LIFE AND ACCIDENT AND HEALTH COMPANIES - ASSOCIATION EDITION

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ANNUAL STATEMENT

For the Year Ended December 31, 2014

of the Condition and Affairs of the

OHIO NATIONAL LIFE ASSURANCE CORPORATION

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

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

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

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

OFFICERS

Name	Title	Name	Title
Gary Thomas Huffman	President, Chairman & Chief Executive Officer	Therese Susan McDonough	Secretary
Joseph Richard Sander	Treasurer	Peter Edward Whipple #	Senior Vice President & Chief Corporate Actuary

OTHER

Thomas Abdo Barefield #	Vice Chairman & Chief Distribution Officer	Howard Charles Becker	Executive Vice President & Chief Administrative Officer
Christopher Allen Carlson #	Vice Chairman & Chief Investment Officer	Ronald John Dolan #	Vice Chairman & Chief Risk Officer
Kristal Elaine Hambrick	Executive Vice President & Chief Product Officer	Arthur James Roberts	Senior Vice President & Chief Financial Officer
Dennis Lee Schoff #	Senior Vice President & General Counsel, Assistant Secretary	Barbara Ann Turner #	Senior Vice President & Chief Compliance Officer

DIRECTORS OR TRUSTEES

Thomas Abdo Barefield
Ronald John Dolan
Gary Thomas Huffman

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

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

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

Subscribed and sworn to before me
This _____ day of February, 2015

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

Roxanna S Henry, Notary Public
May 11, 2019

DIRECT BUSINESS IN Other Alien # 1 DURING THE YEAR

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

LIFE INSURANCE

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

NONE

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

NONE

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF ALASKA DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	101,932				101,932
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	101,932	0	0	0	101,932
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					0
10.	Matured endowments					0
11.	Annuity benefits					0
12.	Surrender values and withdrawals for life contracts	17,629				17,629
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	17,629	0	0	0	17,629
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year									0	0
17.	Incurred during current year									0	0
	Settled during current year:										
18.1	By payment in full									0	0
18.2	By payment on compromised claims									0	0
18.3	Totals paid	0	0	0	0	0	0	0	0	0	0
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	0	0	0	0	0	0	0	0	0	0
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	42	18,447,500		(a)					42	18,447,500
21.	Issued during year	1	1,000,000							1	1,000,000
22.	Other changes to in force (Net)	(4)	(650,000)							(4)	(650,000)
23.	In force December 31 of current year	39	18,797,500	0	(a) 0	0	0	0	0	39	18,797,500

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)					
24.1	Federal Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	5,368	5,364			
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)	5,368	5,364	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	5,368	5,364	0	0	0

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

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DIRECT BUSINESS IN THE STATE OF ALABAMA DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	10,466,803				10,466,803
2.	Annuity considerations	240				240
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	10,467,043	0	0	0	10,467,043
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	7,054,855				7,054,855
10.	Matured endowments					0
11.	Annuity benefits	99,404				99,404
12.	Surrender values and withdrawals for life contracts	740,818				740,818
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	7,895,077	0	0	0	7,895,077
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	6	1,408,927							6	1,408,927
17.	Incurred during current year	13	7,083,389							13	7,083,389
	Settled during current year:										
18.1	By payment in full	13	6,733,379							13	6,733,379
18.2	By payment on compromised claims									0	0
18.3	Totals paid	13	6,733,379	0	0	0	0	0	0	13	6,733,379
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	13	6,733,379	0	0	0	0	0	0	13	6,733,379
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	6	1,758,937	0	0	0	0	0	0	6	1,758,937
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	3,362	1,879,648,980		(a)					3,362	1,879,648,980
21.	Issued during year	306	216,587,104							306	216,587,104
22.	Other changes to in force (Net)	(266)	(130,660,446)							(266)	(130,660,446)
23.	In force December 31 of current year	3,402	1,965,575,638	0	(a) 0	0	0	0	0	3,402	1,965,575,638

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	314,513	314,275		438,535	340,711
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)	8,516	8,509		216,000	216,000
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	323,029	322,784	0	654,535	556,711
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	323,029	322,784	0	654,535	556,711

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

DIRECT BUSINESS IN THE STATE OF ARKANSAS DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	7,681,170				7,681,170
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	7,681,170	0	0	0	7,681,170
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,618,597				1,618,597
10.	Matured endowments					0
11.	Annuity benefits	1,068				1,068
12.	Surrender values and withdrawals for life contracts	379,157				379,157
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	1,998,822	0	0	0	1,998,822
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	25,000							1	25,000
17.	Incurred during current year	5	406,995							5	406,995
	Settled during current year:										
18.1	By payment in full	5	343,597							5	343,597
18.2	By payment on compromised claims									0	0
18.3	Totals paid	5	343,597	0	0	0	0	0	0	5	343,597
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	5	343,597	0	0	0	0	0	0	5	343,597
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	88,398	0	0	0	0	0	0	1	88,398
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	2,467	1,240,900,139		(a)					2,467	1,240,900,139
21.	Issued during year	293	172,122,729							293	172,122,729
22.	Other changes to in force (Net)	(178)	(110,299,597)							(178)	(110,299,597)
23.	In force December 31 of current year	2,582	1,302,723,271	0	(a) 0	0	0	0	0	2,582	1,302,723,271

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	83,738	83,675		40,800	40,800
25.2	Guaranteed renewable (b)	3,755	3,753			
25.3	Non-renewable for stated reasons only (b)	1,160	1,159			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	88,653	88,587	0	40,800	40,800
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	88,653	88,587	0	40,800	40,800

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

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DIRECT BUSINESS IN AMERICAN SAMOA DURING THE YEAR

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

LIFE INSURANCE

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

NONE

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

NONE

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

DIRECT BUSINESS IN THE STATE OF ARIZONA DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	9,103,861				9,103,861
2.	Annuity considerations	360				360
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	9,104,221	0	0	0	9,104,221
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,840,000				1,840,000
10.	Matured endowments					0
11.	Annuity benefits	17,483				17,483
12.	Surrender values and withdrawals for life contracts	505,080				505,080
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	2,362,563	0	0	0	2,362,563
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year		(0)							0	(0)
17.	Incurred during current year	9	1,671,984							9	1,671,984
	Settled during current year:										
18.1	By payment in full	8	1,661,984							8	1,661,984
18.2	By payment on compromised claims									0	0
18.3	Totals paid	8	1,661,984	0	0	0	0	0	0	8	1,661,984
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	8	1,661,984	0	0	0	0	0	0	8	1,661,984
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	10,000	0	0	0	0	0	0	1	10,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	3,568	2,330,857,705		(a)					3,568	2,330,857,705
21.	Issued during year	414	320,292,144							414	320,292,144
22.	Other changes to in force (Net)	(224)	(132,210,148)							(224)	(132,210,148)
23.	In force December 31 of current year	3,758	2,518,939,701	0	(a) 0	0	0	0	0	3,758	2,518,939,701

