inc.....	200,000,000	(10,000,000)	.....	.....	.....	.....	.....	.....	.....190,000,000	.....
63312.....	13-1935920.....	Great American Life Insurance Company.....	(200,000,000)	1,962,479	.....	.....	.....(164,853,880)	.....	.....	.....	.....(362,891,401)	30,936,454
00000.....	45-5565693.....	GALIC - Sorrento, LLC.....	.....	.....(3,593,969)	.....	.....	.....	.....	.....	.....	.....(3,593,969)	.....
00000.....	45-1144095.....	GALIC Pointe, LLC.....	.....	.....574,786	.....	.....	.....	.....	.....	.....	.....574,786	.....
63479.....	58-0869673.....	United Teacher Associates Insurance Company.....	.....	.....10,000,000	.....	.....	.....	.....	.....	.....	.....10,000,000	(30,936,454)
00000.....	42-1575938.....	Great American Holding, Inc.....	20,000,000	(218,668,002)	.....	.....	.....	.....	.....	.....	.....(198,668,002)	.....
35351.....	31-0912199.....	American Empire Surplus Lines Insurance Company.....	(8,300,000)	.....	.....	.....	.....	.....	.....*	.....	.....(8,300,000)	15,324,000
37990.....	31-0973761.....	American Empire Insurance Company.....	(1,700,000)	.....	.....	.....	.....	.....	.....*	.....	.....(1,700,000)	.....
00000.....	.....	Great American International Insurance Limited (Ireland).....	.....	.....(1,331,998)	.....	.....	.....	.....	.....	.....	.....(1,331,998)	9,077,000
23418.....	73-0556513.....	Mid-Continent Casualty Company.....	(6,200,000)	.....	.....	.....	.....	.....	.....*	.....	.....(6,200,000)	(3,828,000)
15380.....	73-1406844.....	Mid-Continent Assurance Company.....	(2,100,000)	.....	.....	.....	.....	.....	.....*	.....	.....(2,100,000)	.....
23426.....	73-0773259.....	Oklahoma Surety Company.....	(1,700,000)	.....	.....	.....	.....	.....	.....*	.....	.....(1,700,000)	.....
22179.....	95-2801326.....	Republic Indemnity Company of America.....	.....	.....208,000,000	.....	.....	.....	.....	.....*	.....	.....208,000,000	(45,787,138)
43753.....	31-1054123.....	Republic Indemnity Company of California.....	.....	.....12,000,000	.....	.....	.....	.....	.....*	.....	.....12,000,000	.....
00000.....	59-3409855.....	Summit Holding Southeast, Inc.....	.....	.....40,000,000	.....	.....	.....	.....	.....*	.....	.....40,000,000	.....
10701.....	59-1835212.....	Bridgefield Employers Insurance Company.....	.....	.....(15,000,000)	.....	.....	.....	.....	.....*	.....	.....(15,000,000)	.....
10335.....	59-3269531.....	Bridgefield Casualty Insurance Company.....	.....	.....(25,000,000)	.....	.....	.....	.....	.....*	.....	.....(25,000,000)	.....
16691.....	31-0501234.....	Great American Insurance Company.....	(236,340,351)	3,862,901	.....	.....	.....(108,094,755)	.....	.....*	.....	.....(340,572,205)	7,705,983
00000.....	13-3628555.....	FCIA Management Company, Inc.....	(47,400)	.....	.....	.....	.....	.....	.....	.....	.....(47,400)	.....
00000.....	31-1765544.....	GAI Warranty Company of Florida.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	8,487,000
00000.....	61-1329718.....	Global Premier Finance Company.....	(600,000)	.....	.....	.....	.....	.....	.....	.....	.....(600,000)	.....
26832.....	95-1542353.....	Great American Alliance Insurance Company.....	(3,000,000)	.....	.....	.....	.....	.....	.....*	.....	.....(3,000,000)	.....
39896.....	61-0983091.....	Great American Casualty Insurance Company.....	(1,300,000)	.....	.....	.....	.....	.....	.....*	.....	.....(1,300,000)	.....
10646.....	36-4079497.....	Great American Contemporary Insurance Company.....	(1,100,000)	.....	.....	.....	.....	.....	.....*	.....	.....(1,100,000)	.....
37532.....	31-0954439.....	Great American E & S Insurance Company.....	(2,000,000)	.....	.....	.....	.....	.....	.....*	.....	.....(2,000,000)	.....
41858.....	31-1036473.....	Great American Fidelity Insurance Company.....	(2,000,000)	.....	.....	.....	.....	.....	.....*	.....	.....(2,000,000)	.....
00000.....	31-1652643.....	Great American Insurance Agency, Inc.....	(500,000)	.....	.....	.....	.....	.....	.....	.....	.....(500,000)	.....
38024.....	31-0974853.....	Great American Lloyd's Insurance Company.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	1,532,000
38580.....	31-1288778.....	Great American Protection Insurance Company.....	(2,800,000)	.....	.....	.....	.....	.....	.....*	.....	.....(2,800,000)	.....
31135.....	31-1209419.....	Great American Security Insurance Company.....	(1,900,000)	.....	.....	.....	.....	.....	.....*	.....	.....(1,900,000)	.....
33723.....	31-1237970.....	Great American Spirit Insurance Company.....	(2,100,000)	.....	.....	.....	.....	.....	.....*	.....	.....(2,100,000)	.....
00000.....	59-1263251.....	Key Largo Group, Inc.....	(150,000)	.....	.....	.....	.....	.....	.....	.....	.....(150,000)	.....
00000.....	34-1607394.....	National Interstate Corporation.....	5,104,000	.....	.....	.....	.....	.....	.....	.....	.....5,104,000	.....
00000.....	98-0191335.....	Hudson Indemnity, Ltd (Cayman Islands).....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	(259,040,000)
32620.....	34-1607395.....	National Interstate Insurance Company.....	(10,000,000)	.....	.....	.....	.....	.....	.....*	.....	.....(10,000,000)	227,876,000
11051.....	99-0345306.....	National Interstate Insurance Company of Hawaii, Inc.....	.....	.....	.....	.....	.....	.....	.....*	.....	.....0	12,638,000

