



ANNUAL STATEMENT
For the Year Ended DECEMBER 31, 2014
OF THE CONDITION AND AFFAIRS OF THE
Catamaran Insurance of Ohio

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

OFFICERS

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

OTHERS

DIRECTORS OR TRUSTEES

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

State of Illinois
County of DuPage ss

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

(Signature)	(Signature)	(Signature)
Mark Alan Thierer	Jeffrey Gary Park	Clifford Elliot Berman
(Printed Name)	(Printed Name)	(Printed Name)
1.	2.	3.
Chairman & President	Executive VP Finance, CFO & Treasurer	Secretary
(Title)	(Title)	(Title)

Subscribed and sworn to before me this	a. Is this an original filing?	Yes[X] No[]
day of , 2015	b. If no,	
	1. State the amendment number	
	2. Date filed	
	3. Number of pages attached	

(Notary Public Signature)



DIRECT BUSINESS IN THE STATE OF ALABAMA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF ALASKA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF ARIZONA
NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014
NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	34,023				34,023
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	TOTALS (sum of Lines 1 to 4)	34,023				34,023
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	TOTALS (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	TOTALS (sum of Lines 7.1 to 7.3)					
8.	GRAND TOTALS (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	26,739				26,739
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	TOTALS	26,739				26,739

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	TOTALS Paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	22	1,829,125	(a)						22	1,829,125
21.	Issued during year										
22.	Other changes to in force (Net)		767								767
23.	In force December 31 of current year	22	1,829,892	(a)						22	1,829,892

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF ARKANSAS

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	2,064				2,064
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	TOTALS (sum of Lines 1 to 4)	2,064				2,064
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	TOTALS (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	TOTALS (sum of Lines 7.1 to 7.3)					
8.	GRAND TOTALS (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	10,000				10,000
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	167				167
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	TOTALS	10,167				10,167
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page						
1399. TOTALS (Lines 1301 through 1303 plus 1398) (Line 13 above)						

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF CALIFORNIA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary		2 Credit Life (Group and Individual)		3 Group		4 Industrial		5 Total	
1.	Life Insurance	137,253								137,253	
2.	Annuity considerations	1,133								1,133	
3.	Deposit-type contract funds			X X X				X X X			
4.	Other considerations										
5.	TOTALS (sum of Lines 1 to 4)	138,386								138,386	
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	TOTALS (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	TOTALS (sum of Lines 7.1 to 7.3)										
8.	GRAND TOTALS (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits	75,153								75,153	
10.	Matured endowments										
11.	Annuity benefits	2,628								2,628	
12.	Surrender values and withdrawals for life contracts	123,272								123,272	
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	TOTALS	201,053								201,053	
DETAILS OF WRITE-INS											
1301.											
1302.											
1303.											
1398. Summary of remaining write-ins for Line 13 from overflow page											
1399. TOTALS (Lines 1301 through 1303 plus 1398) (Line 13 above)											

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF COLORADO

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	21,831				21,831
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	TOTALS (sum of Lines 1 to 4)	21,831				21,831
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	TOTALS (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	TOTALS (sum of Lines 7.1 to 7.3)					
8.	GRAND TOTALS (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	10,000				10,000
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	129,492				129,492
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	TOTALS	139,492				139,492

DETAILS OF WRITE-INS

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certificates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year	1	10,000							1	10,000
	Settled during current year:										
18.1	By payment in full	1	10,000							1	10,000
18.2	By payment on compromised claims										
18.3	TOTALS Paid	1	10,000							1	10,000
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements	1	10,000							1	10,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	17	1,106,396		(a).....					17	1,106,396
21.	Issued during year										
22.	Other changes to in force (Net)	(1)	(40,035)							(1)	(40,035)
23.	In force December 31 of current year	16	1,066,361		(a).....					16	1,066,361

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF CONNECTICUT
NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014
NAIC Company Code: 69647

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

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	TOTALS Paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	5	550,000	(a)						5	550,000
21.	Issued during year										
22.	Other changes to in force (Net)										
23.	In force December 31 of current year	5	550,000	(a)						5	550,000

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF DELAWARE
NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014
NAIC Company Code: 69647

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF DISTRICT OF COLUMBIA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF FLORIDA
NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014
NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	40,132				40,132
2.	Annuity considerations	770				770
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	TOTALS (sum of Lines 1 to 4)	40,902				40,902
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	TOTALS (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	TOTALS (sum of Lines 7.1 to 7.3)					
8.	GRAND TOTALS (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	15,000				15,000
10.	Matured endowments					
11.	Annuity benefits	3,142				3,142
12.	Surrender values and withdrawals for life contracts	61,335				61,335
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	TOTALS	79,477				79,477

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi-ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year	1	15,000							1	15,000
	Settled during current year:										
18.1	By payment in full	1	15,000							1	15,000
18.2	By payment on compromised claims										
18.3	TOTALS Paid	1	15,000							1	15,000
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements	1	15,000							1	15,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	72	4,319,340		(a).....					72	4,319,340
21.	Issued during year										
22.	Other changes to in force (Net)	(7)	(391,427)							(7)	(391,427)
23.	In force December 31 of current year	65	3,927,913		(a).....					65	3,927,913

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF **GEORGIA**
NAIC Group Code: 4771

LIFE INSURANCE
NAIC Company Code: 69647

DURING THE YEAR 2014

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1	2	3	4	5
		Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1.	Life Insurance	10,604				10,604
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	TOTALS (sum of Lines 1 to 4)	10,604				10,604
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	TOTALS (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	TOTALS (sum of Lines 7.1 to 7.3)					
8.	GRAND TOTALS (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	46,000				46,000
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	3,287				3,287
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	TOTALS	49,287				49,287

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certificates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year	1	46,000							1	46,000
	Settled during current year:										
18.1	By payment in full	1	46,000							1	46,000
18.2	By payment on compromised claims										
18.3	TOTALS Paid	1	46,000							1	46,000
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements	1	46,000							1	46,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	38	1,702,482		(a).....					38	1,702,482
21.	Issued during year										
22.	Other changes to in force (Net)	(4)	(180,444)							(4)	(180,444)
23.	In force December 31 of current year	34	1,522,038		(a).....					34	1,522,038

(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 Employees Health Benefits Plan Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	TOTALS (sum of Lines 25.1 to 25.5)					
26.	TOTALS (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

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



DIRECT BUSINESS IN THE STATE OF HAWAII

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary		2 Credit Life (Group and Individual)		3 Group		4 Industrial		5 Total	
1.	Life Insurance	2,614								2,614	
2.	Annuity considerations										
3.	Deposit-type contract funds			X X X				X X X			
4.	Other considerations										
5.	TOTALS (sum of Lines 1 to 4)	2,614								2,614	
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	TOTALS (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	TOTALS (sum of Lines 7.1 to 7.3)										
8.	GRAND TOTALS (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits										
10.	Matured endowments										
11.	Annuity benefits										
12.	Surrender values and withdrawals for life contracts										
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	TOTALS										
DETAILS OF WRITE-INS											
1301.											
1302.											
1303.											
1398. Summary of remaining write-ins for Line 13 from overflow page											
1399. TOTALS (Lines 1301 through 1303 plus 1398) (Line 13 above)											
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	TOTALS Paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	2	113,890	(a)						2	113,890
21.	Issued during year										
22.	Other changes to in force (Net)	1	50,291							1	50,291
23.	In force December 31 of current year	3	164,181	(a)						3	164,181

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF IDAHO

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	2,321				2,321
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	TOTALS (sum of Lines 1 to 4)	2,321				2,321
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	TOTALS (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	TOTALS (sum of Lines 7.1 to 7.3)					
8.	GRAND TOTALS (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	TOTALS					

DETAILS OF WRITE-INS

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certificates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	TOTALS Paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	6	656,854	(a)						6	656,854
21.	Issued during year										
22.	Other changes to in force (Net)										
23.	In force December 31 of current year	6	656,854	(a)						6	656,854

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF ILLINOIS

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	11,986				11,986
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	TOTALS (sum of Lines 1 to 4)	11,986				11,986
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	TOTALS (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	TOTALS (sum of Lines 7.1 to 7.3)					
8.	GRAND TOTALS (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	32,990				32,990
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	38,309				38,309
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	TOTALS	71,299				71,299

DETAILS OF WRITE-INS

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certificates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year	1	32,990							1	32,990
	Settled during current year:										
18.1	By payment in full	1	32,990							1	32,990
18.2	By payment on compromised claims										
18.3	TOTALS Paid	1	32,990							1	32,990
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements	1	32,990							1	32,990
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	32	1,452,440		(a).....					32	1,452,440
21.	Issued during year										
22.	Other changes to in force (Net)	(4)	(133,276)							(4)	(133,276)
23.	In force December 31 of current year	28	1,319,164		(a).....					28	1,319,164

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF INDIANA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	17,777				17,777
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	TOTALS (sum of Lines 1 to 4)	17,777				17,777
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	TOTALS (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	TOTALS (sum of Lines 7.1 to 7.3)					
8.	GRAND TOTALS (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	114,305				114,305
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	34,850				34,850
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	TOTALS	149,155				149,155

DETAILS OF WRITE-INS

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certificates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year	2	114,305							2	114,305
	Settled during current year:										
18.1	By payment in full	2	114,305							2	114,305
18.2	By payment on compromised claims										
18.3	TOTALS Paid	2	114,305							2	114,305
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements	2	114,305							2	114,305
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	49	1,980,150		(a)					49	1,980,150
21.	Issued during year										
22.	Other changes to in force (Net)	(4)	(160,419)							(4)	(160,419)
23.	In force December 31 of current year	45	1,819,731		(a)					45	1,819,731

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF IOWA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	4,616				4,616
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	TOTALS (sum of Lines 1 to 4)	4,616				4,616
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	TOTALS (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	TOTALS (sum of Lines 7.1 to 7.3)					
8.	GRAND TOTALS (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	25,000				25,000
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	3,979				3,979
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	TOTALS	28,979				28,979
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page						
1399. TOTALS (Lines 1301 through 1303 plus 1398) (Line 13 above)						

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF KANSAS

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	3,901				3,901
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	TOTALS (sum of Lines 1 to 4)	3,901				3,901
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	TOTALS (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	TOTALS (sum of Lines 7.1 to 7.3)					
8.	GRAND TOTALS (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	8,517				8,517
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	4,259				4,259
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	TOTALS	12,776				12,776

DETAILS OF WRITE-INS

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year	1	8,517							1	8,517
	Settled during current year:										
18.1	By payment in full	1	8,517							1	8,517
18.2	By payment on compromised claims										
18.3	TOTALS Paid	1	8,517							1	8,517
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements	1	8,517							1	8,517
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	13	269,139		(a).....					13	269,139
21.	Issued during year										
22.	Other changes to in force (Net)	(3)	(68,463)							(3)	(68,463)
23.	In force December 31 of current year	10	200,676		(a).....					10	200,676