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	117,689	117,600		65,688	61,826
25.2	Guaranteed renewable (b)	8,159	8,153			
25.3	Non-renewable for stated reasons only (b)	7,848	7,842			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	133,696	133,595	0	65,688	61,826
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	133,696	133,595	0	65,688	61,826

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

DIRECT BUSINESS IN THE STATE OF CALIFORNIA DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	57,502,981				57,502,981
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	57,502,981	0	0	0	57,502,981
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	15,523,497				15,523,497
10.	Matured endowments					0
11.	Annuity benefits	54,164				54,164
12.	Surrender values and withdrawals for life contracts	9,918,957				9,918,957
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	25,496,618	0	0	0	25,496,618
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	12	1,010,926							12	1,010,926
17.	Incurred during current year	47	15,429,486							47	15,429,486
	Settled during current year:										
18.1	By payment in full	41	13,354,392							41	13,354,392
18.2	By payment on compromised claims									0	0
18.3	Totals paid	41	13,354,392	0	0	0	0	0	0	41	13,354,392
18.4	Reduction by compromise	1	2,000,000							1	2,000,000
18.5	Amount rejected									0	0
18.6	Total settlements	42	15,354,392	0	0	0	0	0	0	42	15,354,392
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	17	1,086,020	0	0	0	0	0	0	17	1,086,020
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	22,134	16,227,388,379		(a)					22,134	16,227,388,379
21.	Issued during year	2,749	2,285,934,125							2,749	2,285,934,125
22.	Other changes to in force (Net)	(1,606)	(1,071,565,496)							(1,606)	(1,071,565,496)
23.	In force December 31 of current year	23,277	17,441,757,008	0	(a) 0	0	0	0	0	23,277	17,441,757,008

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	1,423,219	1,422,144		5,309,713	5,208,008
25.2	Guaranteed renewable (b)	10,233	10,225			
25.3	Non-renewable for stated reasons only (b)	30,654	30,631			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	1,464,106	1,463,000	0	5,309,713	5,208,008
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,464,106	1,463,000	0	5,309,713	5,208,008

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

DIRECT BUSINESS IN THE STATE OF CANADA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	7,808				7,808
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	7,808	0	0	0	7,808
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	0	0	0	0	0
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

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

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Plan premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)				48,000	46,400
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	0	0	0	48,000	46,400
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	0	0	0	48,000	46,400

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

DIRECT BUSINESS IN THE STATE OF COLORADO DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	16,983,766				16,983,766
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	16,983,766	0	0	0	16,983,766
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,682,860				2,682,860
10.	Matured endowments					0
11.	Annuity benefits	14,296				14,296
12.	Surrender values and withdrawals for life contracts	2,396,338				2,396,338
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	5,093,494	0	0	0	5,093,494
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	9	4,439,467							9	4,439,467
17.	Incurred during current year	10	2,882,860							10	2,882,860
	Settled during current year:										
18.1	By payment in full	13	5,427,860							13	5,427,860
18.2	By payment on compromised claims									0	0
18.3	Totals paid	13	5,427,860	0	0	0	0	0	0	13	5,427,860
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	13	5,427,860	0	0	0	0	0	0	13	5,427,860
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	6	1,894,467	0	0	0	0	0	0	6	1,894,467
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	7,070	4,302,760,122		(a)					7,070	4,302,760,122
21.	Issued during year	513	373,772,279							513	373,772,279
22.	Other changes to in force (Net)	(588)	(336,704,249)							(588)	(336,704,249)
23.	In force December 31 of current year	6,995	4,339,828,152	0	(a) 0	0	0	0	0	6,995	4,339,828,152

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	1,340,795	1,339,782		2,042,540	2,037,952
25.2	Guaranteed renewable (b)	18,515	18,501		16,805	16,805
25.3	Non-renewable for stated reasons only (b)	16,099	16,087			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	1,375,409	1,374,370	0	2,059,345	2,054,757
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,375,409	1,374,370	0	2,059,345	2,054,757

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

* 8 9 2 0 6 2 0 1 4 4 3 0 0 7 1 0 0 *

DIRECT BUSINESS IN THE STATE OF CONNECTICUT DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	6,447,671				6,447,671
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	6,447,671	0	0	0	6,447,671
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,225,359				1,225,359
10.	Matured endowments					0
11.	Annuity benefits	3,600				3,600
12.	Surrender values and withdrawals for life contracts	585,394				585,394
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	1,814,353	0	0	0	1,814,353
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	1,000,000							1	1,000,000
17.	Incurred during current year	5	1,225,359							5	1,225,359
	Settled during current year:										
18.1	By payment in full	2	327,455							2	327,455
18.2	By payment on compromised claims									0	0
18.3	Totals paid	2	327,455	0	0	0	0	0	0	2	327,455
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	2	327,455	0	0	0	0	0	0	2	327,455
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	4	1,897,904	0	0	0	0	0	0	4	1,897,904
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	3,768	2,326,840,949		(a)					3,768	2,326,840,949
21.	Issued during year	396	272,810,117							396	272,810,117
22.	Other changes to in force (Net)	(219)	(144,696,414)							(219)	(144,696,414)
23.	In force December 31 of current year	3,945	2,454,954,652	0	(a) 0	0	0	0	0	3,945	2,454,954,652

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	151,896	151,781			2,350
25.2	Guaranteed renewable (b)	20,474	20,458			
25.3	Non-renewable for stated reasons only (b)	6,403	6,398			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	178,773	178,637	0	0	2,350
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	178,773	178,637	0	0	2,350

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

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

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	740,379				740,379
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	740,379	0	0	0	740,379
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	35,000				35,000
10.	Matured endowments					0
11.	Annuity benefits	1,085				1,085
12.	Surrender values and withdrawals for life contracts	82,423				82,423
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	118,508	0	0	0	118,508
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year									0	0
17.	Incurred during current year	3	35,000							3	35,000
	Settled during current year:										
18.1	By payment in full	3	35,000							3	35,000
18.2	By payment on compromised claims									0	0
18.3	Totals paid	3	35,000	0	0	0	0	0	0	3	35,000
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	3	35,000	0	0	0	0	0	0	3	35,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	316	351,137,969		(a)					316	351,137,969
21.	Issued during year	64	76,462,500							64	76,462,500
22.	Other changes to in force (Net)	(22)	(40,221,603)							(22)	(40,221,603)
23.	In force December 31 of current year	358	387,378,866	0	(a) 0	0	0	0	0	358	387,378,866

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	43,007	42,974		9,050	9,285
25.2	Guaranteed renewable (b)					
25.3	Non-renewable for stated reasons only (b)	3,222	3,220			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	46,229	46,194	0	9,050	9,285
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	46,229	46,194	0	9,050	9,285