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
41106.....	95-3623282.....	Triumphe Casualty Company.....	.....	.....	.....	.....	.....	.....	*	.....	.....0	1,824,000
21172.....	86-0114294.....	Vanliner Insurance Company.....	.....	.....	.....	.....	.....	.....	*	.....	.....0	13,247,000
00000.....	27-2226948.....	Pinecrest Place LLC.....	(1,766,249)	(2,806,197)	.....	.....	.....	.....	.....	.....	.....(4,572,446)	.....
00000.....	31-1293064.....	Professional Risk Brokers, Inc.....	(4,500,000)	.....	.....	.....	.....	.....	.....	.....	.....(4,500,000)	.....
9999999.	Control Totals.....	.....	.....0	0	0	0	0	0	XXX	0	0	5,128,862

Pooling Information

NAIC Code	Name of Insurer	Pooling %	NAIC Code	Name of Insurer	Pooling %
35351	American Empire Surplus Lines Insurance Company	90.00%	16691	Great American Insurance Company	100.00%
37990	American Empire Insurance Company	10.00%	26832	Great American Alliance Insurance Company	
			26344	Great American Assurance Company	
23418	Mid-Continent Casualty Company	94.00%	39896	Great American Casualty Insurance Company	
15380	Mid-Continent Assurance Company	3.00%	10646	Great American Contemporary Insurance Company	
23426	Oklahoma Surety Company	3.00%	37532	Great American E & S Insurance Company	
13794	Mid-Continent Excess and Surplus Insurance Company		41858	Great American Fidelity Insurance Company	
			22136	Great American Insurance Company of New York	
22179	Republic Indemnity Company of America	100.00%	38580	Great American Protection Insurance Company	
43753	Republic Indemnity Company of California		31135	Great American Security Insurance Company	
10701	Bridgefield Employers Insurance Company		33723	Great American Spirit Insurance Company	
10335	Bridgefield Casualty Insurance Company				
32620	National Interstate Insurance Company	70.00%			
21172	Vanliner Insurance Company	26.00%			
11051	National Interstate Insurance Company of Hawaii, Inc.	2.00%			
41106	Triumphe Casualty Company	2.00%			