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF KENTUCKY

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary		2 Credit Life (Group and Individual)		3 Group		4 Industrial		5 Total	
1.	Life Insurance	49,780								49,780	
2.	Annuity considerations										
3.	Deposit-type contract funds			X X X				X X X			
4.	Other considerations										
5.	TOTALS (sum of Lines 1 to 4)	49,780								49,780	
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	TOTALS (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	TOTALS (sum of Lines 7.1 to 7.3)										
8.	GRAND TOTALS (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits	105,364								105,364	
10.	Matured endowments										
11.	Annuity benefits										
12.	Surrender values and withdrawals for life contracts	18,641								18,641	
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	TOTALS	124,005								124,005	
DETAILS OF WRITE-INS											
1301.											
1302.											
1303.											
1398. Summary of remaining write-ins for Line 13 from overflow page											
1399. TOTALS (Lines 1301 through 1303 plus 1398) (Line 13 above)											
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year	4	105,364							4	105,364
Settled during current year:											
18.1	By payment in full	4	105,364							4	105,364
18.2	By payment on compromised claims										
18.3	TOTALS Paid	4	105,364							4	105,364
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements	4	105,364							4	105,364
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	188	4,424,385	(a)						188	4,424,385
21.	Issued during year										
22.	Other changes to in force (Net)	(12)	(236,010)							(12)	(236,010)
23.	In force December 31 of current year	176	4,188,375	(a)						176	4,188,375

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)	656				
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)	656				
26.	TOTALS (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	656				

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



DIRECT BUSINESS IN THE STATE OF LOUISIANA
NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014
NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary		2 Credit Life (Group and Individual)		3 Group		4 Industrial		5 Total	
1.	Life Insurance	14,692								14,692	
2.	Annuity considerations										
3.	Deposit-type contract funds			X X X				X X X			
4.	Other considerations										
5.	TOTALS (sum of Lines 1 to 4)	14,692								14,692	
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	TOTALS (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	TOTALS (sum of Lines 7.1 to 7.3)										
8.	GRAND TOTALS (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits										
10.	Matured endowments										
11.	Annuity benefits										
12.	Surrender values and withdrawals for life contracts	3,632								3,632	
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	TOTALS	3,632								3,632	
DETAILS OF WRITE-INS											
1301.											
1302.											
1303.											
1398. Summary of remaining write-ins for Line 13 from overflow page											
1399. TOTALS (Lines 1301 through 1303 plus 1398) (Line 13 above)											
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	TOTALS Paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	66	1,591,503	(a)						66	1,591,503
21.	Issued during year										
22.	Other changes to in force (Net)	(5)	(88,333)							(5)	(88,333)
23.	In force December 31 of current year	61	1,503,170	(a)						61	1,503,170

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF MAINE

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF MARYLAND

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary		2 Credit Life (Group and Individual)		3 Group		4 Industrial		5 Total	
1.	Life Insurance	1,613								1,613	
2.	Annuity considerations										
3.	Deposit-type contract funds			X X X				X X X			
4.	Other considerations										
5.	TOTALS (sum of Lines 1 to 4)	1,613								1,613	
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	TOTALS (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	TOTALS (sum of Lines 7.1 to 7.3)										
8.	GRAND TOTALS (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits										
10.	Matured endowments										
11.	Annuity benefits										
12.	Surrender values and withdrawals for life contracts										
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	TOTALS										
DETAILS OF WRITE-INS											
1301.											
1302.											
1303.											
1398. Summary of remaining write-ins for Line 13 from overflow page											
1399. TOTALS (Lines 1301 through 1303 plus 1398) (Line 13 above)											

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF MASSACHUSETTS

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1	2	3	4	5
		Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1.	Life Insurance	520				520
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	TOTALS (sum of Lines 1 to 4)	520				520
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	TOTALS (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	TOTALS (sum of Lines 7.1 to 7.3)					
8.	GRAND TOTALS (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	TOTALS					

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	TOTALS Paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	1	63,477	(a)						1	63,477
21.	Issued during year										
22.	Other changes to in force (Net)										
23.	In force December 31 of current year	1	63,477	(a)						1	63,477

(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 Employees Health Benefits Plan Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	TOTALS (sum of Lines 25.1 to 25.5)					
26.	TOTALS (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

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



DIRECT BUSINESS IN THE STATE OF MICHIGAN

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1	2	3	4	5
		Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1.	Life Insurance	22,079				22,079
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	TOTALS (sum of Lines 1 to 4)	22,079				22,079
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	TOTALS (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	TOTALS (sum of Lines 7.1 to 7.3)					
8.	GRAND TOTALS (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits	531				531
12.	Surrender values and withdrawals for life contracts	129,317				129,317
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	TOTALS	129,848				129,848

DETAILS OF WRITE-INS

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certificates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	TOTALS Paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	52	2,730,279		(a).....					52	2,730,279
21.	Issued during year										
22.	Other changes to in force (Net)	(1)	(24,375)							(1)	(24,375)
23.	In force December 31 of current year	51	2,705,904		(a).....					51	2,705,904

(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 Employees Health Benefits Plan Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	TOTALS (sum of Lines 25.1 to 25.5)					
26.	TOTALS (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

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



DIRECT BUSINESS IN THE STATE OF MINNESOTA
NAIC Group Code: 4771

LIFE INSURANCE
DURING THE YEAR 2014
NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	1,933				1,933
2.	Annuity considerations	60,000				60,000
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	TOTALS (sum of Lines 1 to 4)	61,933				61,933
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	TOTALS (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	TOTALS (sum of Lines 7.1 to 7.3)					
8.	GRAND TOTALS (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	10,000				10,000
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	8,735				8,735
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	TOTALS	18,735				18,735

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 Number	2 Amount	3 No. of Ind.Pols & Group Certifs.	4 Amount	5 No. of Certi- ficates	6 Amount	7 Number	8 Amount	9 Number	10 Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year	1	10,000							1	10,000
	Settled during current year:										
18.1	By payment in full	1	10,000							1	10,000
18.2	By payment on compromised claims										
18.3	TOTALS Paid	1	10,000							1	10,000
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements	1	10,000							1	10,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	15	326,656		(a).....					15	326,656
21.	Issued during year										
22.	Other changes to in force (Net)	(1)	(10,000)							(1)	(10,000)
23.	In force December 31 of current year	14	316,656		(a).....					14	316,656

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF MISSISSIPPI
NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014
NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total					
1.	Life Insurance	5,335				5,335					
2.	Annuity considerations										
3.	Deposit-type contract funds		X X X		X X X						
4.	Other considerations										
5.	TOTALS (sum of Lines 1 to 4)	5,335				5,335					
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	TOTALS (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	TOTALS (sum of Lines 7.1 to 7.3)										
8.	GRAND TOTALS (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits										
10.	Matured endowments										
11.	Annuity benefits										
12.	Surrender values and withdrawals for life contracts	41,971				41,971					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	TOTALS	41,971				41,971					
DETAILS OF WRITE-INS											
1301.	.....									
1302.	.....									
1303.	.....									
1398.	Summary of remaining write-ins for Line 13 from overflow page										
1399.	TOTALS (Lines 1301 through 1303 plus 1398) (Line 13 above)										
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	TOTALS Paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	9	585,261	(a)						9	585,261
21.	Issued during year										
22.	Other changes to in force (Net)	(1)	(124,748)							(1)	(124,748)
23.	In force December 31 of current year	8	460,513	(a)						8	460,513

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF MISSOURI

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total					
1.	Life Insurance	1,750				1,750					
2.	Annuity considerations	5,134				5,134					
3.	Deposit-type contract funds		X X X		X X X						
4.	Other considerations										
5.	TOTALS (sum of Lines 1 to 4)	6,884				6,884					
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	TOTALS (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	TOTALS (sum of Lines 7.1 to 7.3)										
8.	GRAND TOTALS (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits										
10.	Matured endowments										
11.	Annuity benefits										
12.	Surrender values and withdrawals for life contracts	2,205				2,205					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	TOTALS	2,205				2,205					
DETAILS OF WRITE-INS											
1301.	.....									
1302.	.....									
1303.	.....									
1398.	Summary of remaining write-ins for Line 13 from overflow page										
1399.	TOTALS (Lines 1301 through 1303 plus 1398) (Line 13 above)										
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	TOTALS Paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	3	225,000	(a)						3	225,000
21.	Issued during year										
22.	Other changes to in force (Net)										
23.	In force December 31 of current year	3	225,000	(a)						3	225,000

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF MONTANA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF NEBRASKA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1		2		3		4		5	
		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
1.	Life Insurance	1,574								1,574	
2.	Annuity considerations										
3.	Deposit-type contract funds			X X X				X X X			
4.	Other considerations										
5.	TOTALS (sum of Lines 1 to 4)	1,574								1,574	
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	TOTALS (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	TOTALS (sum of Lines 7.1 to 7.3)										
8.	GRAND TOTALS (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits										
10.	Matured endowments										
11.	Annuity benefits										
12.	Surrender values and withdrawals for life contracts	8,605								8,605	
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	TOTALS	8,605								8,605	
DETAILS OF WRITE-INS											
1301.											
1302.											
1303.											
1398. Summary of remaining write-ins for Line 13 from overflow page											
1399. TOTALS (Lines 1301 through 1303 plus 1398) (Line 13 above)											
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	TOTALS Paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	5	255,100	(a)						5	255,100
21.	Issued during year										
22.	Other changes to in force (Net)										
23.	In force December 31 of current year	5	255,100	(a)						5	255,100

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF NEVADA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary		2 Credit Life (Group and Individual)		3 Group		4 Industrial		5 Total	
1.	Life Insurance	5,677								5,677	
2.	Annuity considerations										
3.	Deposit-type contract funds			X X X				X X X			
4.	Other considerations										
5.	TOTALS (sum of Lines 1 to 4)	5,677								5,677	
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	TOTALS (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	TOTALS (sum of Lines 7.1 to 7.3)										
8.	GRAND TOTALS (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits	12,257								12,257	
10.	Matured endowments										
11.	Annuity benefits										
12.	Surrender values and withdrawals for life contracts										
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	TOTALS	12,257								12,257	
DETAILS OF WRITE-INS											
1301.											
1302.											
1303.											
1398. Summary of remaining write-ins for Line 13 from overflow page											
1399. TOTALS (Lines 1301 through 1303 plus 1398) (Line 13 above)											
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year	1	12,257							1	12,257
Settled during current year:											
18.1	By payment in full	1	12,257							1	12,257
18.2	By payment on compromised claims										
18.3	TOTALS Paid	1	12,257							1	12,257
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements	1	12,257							1	12,257
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	13	725,479	(a)						13	725,479
21.	Issued during year										
22.	Other changes to in force (Net)	1	50,630							1	50,630
23.	In force December 31 of current year	14	776,109	(a)						14	776,109