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

DIRECT BUSINESS IN THE STATE OF DELAWARE DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	2,602,924				2,602,924
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	2,602,924	0	0	0	2,602,924
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	125,000				125,000
10.	Matured endowments					0
11.	Annuity benefits	155				155
12.	Surrender values and withdrawals for life contracts	98,504				98,504
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	223,659	0	0	0	223,659
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year									0	0
17.	Incurred during current year	2	125,000							2	125,000
	Settled during current year:										
18.1	By payment in full	2	125,000							2	125,000
18.2	By payment on compromised claims									0	0
18.3	Totals paid	2	125,000	0	0	0	0	0	0	2	125,000
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	2	125,000	0	0	0	0	0	0	2	125,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	487	255,434,395		(a)					487	255,434,395
21.	Issued during year	73	44,074,770							73	44,074,770
22.	Other changes to in force (Net)	(17)	(2,634,925)							(17)	(2,634,925)
23.	In force December 31 of current year	543	296,874,240	0	(a) 0	0	0	0	0	543	296,874,240

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	24,583	24,565			
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)	24,583	24,565	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	24,583	24,565	0	0	0

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

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DIRECT BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	36,254,162				36,254,162
2.	Annuity considerations					0
3.	Deposit-type contract funds	730,634	XXX		XXX	730,634
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	36,984,796	0	0	0	36,984,796
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	11,130,453				11,130,453
10.	Matured endowments					0
11.	Annuity benefits	160,946				160,946
12.	Surrender values and withdrawals for life contracts	5,293,702				5,293,702
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	16,585,101	0	0	0	16,585,101
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	6	4,347,830							6	4,347,830
17.	Incurred during current year	42	10,223,609							42	10,223,609
	Settled during current year:										
18.1	By payment in full	41	10,729,426							41	10,729,426
18.2	By payment on compromised claims									0	0
18.3	Totals paid	41	10,729,426	0	0	0	0	0	0	41	10,729,426
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	41	10,729,426	0	0	0	0	0	0	41	10,729,426
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	7	3,842,013	0	0	0	0	0	0	7	3,842,013
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	15,001	8,900,662,076		(a)					15,001	8,900,662,076
21.	Issued during year	1,553	1,026,083,743							1,553	1,026,083,743
22.	Other changes to in force (Net)	(1,069)	(621,373,038)							(1,069)	(621,373,038)
23.	In force December 31 of current year	15,485	9,305,372,781	0	(a) 0	0	0	0	0	15,485	9,305,372,781

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	810,526	809,914		1,754,149	1,804,740
25.2	Guaranteed renewable (b)	11,524	11,515			
25.3	Non-renewable for stated reasons only (b)	39,115	39,085			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	861,165	860,514	0	1,754,149	1,804,740
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	861,165	860,514	0	1,754,149	1,804,740

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

DIRECT BUSINESS IN THE STATE OF GEORGIA DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	24,630,169				24,630,169
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	24,630,169	0	0	0	24,630,169
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	11,234,874				11,234,874
10.	Matured endowments					0
11.	Annuity benefits	105,488				105,488
12.	Surrender values and withdrawals for life contracts	3,280,491				3,280,491
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	14,620,853	0	0	0	14,620,853
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	5	1,195,622							5	1,195,622
17.	Incurred during current year	29	10,841,697							29	10,841,697
	Settled during current year:										
18.1	By payment in full	30	11,300,277							30	11,300,277
18.2	By payment on compromised claims									0	0
18.3	Totals paid	30	11,300,277	0	0	0	0	0	0	30	11,300,277
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	30	11,300,277	0	0	0	0	0	0	30	11,300,277
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	4	737,042	0	0	0	0	0	0	4	737,042
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	9,324	5,370,191,432		(a)					9,324	5,370,191,432
21.	Issued during year	569	444,431,324							569	444,431,324
22.	Other changes to in force (Net)	(615)	(372,171,919)							(615)	(372,171,919)
23.	In force December 31 of current year	9,278	5,442,450,837	0	(a) 0	0	0	0	0	9,278	5,442,450,837

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	368,262	367,984		494,372	501,715
25.2	Guaranteed renewable (b)	19,159	19,144			
25.3	Non-renewable for stated reasons only (b)	10,369	10,361			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	397,790	397,489	0	494,372	501,715
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	397,790	397,489	0	494,372	501,715

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

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DIRECT BUSINESS IN GRAND TOTAL DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	601,413,912				601,413,912
2.	Annuity considerations	100,815				100,815
3.	Deposit-type contract funds	2,154,699	XXX		XXX	2,154,699
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	603,669,426	0	0	0	603,669,426
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	215,016,884				215,016,884
10.	Matured endowments	13,638				13,638
11.	Annuity benefits	4,963,157				4,963,157
12.	Surrender values and withdrawals for life contracts	93,524,094				93,524,094
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	313,517,773	0	0	0	313,517,773
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	161	32,264,562							161	32,264,562
17.	Incurred during current year	784	210,439,724							784	210,439,724
	Settled during current year:										
18.1	By payment in full	762	205,205,605							762	205,205,605
18.2	By payment on compromised claims									0	0
18.3	Totals paid	762	205,205,605	0	0	0	0	0	0	762	205,205,605
18.4	Reduction by compromise	2	2,100,000							2	2,100,000
18.5	Amount rejected									0	0
18.6	Total settlements	764	207,305,605	0	0	0	0	0	0	764	207,305,605
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	181	35,398,680	0	0	0	0	0	0	181	35,398,680
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	257,050	140,476,851,107		(a)					257,050	140,476,851,107
21.	Issued during year	23,322	16,774,428,713							23,322	16,774,428,713
22.	Other changes to in force (Net)	(17,540)	(9,412,305,675)							(17,540)	(9,412,305,675)
23.	In force December 31 of current year	262,832	147,838,974,145	0	(a) 0	0	0	0	0	262,832	147,838,974,145

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	16,219,491	16,207,246		24,625,451	24,201,899
25.2	Guaranteed renewable (b)	716,596	716,056		216,869	294,394
25.3	Non-renewable for stated reasons only (b)	516,377	515,985		216,000	216,000
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	17,452,464	17,439,287	0	25,058,320	24,712,293
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	17,452,464	17,439,287	0	25,058,320	24,712,293

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

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

DIRECT BUSINESS IN GUAM DURING THE YEAR

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

LIFE INSURANCE

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

NONE

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

NONE

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

DIRECT BUSINESS IN THE STATE OF HAWAII DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	111,125				111,125
2.	Annuity considerations					0
3.	Deposit-type contract funds	61,977	XXX		XXX	61,977
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	173,102	0	0	0	173,102
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					0
10.	Matured endowments					0
11.	Annuity benefits					0
12.	Surrender values and withdrawals for life contracts	43,985				43,985
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	43,985	0	0	0	43,985
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	590,169							1	590,169
17.	Incurred during current year									0	0
	Settled during current year:										
18.1	By payment in full									0	0
18.2	By payment on compromised claims									0	0
18.3	Totals paid	0	0	0	0	0	0	0	0	0	0
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	0	0	0	0	0	0	0	0	0	0
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	590,169	0	0	0	0	0	0	1	590,169
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	70	47,675,000		(a)					70	47,675,000
21.	Issued during year	2	600,000							2	600,000
22.	Other changes to in force (Net)		(734,470)							0	(734,470)
23.	In force December 31 of current year	72	47,540,530	0	(a) 0	0	0	0	0	72	47,540,530