Annual Statement for the year 2014 of the

MANHATTAN NATIONAL LIFE INSURANCE COMPANY

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

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

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

MARCH FILING		
12.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
13.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
14.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
15.	Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	YES
16.	Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	YES
17.	Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?	NO
18.	Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1?	NO
19.	Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1?	NO
20.	Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
21.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
22.	Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1?	NO
23.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
24.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
25.	Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?	NO
26.	Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?	NO
27.	Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1?	NO
28.	Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1?	NO
29.	Will the Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	NO
30.	Will the Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	NO
31.	Will the Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	NO
32.	Will the Actuarial Certification Related to the Reserves required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	NO
33.	Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1?	NO
34.	Will the Workers' Compensation Carve-Out Supplement be filed by March 1?	NO
35.	Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1?	YES
36.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
37.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partners be filed electronically with the NAIC by March 1?	NO
38.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
39.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
40.	Will the confidential Regulatory Asset Adequacy Issues Summary (RAAIS) required by Actuarial Opinion and Memorandum Regulation (Model 822), Section 7A(5), be filed with the state of domicile by March 15?	YES
APRIL FILING		
41.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	YES
42.	Will the Interest-Sensitive Life Insurance Products Report Forms be filed with the state of domicile and the NAIC by April 1?	YES
43.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
44.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	YES
45.	Will the Analysis of Annuity Operations by Lines of Business be filed with the state of domicile and the NAIC by April 1?	YES
46.	Will the Analysis of Increase in Annuity Reserves During the Year be filed with the state of domicile and the NAIC by April 1?	YES
47.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	NO
48.	Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?	NO
49.	Will the confidential Actuarial Memorandum required by Actuarial Guideline XXXVIII 8D be filed with the state of domicile by April 30?	NO
50.	Will the Supplemental XXX/AXXX Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
AUGUST FILING		
51.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES

Annual Statement for the year 2014 of the

MANHATTAN NATIONAL LIFE INSURANCE COMPANY

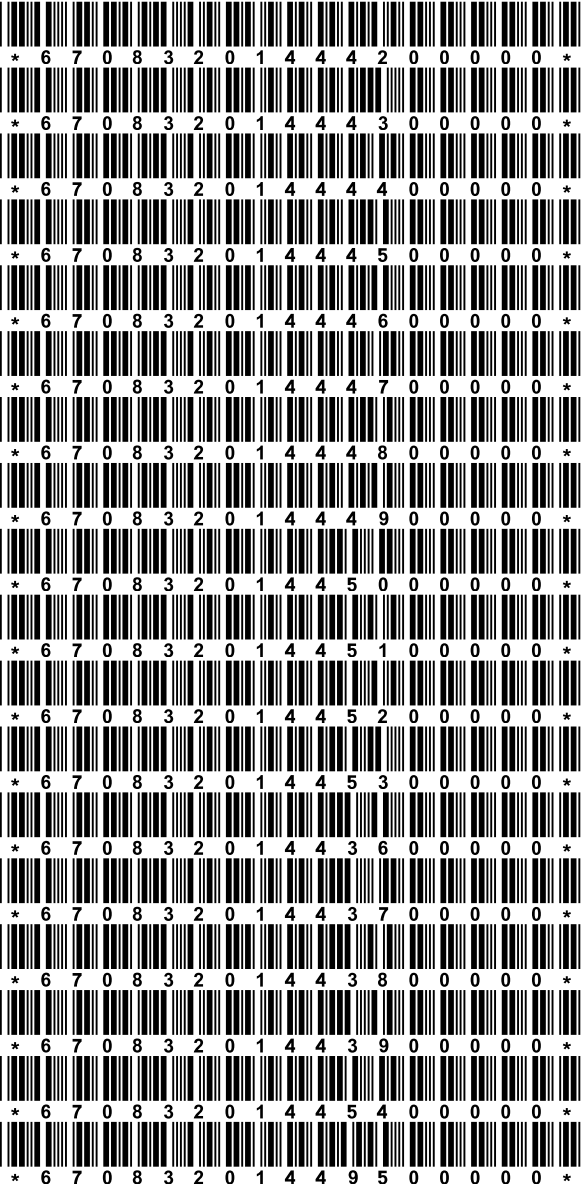
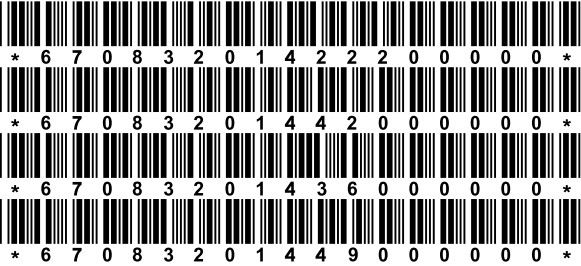
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

EXPLANATIONS:

BAR CODE:

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SCHEDULE O SUPPLEMENT

For the year ended December 31, 2014
(To Be Filed March 1)

Of The.....MANHATTAN NATIONAL LIFE INSURANCE COMPANY

Address (City, State, Zip Code).....Cincinnati, OH 45202

NAIC Group Code.....0084

NAIC Company Code.....67083

Employer's ID Number.....45-0252531

SUPPLEMENTAL SCHEDULE O - PART 1Development of Incurred Losses
(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Net Amounts Paid Policyholders				
	1 2010	2 2011	3 2012	4 2013	5 2014 (a)
1. Prior.....					
2. 2010.....					
3. 2011.....	XXX				
4. 2012.....	XXX	XXX			
5. 2013.....	XXX	XXX	XXX		
6. 2014.....	XXX	XXX	XXX	XXX	