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF NEW HAMPSHIRE

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total					
1.	Life Insurance	524				524					
2.	Annuity considerations										
3.	Deposit-type contract funds		X X X		X X X						
4.	Other considerations										
5.	TOTALS (sum of Lines 1 to 4)	524				524					
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	TOTALS (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	TOTALS (sum of Lines 7.1 to 7.3)										
8.	GRAND TOTALS (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits										
10.	Matured endowments										
11.	Annuity benefits										
12.	Surrender values and withdrawals for life contracts										
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	TOTALS										
DETAILS OF WRITE-INS											
1301.	.....									
1302.	.....									
1303.	.....									
1398.	Summary of remaining write-ins for Line 13 from overflow page										
1399.	TOTALS (Lines 1301 through 1303 plus 1398) (Line 13 above)										
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	TOTALS Paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	2	110,867	(a)						2	110,867
21.	Issued during year										
22.	Other changes to in force (Net)		741								741
23.	In force December 31 of current year	2	111,608	(a)						2	111,608

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF NEW JERSEY
NAIC Group Code: 4771

LIFE INSURANCE
DURING THE YEAR 2014
NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	381				381
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	TOTALS (sum of Lines 1 to 4)	381				381
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	TOTALS (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	TOTALS (sum of Lines 7.1 to 7.3)					
8.	GRAND TOTALS (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits	3,194				3,194
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	TOTALS	3,194				3,194

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certificates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	TOTALS Paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	2	240,250	(a)						2	240,250
21.	Issued during year										
22.	Other changes to in force (Net)										
23.	In force December 31 of current year	2	240,250	(a)						2	240,250

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF NEW MEXICO

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary		2 Credit Life (Group and Individual)		3 Group		4 Industrial		5 Total	
1.	Life Insurance	1,955								1,955	
2.	Annuity considerations										
3.	Deposit-type contract funds			X X X				X X X			
4.	Other considerations										
5.	TOTALS (sum of Lines 1 to 4)	1,955								1,955	
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	TOTALS (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	TOTALS (sum of Lines 7.1 to 7.3)										
8.	GRAND TOTALS (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits										
10.	Matured endowments										
11.	Annuity benefits										
12.	Surrender values and withdrawals for life contracts										
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	TOTALS										
DETAILS OF WRITE-INS											
1301.											
1302.											
1303.											
1398. Summary of remaining write-ins for Line 13 from overflow page											
1399. TOTALS (Lines 1301 through 1303 plus 1398) (Line 13 above)											
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	TOTALS Paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	9	339,385	(a)						9	339,385
21.	Issued during year										
22.	Other changes to in force (Net)										
23.	In force December 31 of current year	9	339,385	(a)						9	339,385

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF NEW YORK
NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014
NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary		2 Credit Life (Group and Individual)		3 Group		4 Industrial		5 Total	
1.	Life Insurance	406								406	
2.	Annuity considerations										
3.	Deposit-type contract funds			X X X				X X X			
4.	Other considerations										
5.	TOTALS (sum of Lines 1 to 4)	406								406	
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	TOTALS (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	TOTALS (sum of Lines 7.1 to 7.3)										
8.	GRAND TOTALS (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits										
10.	Matured endowments										
11.	Annuity benefits										
12.	Surrender values and withdrawals for life contracts										
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	TOTALS										
DETAILS OF WRITE-INS											
1301.											
1302.											
1303.											
1398. Summary of remaining write-ins for Line 13 from overflow page											
1399. TOTALS (Lines 1301 through 1303 plus 1398) (Line 13 above)											

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF NORTH CAROLINA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	19,423				19,423
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	TOTALS (sum of Lines 1 to 4)	19,423				19,423
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	TOTALS (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	TOTALS (sum of Lines 7.1 to 7.3)					
8.	GRAND TOTALS (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	40,586				40,586
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	TOTALS	40,586				40,586

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 Number	2 Amount	3 No. of Ind.Pols & Group Certifs.	4 Amount	5 No. of Certi- ficates	6 Amount	7 Number	8 Amount	9 Number	10 Amount
16.	Unpaid December 31, prior year									
17.	Incurred during current year									
	Settled during current year:									
18.1	By payment in full									
18.2	By payment on compromised claims									
18.3	TOTALS Paid									
18.4	Reduction by compromise									
18.5	Amount rejected									
18.6	TOTAL Settlements									
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)									
POLICY EXHIBIT					No. of Policies					
20.	In force December 31, prior year	38	2,436,748	(a).....					38	2,436,748
21.	Issued during year									
22.	Other changes to in force (Net)	(6)	(304,725)						(6)	(304,725)
23.	In force December 31 of current year	32	2,132,023	(a).....					32	2,132,023

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF NORTH DAKOTA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	353				353
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	TOTALS (sum of Lines 1 to 4)	353				353
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	TOTALS (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	TOTALS (sum of Lines 7.1 to 7.3)					
8.	GRAND TOTALS (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	TOTALS					

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certificates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year									
17.	Incurred during current year									
	Settled during current year:									
18.1	By payment in full									
18.2	By payment on compromised claims									
18.3	TOTALS Paid									
18.4	Reduction by compromise									
18.5	Amount rejected									
18.6	TOTAL Settlements									
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)									
POLICY EXHIBIT					No. of Policies					
20.	In force December 31, prior year	2	41,008	(a).....					2	41,008
21.	Issued during year									
22.	Other changes to in force (Net)									
23.	In force December 31 of current year	2	41,008	(a).....					2	41,008

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF OHIO

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1		2		3		4		5	
		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
1.	Life Insurance	335,860								335,860	
2.	Annuity considerations	27,396								27,396	
3.	Deposit-type contract funds			X X X				X X X			
4.	Other considerations										
5.	TOTALS (sum of Lines 1 to 4)	363,256								363,256	
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	TOTALS (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	TOTALS (sum of Lines 7.1 to 7.3)										
8.	GRAND TOTALS (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits	84,204								84,204	
10.	Matured endowments										
11.	Annuity benefits	4,110								4,110	
12.	Surrender values and withdrawals for life contracts	254,116								254,116	
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	TOTALS	342,430								342,430	
DETAILS OF WRITE-INS											
1301.											
1302.											
1303.											
1398. Summary of remaining write-ins for Line 13 from overflow page											
1399. TOTALS (Lines 1301 through 1303 plus 1398) (Line 13 above)											
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year	8	84,204							8	84,204
Settled during current year:											
18.1	By payment in full	8	84,204							8	84,204
18.2	By payment on compromised claims										
18.3	TOTALS Paid	8	84,204							8	84,204
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements	8	84,204							8	84,204
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	1,179	35,384,961	(a)						1,179	35,384,961
21.	Issued during year										
22.	Other changes to in force (Net)	(79)	(2,005,806)							(79)	(2,005,806)
23.	In force December 31 of current year	1,100	33,379,155	(a)						1,100	33,379,155

(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 Employees Health Benefits Plan Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)	746				
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)	746				
26.	TOTALS (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	746				

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



DIRECT BUSINESS IN THE STATE OF OKLAHOMA
NAIC Group Code: 4771

LIFE INSURANCE
DURING THE YEAR 2014
NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total					
1.	Life Insurance	1,540				1,540					
2.	Annuity considerations										
3.	Deposit-type contract funds		X X X		X X X						
4.	Other considerations										
5.	TOTALS (sum of Lines 1 to 4)	1,540				1,540					
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	TOTALS (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	TOTALS (sum of Lines 7.1 to 7.3)										
8.	GRAND TOTALS (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits										
10.	Matured endowments										
11.	Annuity benefits										
12.	Surrender values and withdrawals for life contracts	24,284				24,284					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	TOTALS	24,284				24,284					
DETAILS OF WRITE-INS											
1301.	.....									
1302.	.....									
1303.	.....									
1398.	Summary of remaining write-ins for Line 13 from overflow page										
1399.	TOTALS (Lines 1301 through 1303 plus 1398) (Line 13 above)										
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	TOTALS Paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	4	351,470	(a)						4	351,470
21.	Issued during year										
22.	Other changes to in force (Net)										
23.	In force December 31 of current year	4	351,470	(a)						4	351,470

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF OREGON

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary		2 Credit Life (Group and Individual)		3 Group		4 Industrial		5 Total	
1.	Life Insurance	559								559	
2.	Annuity considerations										
3.	Deposit-type contract funds			X X X				X X X			
4.	Other considerations										
5.	TOTALS (sum of Lines 1 to 4)	559								559	
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	TOTALS (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	TOTALS (sum of Lines 7.1 to 7.3)										
8.	GRAND TOTALS (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits										
10.	Matured endowments										
11.	Annuity benefits										
12.	Surrender values and withdrawals for life contracts										
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	TOTALS										
DETAILS OF WRITE-INS											
1301.											
1302.											
1303.											
1398. Summary of remaining write-ins for Line 13 from overflow page											
1399. TOTALS (Lines 1301 through 1303 plus 1398) (Line 13 above)											

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF PENNSYLVANIA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	2,624				2,624
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	TOTALS (sum of Lines 1 to 4)	2,624				2,624
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	TOTALS (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	TOTALS (sum of Lines 7.1 to 7.3)					
8.	GRAND TOTALS (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	1,004				1,004
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	TOTALS	1,004				1,004

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certificates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	TOTALS Paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	10	133,403	(a)						10	133,403
21.	Issued during year										
22.	Other changes to in force (Net)		(82)								(82)
23.	In force December 31 of current year	10	133,321	(a)						10	133,321

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF RHODE ISLAND

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

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

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF SOUTH CAROLINA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	8,533				8,533
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	TOTALS (sum of Lines 1 to 4)	8,533				8,533
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	TOTALS (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	TOTALS (sum of Lines 7.1 to 7.3)					
8.	GRAND TOTALS (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	5,117				5,117
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	TOTALS	5,117				5,117

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certificates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	TOTALS Paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	15	314,553	(a)						15	314,553
21.	Issued during year										
22.	Other changes to in force (Net)		1,414								1,414
23.	In force December 31 of current year	15	315,967	(a)						15	315,967

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF SOUTH DAKOTA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	746				746
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	TOTALS (sum of Lines 1 to 4)	746				746
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	TOTALS (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	TOTALS (sum of Lines 7.1 to 7.3)					
8.	GRAND TOTALS (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	TOTALS					

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certificates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	TOTALS Paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	5	68,223	(a)						5	68,223
21.	Issued during year										
22.	Other changes to in force (Net)										
23.	In force December 31 of current year	5	68,223	(a)						5	68,223