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	6,931	6,926		30,613	20,066
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)	6,931	6,926	0	30,613	20,066
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	6,931	6,926	0	30,613	20,066

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

DIRECT BUSINESS IN THE STATE OF IOWA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	5,743,621				5,743,621
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	5,743,621	0	0	0	5,743,621
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	2,229,005				2,229,005
10. Matured endowments					0
11. Annuity benefits	2,560				2,560
12. Surrender values and withdrawals for life contracts	3,228,239				3,228,239
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	5,459,804	0	0	0	5,459,804
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	13	798,714							13	798,714
17. Incurred during current year	25	2,221,317							25	2,221,317
Settled during current year:										
18.1 By payment in full	28	2,536,151							28	2,536,151
18.2 By payment on compromised claims									0	0
18.3 Totals paid	28	2,536,151	0	0	0	0	0	0	28	2,536,151
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	28	2,536,151	0	0	0	0	0	0	28	2,536,151
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	10	483,880	0	0	0	0	0	0	10	483,880
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	4,232	1,179,776,959		(a)					4,232	1,179,776,959
21. Issued during year	173	98,649,276							173	98,649,276
22. Other changes to in force (Net)	(293)	(128,149,297)							(293)	(128,149,297)
23. In force December 31 of current year	4,112	1,150,276,938	0	(a) 0	0	0	0	0	4,112	1,150,276,938

(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 Employee Health Benefits Plan premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	105,254	105,175		84,150	90,917
25.2 Guaranteed renewable (b)	48,864	48,827			
25.3 Non-renewable for stated reasons only (b)	1,281	1,280			
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	155,399	155,282	0	84,150	90,917
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	155,399	155,282	0	84,150	90,917

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

DIRECT BUSINESS IN THE STATE OF IDAHO DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	3,714,304				3,714,304
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	3,714,304	0	0	0	3,714,304
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,985,066				1,985,066
10.	Matured endowments					0
11.	Annuity benefits	17,500				17,500
12.	Surrender values and withdrawals for life contracts	1,622,892				1,622,892
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	3,625,458	0	0	0	3,625,458
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year		0							0	0
17.	Incurred during current year	13	1,985,066							13	1,985,066
	Settled during current year:										
18.1	By payment in full	11	1,865,066							11	1,865,066
18.2	By payment on compromised claims									0	0
18.3	Totals paid	11	1,865,066	0	0	0	0	0	0	11	1,865,066
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	11	1,865,066	0	0	0	0	0	0	11	1,865,066
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	120,000	0	0	0	0	0	0	2	120,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	3,449	1,372,977,180		(a)					3,449	1,372,977,180
21.	Issued during year	183	84,644,920							183	84,644,920
22.	Other changes to in force (Net)	(275)	(88,369,606)							(275)	(88,369,606)
23.	In force December 31 of current year	3,357	1,369,252,494	0	(a) 0	0	0	0	0	3,357	1,369,252,494

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)					
24.1	Federal Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	214,469	214,307		74,570	79,559
25.2	Guaranteed renewable (b)	21,653	21,636		24,000	24,667
25.3	Non-renewable for stated reasons only (b)	10,761	10,753			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	246,883	246,696	0	98,570	104,226
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	246,883	246,696	0	98,570	104,226

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

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DIRECT BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	27,636,274				27,636,274
2.	Annuity considerations					0
3.	Deposit-type contract funds	74,997	XXX		XXX	74,997
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	27,711,271	0	0	0	27,711,271
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	8,616,392				8,616,392
10.	Matured endowments					0
11.	Annuity benefits	291,185				291,185
12.	Surrender values and withdrawals for life contracts	7,691,828				7,691,828
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	16,599,405	0	0	0	16,599,405
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year		(0)							0	(0)
17.	Incurred during current year	29	6,656,896							29	6,656,896
	Settled during current year:										
18.1	By payment in full	29	6,656,895							29	6,656,895
18.2	By payment on compromised claims									0	0
18.3	Totals paid	29	6,656,895	0	0	0	0	0	0	29	6,656,895
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	29	6,656,895	0	0	0	0	0	0	29	6,656,895
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	8,897	4,982,481,943		(a)					8,897	4,982,481,943
21.	Issued during year	700	473,118,117							700	473,118,117
22.	Other changes to in force (Net)	(673)	(372,529,737)							(673)	(372,529,737)
23.	In force December 31 of current year	8,924	5,083,070,323	0	(a) 0	0	0	0	0	8,924	5,083,070,323

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	369,558	369,279		98,473	131,850
25.2	Guaranteed renewable (b)	26,470	26,450		21,067	21,067
25.3	Non-renewable for stated reasons only (b)	23,251	23,233			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	419,279	418,962	0	119,540	152,917
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	419,279	418,962	0	119,540	152,917

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

DIRECT BUSINESS IN THE STATE OF INDIANA DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	21,397,019				21,397,019
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	21,397,019	0	0	0	21,397,019
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,454,530				2,454,530
10.	Matured endowments					0
11.	Annuity benefits	132,816				132,816
12.	Surrender values and withdrawals for life contracts	1,576,556				1,576,556
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	4,163,902	0	0	0	4,163,902
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	7	901,704							7	901,704
17.	Incurred during current year	17	3,424,530							17	3,424,530
	Settled during current year:										
18.1	By payment in full	16	3,173,139							16	3,173,139
18.2	By payment on compromised claims									0	0
18.3	Totals paid	16	3,173,139	0	0	0	0	0	0	16	3,173,139
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	16	3,173,139	0	0	0	0	0	0	16	3,173,139
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	8	1,153,095	0	0	0	0	0	0	8	1,153,095
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	5,249	2,402,550,469		(a)					5,249	2,402,550,469
21.	Issued during year	348	259,795,218							348	259,795,218
22.	Other changes to in force (Net)	(373)	(183,886,713)							(373)	(183,886,713)
23.	In force December 31 of current year	5,224	2,478,458,974	0	(a) 0	0	0	0	0	5,224	2,478,458,974

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	226,782	226,611		457,316	213,129
25.2	Guaranteed renewable (b)	13,919	13,909		450	450
25.3	Non-renewable for stated reasons only (b)	2,742	2,740			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	243,443	243,260	0	457,766	213,579
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	243,443	243,260	0	457,766	213,579

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

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DIRECT BUSINESS IN THE STATE OF KANSAS DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	7,083,497				7,083,497
2.	Annuity considerations	9,250				9,250
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	7,092,747	0	0	0	7,092,747
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	10,432,251				10,432,251
10.	Matured endowments					0
11.	Annuity benefits	73,902				73,902
12.	Surrender values and withdrawals for life contracts	2,698,751				2,698,751
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	13,204,904	0	0	0	13,204,904
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	4	1,350,000							4	1,350,000
17.	Incurred during current year	11	7,636,217							11	7,636,217
	Settled during current year:										
18.1	By payment in full	12	8,200,550							12	8,200,550
18.2	By payment on compromised claims									0	0
18.3	Totals paid	12	8,200,550	0	0	0	0	0	0	12	8,200,550
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	12	8,200,550	0	0	0	0	0	0	12	8,200,550
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	3	785,667	0	0	0	0	0	0	3	785,667
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	5,012	2,430,971,784		(a)					5,012	2,430,971,784
21.	Issued during year	247	187,863,555							247	187,863,555
22.	Other changes to in force (Net)	(352)	(153,935,304)							(352)	(153,935,304)
23.	In force December 31 of current year	4,907	2,464,900,035	0	(a) 0	0	0	0	0	4,907	2,464,900,035