Section B - Other Accident and Health

Section 2 – Other Freedom and Health					
1. Prior.....	12	12	12	12	12
2. 2010.....					
3. 2011.....	XXX				
4. 2012.....	XXX	XXX			
5. 2013.....	XXX	XXX	XXX		
6. 2014.....	XXX	XXX	XXX	XXX	5

Section C - Credit Accident and Health

	2009	2010	2011	2012	2013	2014
1. Prior.....						
2. 2010.....						
3. 2011.....	xxx					
4. 2012.....	xxx	xxx				
5. 2013.....	xxx	xxx	xxx			
6. 2014.....	xxx	xxx	xxx	xxx		

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

Annual Statement for the year 2014 of the

MANHATTAN NATIONAL LIFE INSURANCE COMPANY

SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O - PART 2

Development of Incurred Losses

(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Net Amounts Paid for Cost Containment Expenses				
	1 2010	2 2011	3 2012	4 2013	5 2014
1. Prior.....					
2. 2010.....					
3. 2011.....	XXX				
4. 2012.....	XXX	XXX			
5. 2013.....	XXX	XXX	XXX		
6. 2014.....	XXX	XXX	XXX	XXX	

Section B - Other Accident and Health

1. Prior.....					
2. 2010.....					
3. 2011.....	XXX				
4. 2012.....	XXX	XXX			
5. 2013.....	XXX	XXX	XXX		
6. 2014.....	XXX	XXX	XXX	XXX	

Section C - Credit Accident and Health

1. Prior.....					
2. 2010.....					
3. 2011.....	XXX				
4. 2012.....	XXX	XXX			
5. 2013.....	XXX	XXX	XXX		
6. 2014.....	XXX	XXX	XXX	XXX	

Annual Statement for the year 2014 of the

MANHATTAN NATIONAL LIFE INSURANCE COMPANY

SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O - PART 3

Development of Incurred Losses

(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders and Claim Liability and Reserve Outstanding at End of Year				
	1 2010	2 2011	3 2012	4 2013	5 2014
1. 2010.....				XXX	XXX
2. 2011.....	XXX				XXX
3. 2012.....	XXX	XXX			
4. 2013.....	XXX	XXX	XXX		
5. 2014.....	XXX	XXX	XXX	XXX	

Section B - Other Accident and Health

1. 2010.....				XXX	XXX
2. 2011.....	XXX				XXX
3. 2012.....	XXX	XXX			
4. 2013.....	XXX	XXX	XXX		
5. 2014.....	XXX	XXX	XXX	XXX	10

Section C - Credit Accident and Health

1. 2010.....				XXX	XXX
2. 2011.....	XXX				XXX
3. 2012.....	XXX	XXX			
4. 2013.....	XXX	XXX	XXX		
5. 2014.....	XXX	XXX	XXX	XXX	10

Annual Statement for the year 2014 of the

MANHATTAN NATIONAL LIFE INSURANCE COMPANY

SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O - PART 4

Development of Incurred Losses

(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at End of Year				
	1 2010	2 2011	3 2012	4 2013	5 2014
1. 2010.....					
2. 2011.....	XXX				
3. 2012.....	XXX	XXX			
4. 2013.....	XXX	XXX	XXX		
5. 2014.....	XXX	XXX	XXX	XXX	

Section B - Other Accident and Health

1. 2010.....					
2. 2011.....	XXX				
3. 2012.....	XXX	XXX			
4. 2013.....	XXX	XXX	XXX		
5. 2014.....	XXX	XXX	XXX	XXX	10

Section C - Credit Accident and Health

1. 2010.....					
2. 2011.....	XXX				
3. 2012.....	XXX	XXX			
4. 2013.....	XXX	XXX	XXX		
5. 2014.....	XXX	XXX	XXX	XXX	

SUPPLEMENTAL SCHEDULE O - PART 5

(\$000 OMITTED)

Reserve and Liability Methodology - Exhibits 6 and 8

Line of Business	1 Methodology	2 Amount
1. Industrial life.....		
2. Ordinary life.....	Standard Factor.....	4,158
3. Individual annuity.....	Standard Factor.....	591
4. Supplementary contracts.....		
5. Credit life.....		
6. Group life.....		
7. Group annuities.....		
8. Group accident and health.....		
9. Credit accident and health.....		
10. Other accident and health.....	Standard Factor.....	115
11. Total.....		4,864

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

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

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

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

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

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

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

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

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

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

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

Sch. O-Pt. 3-Sn. G
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Sch. O-Pt. 4-Sn. D
NONE

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

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

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

2014 ALPHABETICAL INDEX

LIFE ANNUAL STATEMENT BLANK

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