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF TENNESSEE

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary		2 Credit Life (Group and Individual)		3 Group		4 Industrial		5 Total	
1.	Life Insurance	28,994								28,994	
2.	Annuity considerations										
3.	Deposit-type contract funds			X X X				X X X			
4.	Other considerations										
5.	TOTALS (sum of Lines 1 to 4)	28,994								28,994	
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	TOTALS (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	TOTALS (sum of Lines 7.1 to 7.3)										
8.	GRAND TOTALS (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits										
10.	Matured endowments										
11.	Annuity benefits										
12.	Surrender values and withdrawals for life contracts	995								995	
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	TOTALS	995								995	
DETAILS OF WRITE-INS											
1301.											
1302.											
1303.											
1398. Summary of remaining write-ins for Line 13 from overflow page											
1399. TOTALS (Lines 1301 through 1303 plus 1398) (Line 13 above)											

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF TEXAS

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	31,519				31,519
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	TOTALS (sum of Lines 1 to 4)	31,519				31,519
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	TOTALS (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	TOTALS (sum of Lines 7.1 to 7.3)					
8.	GRAND TOTALS (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	91,450				91,450
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	TOTALS	91,450				91,450

DETAILS OF WRITE-INS

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certificates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	TOTALS Paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	71	5,440,164	(a)						71	5,440,164
21.	Issued during year										
22.	Other changes to in force (Net)	(6)	(466,176)							(6)	(466,176)
23.	In force December 31 of current year	65	4,973,988	(a)						65	4,973,988

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF UTAH
NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014
NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	2,200				2,200
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	TOTALS (sum of Lines 1 to 4)	2,200				2,200
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	TOTALS (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	TOTALS (sum of Lines 7.1 to 7.3)					
8.	GRAND TOTALS (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	151,135				151,135
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	TOTALS	151,135				151,135

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certi- ficates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	TOTALS Paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	6	551,386	(a)						6	551,386
21.	Issued during year										
22.	Other changes to in force (Net)										
23.	In force December 31 of current year	6	551,386	(a)						6	551,386

(a) Includes Individual Credit Life Insurance prior year \$.00, current year \$.00.
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.00, current year \$.00.
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$.00, current year \$.00.

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF VERMONT

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF VIRGINIA
NAIC Group Code: 4771

LIFE INSURANCE
NAIC Company Code: 69647

DURING THE YEAR 2014

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1	2	3	4	5
		Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1.	Life Insurance	26,218				26,218
2.	Annuity considerations	311				311
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	TOTALS (sum of Lines 1 to 4)	26,529				26,529
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	TOTALS (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	TOTALS (sum of Lines 7.1 to 7.3)					
8.	GRAND TOTALS (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits	1,159				1,159
12.	Surrender values and withdrawals for life contracts	137,156				137,156
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	TOTALS	138,315				138,315

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certificates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	TOTALS Paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	42	3,629,278	(a)						42	3,629,278
21.	Issued during year										
22.	Other changes to in force (Net)		(4,103)								(4,103)
23.	In force December 31 of current year	42	3,625,175	(a)						42	3,625,175

(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 Employees Health Benefits Plan Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	TOTALS (sum of Lines 25.1 to 25.5)					
26.	TOTALS (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

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



DIRECT BUSINESS IN THE STATE OF WASHINGTON

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary		2 Credit Life (Group and Individual)		3 Group		4 Industrial		5 Total	
1.	Life Insurance	4,134								4,134	
2.	Annuity considerations										
3.	Deposit-type contract funds			X X X				X X X			
4.	Other considerations										
5.	TOTALS (sum of Lines 1 to 4)	4,134								4,134	
DIRECT DIVIDENDS TO POLICYHOLDERS											
Life Insurance:											
6.1	Paid in cash or left on deposit										
6.2	Applied to pay renewal premiums										
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period										
6.4	Other										
6.5	TOTALS (sum of Lines 6.1 to 6.4)										
Annuities:											
7.1	Paid in cash or left on deposit										
7.2	Applied to provide paid-up annuities										
7.3	Other										
7.4	TOTALS (sum of Lines 7.1 to 7.3)										
8.	GRAND TOTALS (Lines 6.5 plus 7.4)										
DIRECT CLAIMS AND BENEFITS PAID											
9.	Death benefits										
10.	Matured endowments										
11.	Annuity benefits										
12.	Surrender values and withdrawals for life contracts	11,043								11,043	
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid										
14.	All other benefits, except accident and health										
15.	TOTALS	11,043								11,043	
DETAILS OF WRITE-INS											
1301.											
1302.											
1303.											
1398. Summary of remaining write-ins for Line 13 from overflow page											
1399. TOTALS (Lines 1301 through 1303 plus 1398) (Line 13 above)											

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF WEST VIRGINIA

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	4,556				4,556
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	TOTALS (sum of Lines 1 to 4)	4,556				4,556
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	TOTALS (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	TOTALS (sum of Lines 7.1 to 7.3)					
8.	GRAND TOTALS (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	1,197				1,197
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	TOTALS	1,197				1,197

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1	2	3	4	5	6	7	8	9	10
		Number	Amount	No. of Ind.Pols & Group Certifs.	Amount	No. of Certificates	Amount	Number	Amount	Number	Amount
16.	Unpaid December 31, prior year										
17.	Incurred during current year										
	Settled during current year:										
18.1	By payment in full										
18.2	By payment on compromised claims										
18.3	TOTALS Paid										
18.4	Reduction by compromise										
18.5	Amount rejected										
18.6	TOTAL Settlements										
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)										
POLICY EXHIBIT						No. of Policies					
20.	In force December 31, prior year	11	569,945	(a)						11	569,945
21.	Issued during year										
22.	Other changes to in force (Net)	(1)	(14,919)							(1)	(14,919)
23.	In force December 31 of current year	10	555,026	(a)						10	555,026

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF WISCONSIN
NAIC Group Code: 4771

LIFE INSURANCE
NAIC Company Code: 69647

DURING THE YEAR 2014

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	4,796				4,796
2.	Annuity considerations					
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	TOTALS (sum of Lines 1 to 4)	4,796				4,796
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	TOTALS (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	TOTALS (sum of Lines 7.1 to 7.3)					
8.	GRAND TOTALS (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	12,048				12,048
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	670				670
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	TOTALS	12,718				12,718

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 Number	2 Amount	3 No. of Ind.Pols & Group Certifs.	4 Amount	5 No. of Certi- ficates	6 Amount	7 Number	8 Amount	9 Number	10 Amount
16.	Unpaid December 31, prior year									
17.	Incurred during current year	1	12,048						1	12,048
	Settled during current year:									
18.1	By payment in full	1	12,048						1	12,048
18.2	By payment on compromised claims									
18.3	TOTALS Paid	1	12,048						1	12,048
18.4	Reduction by compromise									
18.5	Amount rejected									
18.6	TOTAL Settlements	1	12,048						1	12,048
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)									
POLICY EXHIBIT					No. of Policies					
20.	In force December 31, prior year	17	676,831	(a)					17	676,831
21.	Issued during year									
22.	Other changes to in force (Net)	(1)	(20,311)						(1)	(20,311)
23.	In force December 31 of current year	16	656,520	(a)					16	656,520

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF WYOMING

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF GRAND TOTAL

NAIC Group Code: 4771

LIFE INSURANCE

DURING THE YEAR 2014

NAIC Company Code: 69647

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life Insurance	881,444				881,444
2.	Annuity considerations	94,744				94,744
3.	Deposit-type contract funds		X X X		X X X	
4.	Other considerations					
5.	TOTALS (sum of Lines 1 to 4)	976,188				976,188
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life Insurance:						
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium - paying period					
6.4	Other					
6.5	TOTALS (sum of Lines 6.1 to 6.4)					
Annuities:						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	TOTALS (sum of Lines 7.1 to 7.3)					
8.	GRAND TOTALS (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	560,838				560,838
10.	Matured endowments					
11.	Annuity benefits	14,764				14,764
12.	Surrender values and withdrawals for life contracts	1,357,548				1,357,548
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	TOTALS	1,933,150				1,933,150

DETAILS OF WRITE-INS

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 Number	2 Amount	3 No. of Ind.Pols & Group Certifs.	4 Amount	5 No. of Certi- ficates	6 Amount	7 Number	8 Amount	9 Number	10 Amount
16.	Unpaid December 31, prior year									
17.	Incurred during current year	28	560,838						28	560,838
	Settled during current year:									
18.1	By payment in full	28	560,838						28	560,838
18.2	By payment on compromised claims									
18.3	TOTALS Paid	28	560,838						28	560,838
18.4	Reduction by compromise									
18.5	Amount rejected									
18.6	TOTAL Settlements	28	560,838						28	560,838
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)									
POLICY EXHIBIT					No. of Policies					
20.	In force December 31, prior year	2,338	101,516,311	(a)					2,338	101,516,311
21.	Issued during year									
22.	Other changes to in force (Net)	(160)	(5,768,959)						(160)	(5,768,959)
23.	In force December 31 of current year	2,178	95,747,352	(a)					2,178	95,747,352

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan Premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively Renewable Policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees Other Individual Policies					
25.1	Non-cancelable (b)					
25.2	Guaranteed renewable (b)		1,402			
25.3	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
25.5	All other (b)					
25.6	TOTALS (sum of Lines 25.1 to 25.5)		1,402			
26.	TOTALS (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)		1,402			

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

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE
INTEREST MAINTENANCE RESERVE

		1 Amount
1.	Reserve as of December 31, Prior Year	133,436
2.	Current Year's Realized Pre-Tax capital gains/(losses) of \$.....0 Transferred into the Reserve Net of Taxes of \$.....0.	34,512
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)	167,947
5.	Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)	24,214
6.	Reserve as of December 31, current year (Line 4 minus Line 5)	143,733

AMORTIZATION

		1 Reserve as of December 31, Prior Year	2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3 Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	4 Balance Before Reduction for Current Year's Amortization (Columns 1 + 2 + 3)
Year of Amortization					
1.	2014	19,624	4,590		24,214
2.	2015	11,788	9,594		21,382
3.	2016	11,525	8,731		20,256
4.	2017	10,023	6,350		16,373
5.	2018	10,612	3,900		14,512
6.	2019	11,980	1,347		13,327
7.	2020	12,703			12,703
8.	2021	10,019			10,019
9.	2022	8,182			8,182
10.	2023	6,311			6,311
11.	2024	4,817			4,817
12.	2025	3,946			3,946
13.	2026	2,799			2,799
14.	2027	1,890			1,890
15.	2028	1,666			1,666
16.	2029	1,457			1,457
17.	2030	1,229			1,229
18.	2031	1,001			1,001
19.	2032	794			794
20.	2033	587			587
21.	2034	362			362
22.	2035	121			121
23.	2036				
24.	2037				
25.	2038				
26.	2039				
27.	2040				
28.	2041				
29.	2042				
30.	2043				
31.	2044 and Later				
32.	TOTAL (Lines 1 to 31)	133,436	34,512		167,948