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	305,987	305,756		376,289	375,673
25.2	Guaranteed renewable (b)	25,916	25,897			1,458
25.3	Non-renewable for stated reasons only (b)	1,127	1,126			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	333,030	332,779	0	376,289	377,131
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	333,030	332,779	0	376,289	377,131

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

DIRECT BUSINESS IN THE STATE OF KENTUCKY DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	5,700,004				5,700,004
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	5,700,004	0	0	0	5,700,004
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	5,379,011				5,379,011
10.	Matured endowments					0
11.	Annuity benefits	849				849
12.	Surrender values and withdrawals for life contracts	840,028				840,028
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	6,219,888	0	0	0	6,219,888
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	25,000							1	25,000
17.	Incurred during current year	15	5,355,000							15	5,355,000
	Settled during current year:										
18.1	By payment in full	15	5,280,000							15	5,280,000
18.2	By payment on compromised claims									0	0
18.3	Totals paid	15	5,280,000	0	0	0	0	0	0	15	5,280,000
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	15	5,280,000	0	0	0	0	0	0	15	5,280,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	100,000	0	0	0	0	0	0	1	100,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	3,592	1,706,476,740		(a)					3,592	1,706,476,740
21.	Issued during year	244	152,117,619							244	152,117,619
22.	Other changes to in force (Net)	(258)	(106,082,206)							(258)	(106,082,206)
23.	In force December 31 of current year	3,578	1,752,512,153	0	(a) 0	0	0	0	0	3,578	1,752,512,153

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	277,589	277,380		395,275	380,752
25.2	Guaranteed renewable (b)	6,217	6,212		310	250
25.3	Non-renewable for stated reasons only (b)	2,361	2,359			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	286,167	285,951	0	395,585	381,002
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	286,167	285,951	0	395,585	381,002

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

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DIRECT BUSINESS IN THE STATE OF LOUISIANA DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	6,368,100				6,368,100
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	6,368,100	0	0	0	6,368,100
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,272,861				1,272,861
10.	Matured endowments					0
11.	Annuity benefits	5,639				5,639
12.	Surrender values and withdrawals for life contracts	157,623				157,623
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	1,436,123	0	0	0	1,436,123
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	2	162,970							2	162,970
17.	Incurred during current year	8	1,891,537							8	1,891,537
	Settled during current year:										
18.1	By payment in full	9	1,991,537							9	1,991,537
18.2	By payment on compromised claims									0	0
18.3	Totals paid	9	1,991,537	0	0	0	0	0	0	9	1,991,537
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	9	1,991,537	0	0	0	0	0	0	9	1,991,537
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	62,970	0	0	0	0	0	0	1	62,970
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	2,435	1,591,294,775		(a)					2,435	1,591,294,775
21.	Issued during year	341	271,714,927							341	271,714,927
22.	Other changes to in force (Net)	(187)	(158,566,641)							(187)	(158,566,641)
23.	In force December 31 of current year	2,589	1,704,443,061	0	(a) 0	0	0	0	0	2,589	1,704,443,061

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	207,435	207,278		138,083	136,439
25.2	Guaranteed renewable (b)	6,599	6,594			
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)	214,034	213,872	0	138,083	136,439
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	214,034	213,872	0	138,083	136,439

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

DIRECT BUSINESS IN THE STATE OF MASSACHUSETTS DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	18,169,219				18,169,219
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	18,169,219	0	0	0	18,169,219
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	3,280,000				3,280,000
10. Matured endowments					0
11. Annuity benefits	101,616				101,616
12. Surrender values and withdrawals for life contracts	3,159,972				3,159,972
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	6,541,588	0	0	0	6,541,588
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	3	1,600,000							3	1,600,000
17. Incurred during current year	8	2,680,000							8	2,680,000
Settled during current year:										
18.1 By payment in full	9	3,680,000							9	3,680,000
18.2 By payment on compromised claims									0	0
18.3 Totals paid	9	3,680,000	0	0	0	0	0	0	9	3,680,000
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	9	3,680,000	0	0	0	0	0	0	9	3,680,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	600,000	0	0	0	0	0	0	2	600,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	5,064	3,239,325,315		(a)					5,064	3,239,325,315
21. Issued during year	707	482,111,512							707	482,111,512
22. Other changes to in force (Net)	(279)	(186,341,494)							(279)	(186,341,494)
23. In force December 31 of current year	5,492	3,535,095,333	0	(a) 0	0	0	0	0	5,492	3,535,095,333

(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 Employee Health Benefits Plan premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	160,805	160,683			
25.2 Guaranteed renewable (b)	29,540	29,518		9,600	10,320
25.3 Non-renewable for stated reasons only (b)	7,467	7,461			
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	197,812	197,662	0	9,600	10,320
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	197,812	197,662	0	9,600	10,320

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

DIRECT BUSINESS IN THE STATE OF MARYLAND DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	11,790,065				11,790,065
2.	Annuity considerations	4,644				4,644
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	11,794,709	0	0	0	11,794,709
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,454,000				1,454,000
10.	Matured endowments					0
11.	Annuity benefits	99,992				99,992
12.	Surrender values and withdrawals for life contracts	1,059,586				1,059,586
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	2,613,578	0	0	0	2,613,578
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year		0							0	0
17.	Incurred during current year	13	1,454,000							13	1,454,000
	Settled during current year:										
18.1	By payment in full	11	1,299,000							11	1,299,000
18.2	By payment on compromised claims									0	0
18.3	Totals paid	11	1,299,000	0	0	0	0	0	0	11	1,299,000
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	11	1,299,000	0	0	0	0	0	0	11	1,299,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	155,000	0	0	0	0	0	0	2	155,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	5,977	3,949,156,635		(a)					5,977	3,949,156,635
21.	Issued during year	551	455,874,339							551	455,874,339
22.	Other changes to in force (Net)	(388)	(276,934,214)							(388)	(276,934,214)
23.	In force December 31 of current year	6,140	4,128,096,760	0	(a) 0	0	0	0	0	6,140	4,128,096,760

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	417,589	417,274		384,258	384,062
25.2	Guaranteed renewable (b)	14,578	14,567			
25.3	Non-renewable for stated reasons only (b)	7,301	7,296			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	439,468	439,137	0	384,258	384,062
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	439,468	439,137	0	384,258	384,062

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

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DIRECT BUSINESS IN THE STATE OF MAINE DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	12,255,086				12,255,086
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	12,255,086	0	0	0	12,255,086
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,350,000				1,350,000
10.	Matured endowments					0
11.	Annuity benefits	19,344				19,344
12.	Surrender values and withdrawals for life contracts	52,719				52,719
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	1,422,063	0	0	0	1,422,063
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	250,000							1	250,000
17.	Incurred during current year	8	1,450,000							8	1,450,000
	Settled during current year:										
18.1	By payment in full	8	1,550,000							8	1,550,000
18.2	By payment on compromised claims									0	0
18.3	Totals paid	8	1,550,000	0	0	0	0	0	0	8	1,550,000
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	8	1,550,000	0	0	0	0	0	0	8	1,550,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	150,000	0	0	0	0	0	0	1	150,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,040	487,555,494		(a)					1,040	487,555,494
21.	Issued during year	144	87,317,808							144	87,317,808
22.	Other changes to in force (Net)	(59)	(18,482,896)							(59)	(18,482,896)
23.	In force December 31 of current year	1,125	556,390,406	0	(a) 0	0	0	0	0	1,125	556,390,406

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	2,705	2,703		56,400	54,050
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)	2,705	2,703	0	56,400	54,050
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,705	2,703	0	56,400	54,050

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

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DIRECT BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	14,473,915				14,473,915
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	14,473,915	0	0	0	14,473,915
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	5,770,663				5,770,663
10.	Matured endowments					0
11.	Annuity benefits	372,537				372,537
12.	Surrender values and withdrawals for life contracts	2,382,567				2,382,567
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	8,525,767	0	0	0	8,525,767
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	7	595,339							7	595,339
17.	Incurred during current year	21	5,689,404							21	5,689,404
	Settled during current year:										
18.1	By payment in full	21	5,841,144							21	5,841,144
18.2	By payment on compromised claims									0	0
18.3	Totals paid	21	5,841,144	0	0	0	0	0	0	21	5,841,144
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	21	5,841,144	0	0	0	0	0	0	21	5,841,144
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	7	443,599	0	0	0	0	0	0	7	443,599
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	8,993	4,130,132,888		(a)					8,993	4,130,132,888
21.	Issued during year	858	587,403,591							858	587,403,591
22.	Other changes to in force (Net)	(664)	(289,940,422)							(664)	(289,940,422)
23.	In force December 31 of current year	9,187	4,427,596,057	0	(a) 0	0	0	0	0	9,187	4,427,596,057

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	802,751	802,144		704,309	696,203
25.2	Guaranteed renewable (b)	42,940	42,908		44,466	44,466
25.3	Non-renewable for stated reasons only (b)	23,367	23,349			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	869,058	868,401	0	748,775	740,669
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	869,058	868,401	0	748,775	740,669

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

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DIRECT BUSINESS IN THE STATE OF MINNESOTA DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	7,143,500				7,143,500
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	7,143,500	0	0	0	7,143,500
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	5,109,826				5,109,826
10.	Matured endowments					0
11.	Annuity benefits	262,181				262,181
12.	Surrender values and withdrawals for life contracts	1,611,630				1,611,630
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	6,983,637	0	0	0	6,983,637
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	250,000							1	250,000
17.	Incurred during current year	11	5,109,826							11	5,109,826
	Settled during current year:										
18.1	By payment in full	11	4,959,826							11	4,959,826
18.2	By payment on compromised claims									0	0
18.3	Totals paid	11	4,959,826	0	0	0	0	0	0	11	4,959,826
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	11	4,959,826	0	0	0	0	0	0	11	4,959,826
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	400,000	0	0	0	0	0	0	1	400,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	4,853	2,433,659,407		(a)					4,853	2,433,659,407
21.	Issued during year	364	254,433,657							364	254,433,657
22.	Other changes to in force (Net)	(375)	(190,970,131)							(375)	(190,970,131)
23.	In force December 31 of current year	4,842	2,497,122,933	0	(a) 0	0	0	0	0	4,842	2,497,122,933

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	233,934	233,757		118,833	118,833
25.2	Guaranteed renewable (b)	28,339	28,318			
25.3	Non-renewable for stated reasons only (b)	4,250	4,247			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	266,523	266,322	0	118,833	118,833
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	266,523	266,322	0	118,833	118,833

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

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DIRECT BUSINESS IN THE STATE OF MISSOURI DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	8,803,129				8,803,129
2. Annuity considerations	340				340
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	8,803,469	0	0	0	8,803,469
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	5,965,000				5,965,000
10. Matured endowments					0
11. Annuity benefits	231,872				231,872
12. Surrender values and withdrawals for life contracts	6,495,853				6,495,853
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	12,692,725	0	0	0	12,692,725
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year		0							0	0
17. Incurred during current year	14	6,045,000							14	6,045,000
Settled during current year:										
18.1 By payment in full	12	5,915,000							12	5,915,000
18.2 By payment on compromised claims									0	0
18.3 Totals paid	12	5,915,000	0	0	0	0	0	0	12	5,915,000
18.4 Reduction by compromise	1	100,000							1	100,000
18.5 Amount rejected									0	0
18.6 Total settlements	13	6,015,000	0	0	0	0	0	0	13	6,015,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	30,000	0	0	0	0	0	0	1	30,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	4,745	1,975,133,405		(a)					4,745	1,975,133,405
21. Issued during year	285	184,371,432							285	184,371,432
22. Other changes to in force (Net)	(307)	(123,041,252)							(307)	(123,041,252)
23. In force December 31 of current year	4,723	2,036,463,585	0	(a) 0	0	0	0	0	4,723	2,036,463,585

(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 Employee Health Benefits Plan premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	214,060	213,898		430,315	428,231
25.2 Guaranteed renewable (b)	14,852	14,841		6,000	6,000
25.3 Non-renewable for stated reasons only (b)	2,388	2,387			
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	231,300	231,126	0	436,315	434,231
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	231,300	231,126	0	436,315	434,231

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

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

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

LIFE INSURANCE

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

NONE

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

NONE

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF MISSISSIPPI DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	12,768,675				12,768,675
2.	Annuity considerations					0
3.	Deposit-type contract funds	87,098	XXX		XXX	87,098
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	12,855,773	0	0	0	12,855,773
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	520,000				520,000
10.	Matured endowments					0
11.	Annuity benefits	148,153				148,153
12.	Surrender values and withdrawals for life contracts	605,450				605,450
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	1,273,603	0	0	0	1,273,603
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	35,000							1	35,000
17.	Incurred during current year	4	519,151							4	519,151
	Settled during current year:										
18.1	By payment in full	3	419,151							3	419,151
18.2	By payment on compromised claims									0	0
18.3	Totals paid	3	419,151	0	0	0	0	0	0	3	419,151
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	3	419,151	0	0	0	0	0	0	3	419,151
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	135,000	0	0	0	0	0	0	2	135,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,310	714,506,883		(a)					1,310	714,506,883
21.	Issued during year	160	124,764,699							160	124,764,699
22.	Other changes to in force (Net)	(109)	(60,233,017)							(109)	(60,233,017)
23.	In force December 31 of current year	1,361	779,038,565	0	(a) 0	0	0	0	0	1,361	779,038,565