ASSET VALUATION RESERVE

		Default Component			Equity Component			7
		1 Other than Mortgage Loans	2 Mortgage Loans	3 Total (Columns 1 + 2)	4 Common Stock	5 Real Estate and Other Invested Assets	6 Total (Columns 4 + 5)	
1.	Reserve as of December 31, prior year	1,750		1,750	12,699		12,699	14,449
2.	Realized Capital Gains/(Losses) Net of Taxes - General Account							
3.	Realized Capital Gains/(Losses) Net of Taxes - Separate Accounts							
4.	Unrealized Capital Gains/(Losses) Net of Deferred Taxes - General Account							
5.	Unrealized Capital Gains/(Losses) Net of Deferred Taxes - Separate Accounts							
6.	Capital gains credited/(losses charged) to contract benefits, payments or reserves ..							
7.	Basic Contribution	220		220				220
8.	Accumulated Balances (Lines 1 through 5 minus 6 plus 7)	1,970		1,970	12,699		12,699	14,669
9.	Maximum Reserve	1,650		1,650	60,340		60,340	61,990
10.	Reserve Objective	1,265		1,265	60,340		60,340	61,605
11.	20% of (Line 10 - Line 8)	(141)		(141)	9,528		9,528	9,387
12.	Balance Before Transfers (Lines 8 + 11)	1,829		1,829	22,227		22,227	24,056
13.	Transfers							
14.	Voluntary Contribution							
15.	Adjustment down to Maximum/up to Zero	(179)		(179)				(179)
16.	Reserve as of December 31, Current Year (Lines 12 + 13 + 14 + 15)	1,650		1,650	22,227		22,227	23,877

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

Line Number	NAIC Designation	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 (Columns 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Columns 4 x 5)	Factor	Amount (Columns 4 x 7)	Factor	Amount (Columns 4 x 9)
LONG-TERM BONDS												
1.		Exempt Obligations	3,258,945	X X X	X X X	3,258,945	0.0000		0.0000		0.0000	
2.	1	Highest Quality		X X X	X X X		0.0004		0.0023		0.0030	
3.	2	High Quality		X X X	X X X		0.0019		0.0058		0.0090	
4.	3	Medium Quality		X X X	X X X		0.0093		0.0230		0.0340	
5.	4	Low Quality		X X X	X X X		0.0213		0.0530		0.0750	
6.	5	Lower Quality		X X X	X X X		0.0432		0.1100		0.1700	
7.	6	In or Near Default		X X X	X X X		0.0000		0.2000		0.2000	
8.		TOTAL Unrated Multi-class Securities Acquired by Conversion		X X X	X X X		X X X		X X X		X X X	
9.		TOTAL Bonds (Sum of Lines 1 through 8)	3,258,945	X X X	X X X	3,258,945	X X X		X X X		X X X	
PREFERRED STOCKS												
10.	1	Highest Quality		X X X	X X X		0.0004		0.0023		0.0030	
11.	2	High Quality		X X X	X X X		0.0019		0.0058		0.0090	
12.	3	Medium Quality		X X X	X X X		0.0093		0.0230		0.0340	
13.	4	Low Quality		X X X	X X X		0.0213		0.0530		0.0750	
14.	5	Lower Quality		X X X	X X X		0.0432		0.1100		0.1700	
15.	6	In or Near Default		X X X	X X X		0.0000		0.2000		0.2000	
16.		Affiliated Life with AVR		X X X	X X X		0.0000		0.0000		0.0000	
17.		TOTAL Preferred Stocks (Sum of Lines 10 through 16)		X X X	X X X		X X X		X X X		X X X	
SHORT-TERM BONDS												
18.		Exempt Obligations	440,249	X X X	X X X	440,249	0.0000		0.0000		0.0000	
19.	1	Highest Quality	550,000	X X X	X X X	550,000	0.0004	220	0.0023	1,265	0.0030	1,650
20.	2	High Quality		X X X	X X X		0.0019		0.0058		0.0090	
21.	3	Medium Quality		X X X	X X X		0.0093		0.0230		0.0340	
22.	4	Low Quality		X X X	X X X		0.0213		0.0530		0.0750	
23.	5	Lower Quality		X X X	X X X		0.0432		0.1100		0.1700	
24.	6	In or Near Default		X X X	X X X		0.0000		0.2000		0.2000	
25.		TOTAL Short-term Bonds (Sum of Lines 18 through 24)	990,249	X X X	X X X	990,249	X X X	220	X X X	1,265	X X X	1,650
DERIVATIVE INSTRUMENTS												
26.		Exchange Traded		X X X	X X X		0.0004		0.0023		0.0030	
27.	1	Highest Quality		X X X	X X X		0.0004		0.0023		0.0030	
28.	2	High Quality		X X X	X X X		0.0019		0.0058		0.0090	
29.	3	Medium Quality		X X X	X X X		0.0093		0.0230		0.0340	
30.	4	Low Quality		X X X	X X X		0.0213		0.0530		0.0750	
31.	5	Lower Quality		X X X	X X X		0.0432		0.1100		0.1700	
32.	6	In or Near Default		X X X	X X X		0.0000		0.2000		0.2000	
33.		TOTAL Derivative Instruments		X X X	X X X		X X X		X X X		X X X	
34.		TOTAL (Lines 9 + 17 + 25 + 33)	4,249,194	X X X	X X X	4,249,194	X X X	220	X X X	1,265	X X X	1,650

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

Line Number	NAIC Desig- nation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Columns 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Columns 4 x 5)	7 Factor	8 Amount (Columns 4 x 7)	9 Factor	10 Amount (Columns 4 x 9)
		MORTGAGE LOANS										
		In Good Standing:										
35.		Farm Mortgages - CMI - highest quality			X X X		0.0010		0.0050		0.0065	
36.		Farm Mortgages - CM2 - high quality			X X X		0.0035		0.0100		0.0130	
37.		Farm Mortgages - CM3 - medium quality			X X X		0.0060		0.0175		0.0225	
38.		Farm Mortgages - CM4 - low medium quality			X X X		0.0105		0.0300		0.0375	
39.		Farm Mortgages - CM5 - low quality			X X X		0.0160		0.0425		0.0550	
40.		Residential Mortgages - Insured or Guaranteed			X X X		0.0003		0.0006		0.0010	
41.		Residential Mortgages - All Other			X X X		0.0013		0.0030		0.0040	
42.		Commercial Mortgages - Insured or Guaranteed			X X X		0.0003		0.0006		0.0010	
43.		Commercial Mortgages - All Other - CM1 - highest quality			X X X		0.0010		0.0050		0.0065	
44.		Commercial Mortgages - All Other - CM2 - high quality			X X X		0.0035		0.0100		0.0130	
45.		Commercial Mortgages - All Other - CM3 - medium quality			X X X		0.0060		0.0175		0.0225	
46.		Commercial Mortgages - All Other - CM4 - low medium quality			X X X		0.0105		0.0300		0.0375	
47.		Commercial Mortgages - All Other - CM5 - low quality			X X X		0.0160		0.0425		0.0550	
		Overdue, Not in Process:										
48.		Farm Mortgages			X X X		0.0420		0.0760		0.1200	
49.		Residential Mortgages - Insured or Guaranteed			X X X		0.0005		0.0012		0.0020	
50.		Residential Mortgages - All Other			X X X		0.0025		0.0058		0.0090	
51.		Commercial Mortgages - Insured or Guaranteed			X X X		0.0005		0.0012		0.0020	
52.		Commercial Mortgages - All Other			X X X		0.0420		0.0760		0.1200	
		In Process of Foreclosure:										
53.		Farm Mortgages			X X X		0.0000		0.1700		0.1700	
54.		Residential Mortgages - Insured or Guaranteed			X X X		0.0000		0.0040		0.0040	
55.		Residential Mortgages - All Other			X X X		0.0000		0.0130		0.0130	
56.		Commercial Mortgages - Insured or Guaranteed			X X X		0.0000		0.0040		0.0040	
57.		Commercial Mortgages - All Other			X X X		0.0000		0.1700		0.1700	
58.		TOTAL Schedule B Mortgages (Sum of Lines 35 through 57)			X X X		X X X		X X X		X X X	
59.		Schedule DA Mortgages			X X X		0.0030		0.0100		0.0130	
60.		TOTAL Mortgage Loans on Real Estate (Lines 58 + 59)			X X X		X X X		X X X		X X X	

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

Line Number	NAIC Designation	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 (Columns 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Columns 4 x 5)	Factor	Amount (Columns 4 x 7)	Factor	Amount (Columns 4 x 9)
COMMON STOCK												
1.		Unaffiliated Public	301,700	X X X	X X X	301,700	0.0000		0.2000 (a)	60,340	0.2000 (a)	60,340
2.		Unaffiliated Private		X X X	X X X		0.0000		0.1600		0.1600	
3.		Federal Home Loan Bank		X X X	X X X		0.0000		0.0050		0.0080	
4.		Affiliated Life with AVR		X X X	X X X		0.0000		0.0000		0.0000	
Affiliated Investment Subsidiary:												
5.		Fixed Income Exempt Obligations					X X X		X X X		X X X	
6.		Fixed Income Highest Quality					X X X		X X X		X X X	
7.		Fixed Income High Quality					X X X		X X X		X X X	
8.		Fixed Income Medium Quality					X X X		X X X		X X X	
9.		Fixed Income Low Quality					X X X		X X X		X X X	
10.		Fixed Income Lower Quality					X X X		X X X		X X X	
11.		Fixed Income In/Near Default					X X X		X X X		X X X	
12.		Unaffiliated Common Stock Public					0.0000		(a)		(a)	
13.		Unaffiliated Common Stock Private					0.0000		0.1600		0.1600	
14.		Real Estate					(b)		(b)		(b)	
15.		Affiliated-Certain Other (See SVO Purposes and Procedures Manual)		X X X	X X X		0.0000		0.1300		0.1300	
16.		Affiliated-All Other		X X X	X X X		0.0000		0.1600		0.1600	
17.		TOTAL Common Stock (Sum of Lines 1 through 16)	301,700			301,700	X X X		X X X	60,340	X X X	60,340
REAL ESTATE												
18.		Home Office Property (General Account Only)					0.0000		0.0750		0.0750	
19.		Investment Properties					0.0000		0.0750		0.0750	
20.		Properties Acquired in Satisfaction of Debt					0.0000		0.1100		0.1100	
21.		TOTAL Real Estate (Sum of Lines 18 through 20)					X X X		X X X		X X X	
OTHER INVESTED ASSETS												
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS												
22.		Exempt Obligations		X X X	X X X		0.0000		0.0000		0.0000	
23.	1	Highest Quality		X X X	X X X		0.0004		0.0023		0.0030	
24.	2	High Quality		X X X	X X X		0.0019		0.0058		0.0090	
25.	3	Medium Quality		X X X	X X X		0.0093		0.0230		0.0340	
26.	4	Low Quality		X X X	X X X		0.0213		0.0530		0.0750	
27.	5	Lower Quality		X X X	X X X		0.0432		0.1100		0.1700	
28.	6	In or Near Default		X X X	X X X		0.0000		0.2000		0.2000	
29.		TOTAL with Bond characteristics (Sum of Lines 22 through 28)		X X X	X X X		X X X		X X X		X X X	

ASSET VALUATION RESERVE (Continued)
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS
EQUITY AND OTHER INVESTED ASSET 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 (Columns 1 + 2 + 3)	5 Factor	6 Amount (Columns 4 x 5)	7 Factor	8 Amount (Columns 4 x 7)	9 Factor	10 Amount (Columns 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS										
30.	1	Highest Quality		X X X	X X X		0.0004		0.0023		0.0030	
31.	2	High Quality		X X X	X X X		0.0019		0.0058		0.0090	
32.	3	Medium Quality		X X X	X X X		0.0093		0.0230		0.0340	
33.	4	Low Quality		X X X	X X X		0.0213		0.0530		0.0750	
34.	5	Lower Quality		X X X	X X X		0.0432		0.1100		0.1700	
35.	6	In or Near Default		X X X	X X X		0.0000		0.2000		0.2000	
36.		Affiliated Life with AVR		X X X	X X X		0.0000		0.0000		0.0000	
37.		TOTAL with Preferred Stock Characteristics (Sum of Lines 30 through 36)		X X X	X X X		X X X		X X X		X X X	
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS										
		In Good Standing Affiliated:										
38.		Mortgages - CM1 - highest quality			X X X		0.0010		0.0050		0.0065	
39.		Mortgages - CM2 - high quality			X X X		0.0035		0.0100		0.0130	
40.		Mortgages - CM3 - medium quality			X X X		0.0060		0.0175		0.0225	
41.		Mortgages - CM4 - low medium quality			X X X		0.0105		0.0300		0.0375	
42.		Mortgages - CM5 - low quality			X X X		0.0160		0.0425		0.0550	
43.		Residential Mortgages - Insured or Guaranteed			X X X		0.0003		0.0006		0.0010	
44.		Residential Mortgages - All Other		X X X	X X X		0.0013		0.0030		0.0040	
45.		Commercial Mortgages - Insured or Guaranteed			X X X		0.0003		0.0006		0.0010	
		Overdue, Not in Process Affiliated:										
46.		Farm Mortgages			X X X		0.0420		0.0760		0.1200	
47.		Residential Mortgages - Insured or Guaranteed			X X X		0.0005		0.0012		0.0020	
48.		Residential Mortgages - All Other			X X X		0.0025		0.0058		0.0090	
49.		Commercial Mortgages - Insured or Guaranteed			X X X		0.0005		0.0012		0.0020	
50.		Commercial Mortgages - All Other			X X X		0.0420		0.0760		0.1200	
		In Process of Foreclosure Affiliated:										
51.		Farm Mortgages			X X X		0.0000		0.1700		0.1700	
52.		Residential Mortgages - Insured or Guaranteed			X X X		0.0000		0.0040		0.0040	
53.		Residential Mortgages - All Other			X X X		0.0000		0.0130		0.0130	
54.		Commercial Mortgages - Insured or Guaranteed			X X X		0.0000		0.0040		0.0040	
55.		Commercial Mortgages - All Other			X X X		0.0000		0.1700		0.1700	
56.		Total Affiliated (Sum of Lines 38 through 55)			X X X		X X X		X X X		X X X	
57.		Unaffiliated - In Good Standing With Covenants			X X X		(c)		(c)		(c)	
58.		Unaffiliated - In Good Standing Defeased With Government Securities			X X X		0.0010		0.0050		0.0065	
59.		Unaffiliated - In Good Standing Primarily Senior			X X X		0.0035		0.0100		0.0130	
60.		Unaffiliated - In Good Standing All Other			X X X		0.0060		0.0175		0.0225	
61.		Unaffiliated - Overdue, Not in Process			X X X		0.0420		0.0760		0.1200	
62.		Unaffiliated - In Process of Foreclosure			X X X		0.0000		0.1700		0.1700	
63.		Total Unaffiliated (Sum of Lines 57 through 62)			X X X		X X X		X X X		X X X	
64.		TOTAL with Mortgage Loan Characteristics (Sum of Lines 56 + 63)			X X X		X X X		X X X		X X X	

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

Line Number	NAIC Designation	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 (Columns 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Columns 4 x 5)	Factor	Amount (Columns 4 x 7)	Factor	Amount (Columns 4 x 9)
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK												
65.		Unaffiliated Public		X X X	X X X		0.0000		(a)		(a)	
66.		Unaffiliated Private		X X X	X X X		0.0000		0.1600		0.1600	
67.		Affiliated Life with AVR		X X X	X X X		0.0000		0.0000		0.0000	
68.		Affiliated Certain Other (See SVO Purposes and Procedures Manual)		X X X	X X X		0.0000		0.1300		0.1300	
69.		Affiliated Other - All Other		X X X	X X X		0.0000		0.1600		0.1600	
70.		TOTAL with Common Stock Characteristics (Sum of Lines 65 through 69)		X X X	X X X		X X X		X X X		X X X	
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE												
71.		Home Office Property (General Account Only)					0.0000		0.0750		0.0750	
72.		Investment Properties					0.0000		0.0750		0.0750	
73.		Properties Acquired in Satisfaction of Debt					0.0000		0.1100		0.1100	
74.		TOTAL with Real Estate Characteristics (Sum of Lines 71 through 73)					X X X		X X X		X X X	
LOW INCOME HOUSING TAX CREDIT INVESTMENTS												
75.		Guaranteed Federal Low Income Housing Tax Credit					0.0003		0.0006		0.0010	
76.		Non-guaranteed Federal Low Income Housing Tax Credit					0.0063		0.0120		0.0190	
77.		Guaranteed State Low Income Housing Tax Credit					0.0003		0.0006		0.0010	
78.		Non-guaranteed State Low Income Housing Tax Credit					0.0063		0.0120		0.0190	
79.		All Other Low Income Housing Tax Credit					0.0273		0.0600		0.0975	
80.		TOTAL LIHTC (Sum of Lines 75 through 79)					X X X		X X X		X X X	
ALL OTHER INVESTMENTS												
81.		NAIC 1 Working Capital Finance Investments		X X X			0.0000		0.0037		0.0037	
82.		NAIC 2 Working Capital Finance Investments		X X X			0.0000		0.0120		0.0120	
83.		Other Invested Assets - Schedule BA		X X X			0.0000		0.1300		0.1300	
84.		Other Short-Term Invested Assets - Schedule DA		X X X			0.0000		0.1300		0.1300	
85.		TOTAL All Other (Sum of Lines 81, 82, 83 and 84)		X X X			X X X		X X X		X X X	
86.		TOTAL Other Invested Assets - Schedules BA & DA (Sum of Lines 29, 37, 64, 70, 74, 80 and 85)					X X X		X X X		X X X	

(a) Times the company's weighted average portfolio beta (Minimum .10, Maximum .20).
(b) Determined using same factors and breakdowns used for directly owned real estate.
(c) This will be the factor associated with the risk category determined in the company generated worksheet.

35 Asset Valuation Reserve - Replications NONE

36 Schedule F NONE

37 Schedule H Part 1 A & H Exhibit NONE

38 Schedule H Parts 2, 3 & 4 - A & H Exh Cont NONE

39 Schedule H Part 5 Health Claims NONE

40 Schedule S - Part 1 - Section 1 NONE

41 Schedule S - Part 1 - Section 2 NONE

SCHEDULE S - PART 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 Unpaid Losses
Life and Annuity - Non-Affiliates - U.S. Non-Affiliates						
68136	63-0169720 ...	04/01/1997	PROTECTIVE LIFE INS CO	TN .....	.....	70,000
0899999 Subtotal - Life and Annuity - Non-Affiliates - U.S. Non-Affiliates .....					.....	70,000
1099999 Total - Life and Annuity - Non-Affiliates .....					.....	70,000
1199999 Total - Life and Annuity .....					.....	70,000
1499999 Subtotal - Accident and Health - Affiliates - U.S. - Total .....					.....	.....
2299999 Total - Accident and Health .....					.....	.....
2399999 Total U.S. (Sum of 0399999, 0899999, 1499999 and 1999999) .....					.....	70,000
2499999 Total Non-U.S. (Sum of 0699999, 0999999, 1799999 and 2099999) .....					.....	.....
9999999 Total (Sum of 1199999 and 2299999) .....					.....	70,000

SCHEDULE S - PART 3 - SECTION 1

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 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		
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates														
68136	63-0169720	04/01/1997	PROTECTIVE LIFE INS CO	TN	CO/I	OL	95,747,351	20,901,858	21,823,523	981,454				
0899999 Subtotal - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates							95,747,351	20,901,858	21,823,523	981,454				
1099999 Total - General Account - Authorized - Non-Affiliates							95,747,351	20,901,858	21,823,523	981,454				
1199999 Total - General Account - Authorized							95,747,351	20,901,858	21,823,523	981,454				
1499999 Subtotal - General Account - Unauthorized - Affiliates - U.S. - Total														
2299999 Total - General Account - Unauthorized														
2599999 Subtotal - General Account - Certified - Affiliates - U.S. - Total														
3399999 Total - General Account - Certified														
3499999 Total - General Account - Authorized, Unauthorized and Certified							95,747,351	20,901,858	21,823,523	981,454				
3799999 Subtotal - Separate Accounts - Authorized - Affiliates - U.S. - Total														
4599999 Total - Separate Accounts - Authorized														
4899999 Subtotal - Separate Accounts - Unauthorized - Affiliates - U.S. - Total														
5699999 Total - Separate Accounts - Unauthorized														
5999999 Subtotal - Separate Accounts - Certified - Affiliates - U.S. - Total														
6699999 Total - Separate Accounts - Certified - Non-Affiliates														
6799999 Total - Separate Accounts - Certified														
6899999 Total - Separate Accounts - Authorized, Unauthorized and Certified														
6999999 Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3799999, 4299999, 4899999, 5399999, 5999999 and 6499999)							95,747,351	20,901,858	21,823,523	981,454				
7099999 Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 4099999, 4399999, 5199999, 5499999, 6299999 and 6599999)														
9999999 Total (Sum of 3499999 and 6899999)							95,747,351	20,901,858	21,823,523	981,454				