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	156,467	156,349		275,770	208,254
25.2	Guaranteed renewable (b)	4,082	4,079			
25.3	Non-renewable for stated reasons only (b)	1,678	1,677			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	162,227	162,105	0	275,770	208,254
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	162,227	162,105	0	275,770	208,254

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

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DIRECT BUSINESS IN THE STATE OF MONTANA DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	7,770,285				7,770,285
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	7,770,285	0	0	0	7,770,285
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,660,000				1,660,000
10.	Matured endowments					0
11.	Annuity benefits	1,943				1,943
12.	Surrender values and withdrawals for life contracts	272,898				272,898
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	1,934,841	0	0	0	1,934,841
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	30,000							1	30,000
17.	Incurred during current year	8	2,235,000							8	2,235,000
	Settled during current year:										
18.1	By payment in full	9	2,265,000							9	2,265,000
18.2	By payment on compromised claims									0	0
18.3	Totals paid	9	2,265,000	0	0	0	0	0	0	9	2,265,000
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	9	2,265,000	0	0	0	0	0	0	9	2,265,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	2,043	925,045,945		(a)					2,043	925,045,945
21.	Issued during year	214	153,072,269							214	153,072,269
22.	Other changes to in force (Net)	(162)	(79,147,658)							(162)	(79,147,658)
23.	In force December 31 of current year	2,095	998,970,556	0	(a) 0	0	0	0	0	2,095	998,970,556

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	52,045	52,006		24,000	24,000
25.2	Guaranteed renewable (b)	2,632	2,630			
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)	54,677	54,636	0	24,000	24,000
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	54,677	54,636	0	24,000	24,000

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

DIRECT BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	12,744,223				12,744,223
2.	Annuity considerations	46,368				46,368
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	12,790,591	0	0	0	12,790,591
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	5,614,304				5,614,304
10.	Matured endowments	10,000				10,000
11.	Annuity benefits	321,803				321,803
12.	Surrender values and withdrawals for life contracts	1,966,945				1,966,945
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	7,913,052	0	0	0	7,913,052
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	5	1,432,521							5	1,432,521
17.	Incurred during current year	27	6,037,476							27	6,037,476
	Settled during current year:										
18.1	By payment in full	26	6,566,476							26	6,566,476
18.2	By payment on compromised claims									0	0
18.3	Totals paid	26	6,566,476	0	0	0	0	0	0	26	6,566,476
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	26	6,566,476	0	0	0	0	0	0	26	6,566,476
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	6	903,521	0	0	0	0	0	0	6	903,521
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	6,699	3,944,481,433		(a)					6,699	3,944,481,433
21.	Issued during year	519	404,875,267							519	404,875,267
22.	Other changes to in force (Net)	(427)	(253,730,789)							(427)	(253,730,789)
23.	In force December 31 of current year	6,791	4,095,625,911	0	(a) 0	0	0	0	0	6,791	4,095,625,911

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

ACCIDENT AND HEALTH INSURANCE

		1 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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	441,028	440,695		274,500	273,550
25.2	Guaranteed renewable (b)	1,421	1,420		16,550	16,500
25.3	Non-renewable for stated reasons only (b)	5,991	5,987			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	448,440	448,102	0	291,050	290,050
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	448,440	448,102	0	291,050	290,050

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

DIRECT BUSINESS IN THE STATE OF NORTH DAKOTA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	1,135,959				1,135,959
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	1,135,959	0	0	0	1,135,959
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	3,025,000				3,025,000
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	334,671				334,671
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	3,359,671	0	0	0	3,359,671
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	1	100,000							1	100,000
17. Incurred during current year	4	2,975,000							4	2,975,000
Settled during current year:										
18.1 By payment in full	5	3,075,000							5	3,075,000
18.2 By payment on compromised claims									0	0
18.3 Totals paid	5	3,075,000	0	0	0	0	0	0	5	3,075,000
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	5	3,075,000	0	0	0	0	0	0	5	3,075,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	1,035	411,746,578		(a)					1,035	411,746,578
21. Issued during year	76	62,958,665							76	62,958,665
22. Other changes to in force (Net)	(57)	(31,648,327)							(57)	(31,648,327)
23. In force December 31 of current year	1,054	443,056,916	0	(a) 0	0	0	0	0	1,054	443,056,916

(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 Employee Health Benefits Plan premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	37,278	37,250			1,699
25.2 Guaranteed renewable (b)	7,876	7,870			
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)	45,154	45,120	0	0	1,699
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	45,154	45,120	0	0	1,699

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

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DIRECT BUSINESS IN THE STATE OF NEBRASKA DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	6,649,267				6,649,267
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	6,649,267	0	0	0	6,649,267
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	3,727,245				3,727,245
10.	Matured endowments					0
11.	Annuity benefits	308,369				308,369
12.	Surrender values and withdrawals for life contracts	1,114,872				1,114,872
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	5,150,486	0	0	0	5,150,486
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	7	661,044							7	661,044
17.	Incurred during current year	28	5,574,897							28	5,574,897
	Settled during current year:										
18.1	By payment in full	35	6,235,941							35	6,235,941
18.2	By payment on compromised claims									0	0
18.3	Totals paid	35	6,235,941	0	0	0	0	0	0	35	6,235,941
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	35	6,235,941	0	0	0	0	0	0	35	6,235,941
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	4,429	1,266,880,264		(a)					4,429	1,266,880,264
21.	Issued during year	195	114,001,692							195	114,001,692
22.	Other changes to in force (Net)	(249)	(67,992,232)							(249)	(67,992,232)
23.	In force December 31 of current year	4,375	1,312,889,724	0	(a) 0	0	0	0	0	4,375	1,312,889,724

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	99,696	99,621		54,567	53,727
25.2	Guaranteed renewable (b)	15,216	15,205		9,000	9,767
25.3	Non-renewable for stated reasons only (b)	14,119	14,109			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	129,031	128,935	0	63,567	63,494
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	129,031	128,935	0	63,567	63,494

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

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DIRECT BUSINESS IN THE STATE OF NEW HAMPSHIRE DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	2,147,863				2,147,863
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	2,147,863	0	0	0	2,147,863
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	211,271				211,271
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	211,271	0	0	0	211,271
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	1	100,000							1	100,000
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full	1	100,000							1	100,000
18.2 By payment on compromised claims									0	0
18.3 Totals paid	1	100,000	0	0	0	0	0	0	1	100,000
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	1	100,000	0	0	0	0	0	0	1	100,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	1,478	876,031,607		(a)					1,478	876,031,607
21. Issued during year	186	139,789,016							186	139,789,016
22. Other changes to in force (Net)	(77)	(64,125,994)							(77)	(64,125,994)
23. In force December 31 of current year	1,587	951,694,629	0	(a) 0	0	0	0	0	1,587	951,694,629