SCHEDULE S - PART 3 - SECTION 2

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

1	2	3	4	5	6	7	8	9	10	Outstanding Surplus Relief		13	14
										11	12		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type	Type of Business Ceded	Premiums	Unearned Premiums (Estimated)	Reserve Credit Taken Other than for Unearned Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates													
68136	63-0169720	04/01/1997	PROTECTIVE LIFE INS CO	TN	CO/I		1,402						
0899999 Subtotal - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates							1,402						
1099999 Total - General Account - Authorized - Non-Affiliates							1,402						
1199999 Total - General Account Authorized							1,402						
1499999 Subtotal - General Account - Unauthorized - Affiliates - U.S. - Total													
2299999 Total - General Account - Unauthorized													
2599999 Subtotal - General Account - Certified - Affiliates - U.S. - Total													
3399999 Total - General Account - Certified													
3499999 Total - General Account - Authorized, Unauthorized and Certified							1,402						
3799999 Subtotal - Separate Accounts - Authorized - Affiliates - U.S. - Total													
4599999 Total - Separate Accounts - Authorized													
4899999 Subtotal - Separate Accounts - Unauthorized - Affiliates - U.S. - Total													
5699999 Total - Separate Accounts - Unauthorized													
5999999 Subtotal - Separate Accounts - Certified - Affiliates - U.S. - Total													
6699999 Total - Separate Accounts - Certified - Non-Affiliates													
6799999 Total - Separate Accounts - Certified													
6899999 Total - Separate Accounts - Authorized, Unauthorized and Certified													
6999999 Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599993, 3099999, 3799999, 4299999, 4899999, 5399999, 5999999 and 6499999)							1,402						
7099999 Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 4099999, 4399999, 5199999, 5499999, 6299999 and 6599999)													
9999999 Total (Sum of 3499999 and 6899999)							1,402						

45 Schedule S - Part 4 NONE

46 Schedule S - Part 5 NONE

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

	1 2014	2 2013	3 2012	4 2011	5 2010
A. OPERATIONS ITEMS:					
1. Premiums and annuity considerations for life and accident and health contracts	983	1,175	1,366	1,054	1,110
2. Commissions and reinsurance expense allowances					
3. Contract claims	457	1,215	147	(31)	143
4. Surrender benefits and withdrawals for life contracts					
5. Dividends to policyholders					
6. Reserve adjustments on reinsurance ceded					
7. Increase in aggregate reserves for life and accident and health contracts	(690)	(567)	(924)	(1,253)	(825)
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	20,902	21,592	22,680	23,604	24,857
10. Liability for deposit-type contracts					
11. Contract claims unpaid	70	188	147	135	166
12. Amounts recoverable on reinsurance					
13. Experience rating refunds due or unpaid					
14. Policyholders' dividends (not included in Line 10)					
15. Commissions and reinsurance expense allowances due					
16. Unauthorized reinsurance offset					
17. Offset for reinsurance with Certified Reinsurers				X X X	X X X
C. UNAUTHORIZED REINSURANCE					
(Deposits By and Funds Withheld From)					
18. Funds deposited by and withheld from (F)					
19. Letters of credit (L)					
20. Trust agreements (T)					
21. Other (O)					
D. REINSURANCE WITH CERTIFIED REINSURERS					
(Deposits By and Funds Withheld From)					
22. Multiple Beneficiary Trust				X X X	X X X
23. Funds deposited by and withheld from (F)				X X X	X X X
24. Letters of credit (L)				X X X	X X X
25. Trust agreements (T)				X X X	X X X
26. Other (O)				X X X	X X X

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, Column 3)			
1. Cash and invested assets (Line 12)	18,524,606		18,524,606
2. Reinsurance (Line 16)			
3. Premiums and considerations (Line 15)			
4. Net credit for ceded reinsurance	X X X		
5. All other admitted assets (balance)	28,122,701		28,122,701
6. TOTAL Assets excluding Separate Accounts (Line 26)	46,647,307		46,647,307
7. Separate Account assets (Line 27)			
8. TOTAL Assets (Line 28)	46,647,307		46,647,307
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9. Contract reserves (Lines 1 and 2)	0		0
10. Liability for deposit-type contracts (Line 3)			
11. Claim reserves (Line 4)			
12. Policyholder dividends/reserves (Lines 5 through 7)			
13. Premium & annuity considerations received in advance (Line 8) .			
14. Other contract liabilities (Line 9)	143,733		143,733
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount)			
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount)			
17. Reinsurance with Certified Reinsurers (Line 24.02 inset amount)			
18. Funds held under reinsurance treaties with Certified Reinsurers (Line 24.03 inset amount)			
19. All other liabilities (balance)	34,349,989		34,349,989
20. TOTAL Liabilities excluding Separate Accounts (Line 26)	34,493,722		34,493,722
21. Separate Account liabilities (Line 27)			
22. TOTAL Liabilities (Line 28)	34,493,722		34,493,722
23. Capital & surplus (Line 38)	12,153,585	X X X	12,153,585
24. TOTAL Liabilities, capital and surplus (Line 39)	46,647,307		46,647,307
NET CREDIT FOR CEDED REINSURANCE			
25. Contract reserves			
26. Claim reserves			
27. Policyholder dividends/reserves			
28. Premium & annuity considerations received in advance			
29. Liability for deposit-type contracts			
30. Other contract liabilities			
31. Reinsurance ceded assets			
32. Other ceded reinsurance recoverables			
33. TOTAL Ceded reinsurance recoverables			
34. Premiums and considerations			
35. Reinsurance in unauthorized companies			
36. Funds held under reinsurance treaties with unauthorized reinsurers			
37. Reinsurance with Certified Reinsurers			
38. Funds held under reinsurance treaties with certified reinsurers ...			
39. Other ceded reinsurance payables/offsets			
40. TOTAL Ceded reinsurance payable/offsets			
41. TOTAL Net credit for ceded reinsurance			

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

Direct Business only							
		1	2	3	4	5	6
		Life	Annuities	Disability	Long-Term		
		(Group and	(Group and	Income	Care		
		Individual)	Individual)	(Group and	(Group and	Deposit-Type	
	States, Etc.			Individual)	Individual)	Contracts	Totals
1.	Alabama (AL)	5,469					5,469
2.	Alaska (AK)						
3.	Arizona (AZ)	34,023					34,023
4.	Arkansas (AR)	2,063					2,063
5.	California (CA)	137,253	1,133				138,386
6.	Colorado (CO)	21,831					21,831
7.	Connecticut (CT)	5,914					5,914
8.	Delaware (DE)	600					600
9.	District of Columbia (DC)						
10.	Florida (FL)	40,132	770				40,902
11.	Georgia (GA)	10,604					10,604
12.	Hawaii (HI)	2,614					2,614
13.	Idaho (ID)	2,321					2,321
14.	Illinois (IL)	11,986					11,986
15.	Indiana (IN)	17,777					17,777
16.	Iowa (IA)	4,616					4,616
17.	Kansas (KS)	3,901					3,901
18.	Kentucky (KY)	49,780					49,780
19.	Louisiana (LA)	14,692					14,692
20.	Maine (ME)	65					65
21.	Maryland (MD)	1,613					1,613
22.	Massachusetts (MA)	520					520
23.	Michigan (MI)	22,079					22,079
24.	Minnesota (MN)	1,933	60,000				61,933
25.	Mississippi (MS)	5,355					5,355
26.	Missouri (MO)	1,749	5,134				6,883
27.	Montana (MT)						
28.	Nebraska (NE)	1,574					1,574
29.	Nevada (NV)	5,677					5,677
30.	New Hampshire (NH)	524					524
31.	New Jersey (NJ)	381					381
32.	New Mexico (NM)	1,955					1,955
33.	New York (NY)	406					406
34.	North Carolina (NC)	19,423					19,423
35.	North Dakota (ND)	353					353
36.	Ohio (OH)	335,860	27,396				363,256
37.	Oklahoma (OK)	1,540					1,540
38.	Oregon (OR)	559					559
39.	Pennsylvania (PA)	2,624					2,624
40.	Rhode Island (RI)						
41.	South Carolina (SC)	8,533					8,533
42.	South Dakota (SD)	746					746
43.	Tennessee (TN)	28,976					28,976
44.	Texas (TX)	31,519					31,519
45.	Utah (UT)	2,200					2,200
46.	Vermont (VT)						
47.	Virginia (VA)	26,218	311				26,529
48.	Washington (WA)	4,134					4,134
49.	West Virginia (WV)	4,556					4,556
50.	Wisconsin (WI)	4,796					4,796
51.	Wyoming (WY)						
52.	American Samoa (AS)						
53.	Guam (GU)						
54.	Puerto Rico (PR)						
55.	U.S. Virgin Islands (VI)						
56.	Northern Mariana Islands (MP)						
57.	Canada (CAN)						
58.	Aggregate other alien (OT)						
59.	TOTALS	881,444	94,744				976,188

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Comp- any Code	ID Number	FEDERAL RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Name of Parent, Subsidiaries or Affiliates	Domic- iliary Loca- tion	Rela- tion- ship to Report- ing Entity	Directly Controlled by (Name of Entity / Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	*
52	4771	00000	98-0167449		0001363851	Nasdaq, Tsx	Catamaran Corporation	CA	UIP	Catamaran Corporation	Ownership	100.0	Catamaran Corporation	
		00000	75-2578509				Catamaran Inc.	TX	UIP	Catamaran Corporation	Ownership	100.0	Catamaran Corporation	
		00000	11-2581812				Catamaran PBM of Illinois, Inc.	DE	NIA	Catamaran Inc.	Ownership	100.0	Catamaran Corporation	
		00000	11-3647935				NMHC RX Mail Order, Inc.	DE	NIA	Catamaran PBM of Illinois, Inc.	Ownership	100.0	Catamaran Corporation	
		00000	20-2719823				SaveDirectRx, Inc.	TX	NIA	NMHC RX Mail Order, Inc.	Ownership	100.0	Catamaran Corporation	
		00000	01-0516051				BriovaRx of Maine, Inc.	ME	NIA	Catamaran PBM of Illinois, Inc.	Ownership	100.0	Catamaran Corporation	
		00000	55-0824381				BriovaRx, LLC	AL	NIA	BriovaRx of Maine, Inc.	Ownership	100.0	Catamaran Corporation	
		00000	26-3878957				AssuranceRx, LLC	AL	NIA	BriovaRx of Maine, Inc.	Ownership	100.0	Catamaran Corporation	
		00000	27-1930321				BriovaRx of Georgia, LLC	AL	NIA	BriovaRx, LLC	Ownership	100.0	Catamaran Corporation	
		00000	73-1730988				Bayou State Pharmacy, LLC	LA	NIA	BriovaRx, LLC	Ownership	100.0	Catamaran Corporation	
		12630	74-3166208				Catamaran Insurance of Delaware, Inc.	DE	IA	Catamaran PBM of Illinois, Inc.	Ownership	100.0	Catamaran Corporation	
		00000	01-0487320				Portland Professional Pharmacy	ME	NIA	Catamaran PBM of Illinois, Inc.	Ownership	100.0	Catamaran Corporation	
		00000	20-2447772				PCN DE Corp.	DE	NIA	Catamaran PBM of Illinois, Inc.	Ownership	100.0	Catamaran Corporation	
		00000	68-0044962				Pharmaceutical Care Network	CA	NIA	PCN DE Corp.	Ownership	100.0	Catamaran Corporation	
		00000	14-1799106				Catamaran IPA, Inc.	NY	NIA	Catamaran PBM of Illinois, Inc.	Ownership	100.0	Catamaran Corporation	
		00000	27-2348504				BriovaRx of Hawaii, LLC	HI	NIA	Catamaran PBM of Illinois, Inc.	Ownership	100.0	Catamaran Corporation	
		00000	27-3331130				BriovaRx of Massachusetts, LLC	MA	NIA	Catamaran PBM of Illinois, Inc.	Ownership	100.0	Catamaran Corporation	
		00000	45-2532834				BriovaRx of Nevada, LLC	NV	NIA	Catamaran PBM of Illinois, Inc.	Ownership	100.0	Catamaran Corporation	
		00000	20-3233533				Catamaran PBM of Texas, Inc.	TX	NIA	Catamaran PBM of Illinois, Inc.	Ownership	100.0	Catamaran Corporation	
		00000	31-1728846				Catamaran PBM of Colorado, LLC	DE	NIA	Catamaran PBM of Illinois, Inc.	Ownership	100.0	Catamaran Corporation	
		00000	20-4467352				HT Three, LLC	CO	NIA	Catamaran PBM of Colorado, LLC	Ownership	100.0	Catamaran Corporation	
		00000	45-3304915				Catamaran Access, LLC	CO	NIA	Catamaran PBM of Colorado, LLC	Ownership	100.0	Catamaran Corporation	
		00000	61-1651797				Catamaran PBM of Massachusetts, Inc.	CO	NIA	Catamaran PBM of Illinois, Inc.	Ownership	100.0	Catamaran Corporation	
		00000	90-0434375				SXC Comet LLC	DE	NIA	Catamaran Inc.	Ownership	100.0	Catamaran Corporation	
		00000	01-0930154				SXC Acquisition Corp	DE	NIA	Catamaran Inc.	Ownership	100.0	Catamaran Corporation	
		00000	01-0930154				Catamaran TPA, LLC	DE	NIA	Catamaran Inc.	Ownership	100.0	Catamaran Corporation	
		00000	46-0666840				IRX Financing I LLC	DE	NIA	Catamaran Inc.	Ownership	100.0	Catamaran Corporation	
		00000	75-3229286				Catamaran Health Solutions, LLC	DE	UIP	Catamaran Inc.	Ownership	100.0	Catamaran Corporation	
		00000	20-0212381				Catamaran IPA II, Inc.	NY	NIA	Catamaran Inc.	Ownership	100.0	Catamaran Corporation	
		00000	26-0543382				Catamaran Hospice Services, LLC	DE	NIA	Catamaran Health Solutions, LLC	Ownership	100.0	Catamaran Corporation	
		00000	88-0482274				Catamaran Senior Services, LLC	AL	NIA	Catamaran Hospice Services, LLC	Ownership	100.0	Catamaran Corporation	
		00000	88-0373347				InPharmative, Inc.	NV	NIA	Catamaran Health Solutions, LLC	Ownership	100.0	Catamaran Corporation	
		00000	88-0361447				Catalyst Consultants	NV	NIA	Catamaran Health Solutions, LLC	Ownership	100.0	Catamaran Corporation	
		00000	27-4130133				Catamaran PBM of Maryland, Inc.	NV	UDP	Catamaran Health Solutions, LLC	Ownership	100.0	Catamaran Corporation	
		00000					HealthExtras, LLC	DE	NIA	Catamaran PBM of Maryland, Inc.	Ownership	100.0	Catamaran Corporation	

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

52.1

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Comp- any Code	ID Number	FEDERAL RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Name of Parent, Subsidiaries or Affiliates	Domic- iliary Loca- tion	Rela- ship to Report- ing Entity	Directly Controlled by (Name of Entity / Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	*
4771		00000	36-4049815				Catamaran PBM of Illinois II, Inc.	IL	NIA	Catamaran PBM of Maryland, Inc.	Ownership	100.0	Catamaran Corporation	
		00000	20-0218027				Catamaran IPA III, Inc.	NY	NIA	Catamaran PBM of Illinois II, Inc.	Ownership	100.0	Catamaran Corporation	
		00000	26-3633484				Catamaran Rebate Management, Inc.	NV	NIA	Catamaran PBM of Maryland, Inc.	Ownership	100.0	Catamaran Corporation	
		00000	61-1485410				Catamaran PD of Maryland, Inc.	NV	NIA	Catamaran PBM of Maryland, Inc.	Ownership	100.0	Catamaran Corporation	
		00000	26-1424534				Catamaran PBM of Puerto Rico, LLC	NV	NIA	Catamaran PBM of Maryland, Inc.	Ownership	100.0	Catamaran Corporation	
		00000	26-1438879				Catamaran PD of Puerto Rico, LLC	NV	NIA	Catamaran PBM of Maryland, Inc.	Ownership	100.0	Catamaran Corporation	
		00000	27-4131015				Catalyst Plan Services, Inc.	MI	NIA	Catamaran PBM of Maryland, Inc.	Ownership	100.0	Catamaran Corporation	
		69647	31-0628424				Catamaran Insurance of Ohio, Inc.	OH	UDP	Catamaran PBM of Maryland, Inc.	Ownership	100.0	Catamaran Corporation	
		00000	27-3419292				Catamaran of Pennsylvania, LLC	DE	NIA	Catamaran Health Solutions, LLC	Ownership	100.0	Catamaran Corporation	
		00000	03-0592263				Catamaran PBM of Pennsylvania, LLC	PA	NIA	Catamaran of Pennsylvania, LLC	Ownership	100.0	Catamaran Corporation	
		00000	16-1767416				Catamaran PD of Pennsylvania, LLC	PA	NIA	Catamaran of Pennsylvania, LLC	Ownership	100.0	Catamaran Corporation	
		00000	27-1193028				Coalition for Advanced Pharmacy Services, LLC	DE	NIA	Catamaran Health Solutions, LLC	Ownership	100.0	Catamaran Corporation	
		00000	26-4106571				First Rx Specialty & Mail Services, LLC	DE	NIA	Catamaran Health Solutions, LLC	Ownership	100.0	Catamaran Corporation	
		00000	34-1472211				Immediate Pharmaceutical Services, Inc.	OH	NIA	First Rx Specialty & Mail Services, LLC	Ownership	100.0	Catamaran Corporation	
		00000	27-4241298				Catamaran Mail, LLC	DE	NIA	Catamaran Health Solutions, LLC	Ownership	100.0	Catamaran Corporation	

Asterisk	Explanation
0000001	

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/(Disburse- ments) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
9999999 Control Totals	X X X	.....	.....	.....

Schedule Y Part 2 Explanation:

SUPPLEMENTAL EXHIBITS AND SCHEDULES
INTERROGATORIES

	Response
The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.	
MARCH FILING	
1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	Yes
2. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	Yes
3. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	Yes
4. Will an Actuarial opinion be filed by March 1?	Yes
APRIL FILING	
5. Will Management's Discussion and Analysis be filed by April 1?	Yes
6. Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1?	Yes
7. Will the Adjustment Form (if required) be filed with the state of domicile and the NAIC by April 1?	Yes
8. Will the Supplemental Investment Risks Interrogatories be filed by April 1?	Yes
JUNE FILING	
9. Will an audited financial report be filed by June 1?	Yes
10. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	Yes
AUGUST FILING	
11. Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1?	Yes
The following supplemental reports are required to be filed as part of your annual statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but it is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.	
MARCH FILING	
12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	No
13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	No
14. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	No
15. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	No
16. Will the actuarial opinion on non-guaranteed elements as required in Interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	Yes
17. Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?	No
18. Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1?	No
19. Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1?	No
20. Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	No
21. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	No
22. Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1?	No
23. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	No
24. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	No
25. Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?	No
26. Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?	No
27. Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1?	No
28. Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1?	No
29. Will the Actuarial Certification Related to Hedging required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	No
30. Will the Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	No
31. Will the Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	No
32. Will the Actuarial Certification Related to the Reserves required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	No
33. Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1?	No
34. Will the Workers' Compensation Carve-Out Supplement be filed by March 1?	No
35. Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1?	No
36. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	No
37. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	No
38. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	No
39. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	No
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?	No
APRIL FILING	
41. Will the Long-Term Care Experience Reporting Forms be file with the state of domicile and the NAIC by April 1?	No
42. Will the Interest Sensitive Life Insurance Products Report Forms be filed with the state of domicile and the NAIC by April 1?	No
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?	No
45. Will the Analysis of Annuity Operations by Line of Business be filed with the state of domicile and the NAIC by April 1?	No
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?	No
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?

No

Explanations:

Bar Codes:

Schedule SIS



Medicare Supplement Insurance Experience Exhibit



Trusted Surplus Statement



Actuarial Opinion on Participating and Non-Participating Policies



Actuarial Opinion on X-Factors



Separate Accounts Funding Guaranteed Minimum Benefits Actuarial Opinion



Synthetic Guaranteed Investment Contracts Actuarial Opinion



Reasonableness 1 - Assumptions



Reasonableness 2 - Consistency



Reasonableness 3 - Implied Guarantee



Reasonableness 4 - Ave. Market Value



Reasonableness 5 - Market Value



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



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



Actuarial Certifications related to Annuity Nonforeiture Ongoing Compliance



Actuarial Opion required by the Modified Guaranteed Annuity Model Reg



Act Cert Rel to Hedging req by Actuarial Guideline XLIII



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



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



Act Cert Related to the Reserves required by Actuarial Guideling XLIII



Actuarial Certification regarding the use of 2001 Preferred Class Tables



Worker's Compensation Carve-out Supplement



Supplemental Schedule O



Medicare Part D Coverage Supplement



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



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



Approval for Relief related to Require. for Audit Committees



Regulatory Asset Adequacy Issues Summary (RAAIS)



LTC Supplemental Interrogatorries



Interest Sensitive Life Insurance Products Report



SUPPLEMENTAL EXHIBITS AND SCHEDULES
INTERROGATORIES (continued)

Credit Insurance Exhibit



69647201423000000 2014 Document Code: 230

Accident and Health Policy Experience Exhibit



69647201421000000 2014 Document Code: 210

Analysis of Annuity Operations by Lines of Business



69647201451000000 2014 Document Code: 510

Analysis of Increase in Annuity Reserves During the Year



69647201451500000 2014 Document Code: 515

Supplemental Health Care Exhibit



69647201421600000 2014 Document Code: 216

Supplemental Health Care Exhibit's Expense Allocation Report



69647201421700000 2014 Document Code: 217

Actuarial Memo. req. by Actuarial Guideline XXXVIII 8D



69647201443500010 2014 Document Code: 435

Supplemental XXX/AXXX Reinsurance Exhibit



69647201434500000 2014 Document Code: 345

Management's Report of Internal Control over Financial Reporting



69647201422300000 2014 Document Code: 223

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N O N E

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