(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 Employee Health Benefits Plan premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	46,606	46,571			
25.2 Guaranteed renewable (b)	2,127	2,126			
25.3 Non-renewable for stated reasons only (b)	996	995			
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	49,729	49,692	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	49,729	49,692	0	0	0

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

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DIRECT BUSINESS IN THE STATE OF NEW JERSEY DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	29,795,200				29,795,200
2.	Annuity considerations	400				400
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	29,795,600	0	0	0	29,795,600
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,782,185				2,782,185
10.	Matured endowments					0
11.	Annuity benefits	9,979				9,979
12.	Surrender values and withdrawals for life contracts	1,525,733				1,525,733
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	4,317,897	0	0	0	4,317,897
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	4	2,651,500							4	2,651,500
17.	Incurred during current year	5	2,662,185							5	2,662,185
	Settled during current year:										
18.1	By payment in full	7	3,028,343							7	3,028,343
18.2	By payment on compromised claims									0	0
18.3	Totals paid	7	3,028,343	0	0	0	0	0	0	7	3,028,343
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	7	3,028,343	0	0	0	0	0	0	7	3,028,343
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	2,285,342	0	0	0	0	0	0	2	2,285,342
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	4,907	3,326,277,546		(a)					4,907	3,326,277,546
21.	Issued during year	770	533,320,330							770	533,320,330
22.	Other changes to in force (Net)	(274)	(180,803,682)							(274)	(180,803,682)
23.	In force December 31 of current year	5,403	3,678,794,194	0	(a) 0	0	0	0	0	5,403	3,678,794,194

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	364,141	363,866		731,612	698,716
25.2	Guaranteed renewable (b)	616	615		8,890	8,552
25.3	Non-renewable for stated reasons only (b)	20,560	20,544			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	385,317	385,025	0	740,502	707,268
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	385,317	385,025	0	740,502	707,268

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

DIRECT BUSINESS IN THE STATE OF NEW MEXICO DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	1,068,525				1,068,525
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	1,068,525	0	0	0	1,068,525
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	35,000				35,000
10.	Matured endowments					0
11.	Annuity benefits					0
12.	Surrender values and withdrawals for life contracts	61,173				61,173
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	96,173	0	0	0	96,173
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year		0							0	0
17.	Incurred during current year	3	160,000							3	160,000
	Settled during current year:										
18.1	By payment in full	3	160,000							3	160,000
18.2	By payment on compromised claims									0	0
18.3	Totals paid	3	160,000	0	0	0	0	0	0	3	160,000
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	3	160,000	0	0	0	0	0	0	3	160,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	560	260,861,881		(a)					560	260,861,881
21.	Issued during year	35	19,338,032							35	19,338,032
22.	Other changes to in force (Net)	(29)	(7,031,551)							(29)	(7,031,551)
23.	In force December 31 of current year	566	273,168,362	0	(a) 0	0	0	0	0	566	273,168,362

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	38,537	38,508		39,505	38,405
25.2	Guaranteed renewable (b)	479	479			
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)	39,016	38,987	0	39,505	38,405
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	39,016	38,987	0	39,505	38,405

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

DIRECT BUSINESS IN THE STATE OF NEVADA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	1,759,241				1,759,241
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	1,759,241	0	0	0	1,759,241
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	300,000				300,000
10. Matured endowments	3,638				3,638
11. Annuity benefits	3,000				3,000
12. Surrender values and withdrawals for life contracts	119,316				119,316
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	425,954	0	0	0	425,954
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year		0							0	0
17. Incurred during current year	2	300,000							2	300,000
Settled during current year:										
18.1 By payment in full	2	300,000							2	300,000
18.2 By payment on compromised claims									0	0
18.3 Totals paid	2	300,000	0	0	0	0	0	0	2	300,000
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	2	300,000	0	0	0	0	0	0	2	300,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	962	656,293,321		(a)					962	656,293,321
21. Issued during year	116	77,685,000							116	77,685,000
22. Other changes to in force (Net)	(74)	(51,318,703)							(74)	(51,318,703)
23. In force December 31 of current year	1,004	682,659,618	0	(a) 0	0	0	0	0	1,004	682,659,618

(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 Employee Health Benefits Plan premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	48,850	48,813			
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)	48,850	48,813	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	48,850	48,813	0	0	0

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

DIRECT BUSINESS IN THE STATE OF NEW YORK DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	913,538				913,538
2.	Annuity considerations					0
3.	Deposit-type contract funds	251,891	XXX		XXX	251,891
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	1,165,429	0	0	0	1,165,429
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,760,000				1,760,000
10.	Matured endowments					0
11.	Annuity benefits	12,746				12,746
12.	Surrender values and withdrawals for life contracts	153,020				153,020
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	1,925,766	0	0	0	1,925,766
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year		(0)							0	(0)
17.	Incurred during current year	7	2,379,205							7	2,379,205
	Settled during current year:										
18.1	By payment in full	7	2,379,205							7	2,379,205
18.2	By payment on compromised claims									0	0
18.3	Totals paid	7	2,379,205	0	0	0	0	0	0	7	2,379,205
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	7	2,379,205	0	0	0	0	0	0	7	2,379,205
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	397	388,730,090		(a)					397	388,730,090
21.	Issued during year	21	18,675,000							21	18,675,000
22.	Other changes to in force (Net)	(33)	(31,494,500)							(33)	(31,494,500)
23.	In force December 31 of current year	385	375,910,590	0	(a) 0	0	0	0	0	385	375,910,590

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	43,637	43,604		54,000	52,050
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)	43,637	43,604	0	54,000	52,050
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	43,637	43,604	0	54,000	52,050

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

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DIRECT BUSINESS IN THE STATE OF OHIO DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	34,885,226				34,885,226
2.	Annuity considerations					0
3.	Deposit-type contract funds	659,205	XXX		XXX	659,205
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	35,544,431	0	0	0	35,544,431
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	16,343,305				16,343,305
10.	Matured endowments					0
11.	Annuity benefits	615,746				615,746
12.	Surrender values and withdrawals for life contracts	12,194,516				12,194,516
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	29,153,567	0	0	0	29,153,567
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	35	1,746,969							35	1,746,969
17.	Incurred during current year	93	17,117,230							93	17,117,230
	Settled during current year:										
18.1	By payment in full	89	14,713,525							89	14,713,525
18.2	By payment on compromised claims									0	0
18.3	Totals paid	89	14,713,525	0	0	0	0	0	0	89	14,713,525
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	89	14,713,525	0	0	0	0	0	0	89	14,713,525
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	39	4,150,674	0	0	0	0	0	0	39	4,150,674
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	22,670	9,763,617,533		(a)					22,670	9,763,617,533
21.	Issued during year	1,747	1,135,142,574							1,747	1,135,142,574
22.	Other changes to in force (Net)	(1,504)	(681,423,450)							(1,504)	(681,423,450)
23.	In force December 31 of current year	22,913	10,217,336,657	0	(a) 0	0	0	0	0	22,913	10,217,336,657

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	1,475,705	1,474,591		1,033,168	971,075
25.2	Guaranteed renewable (b)	57,332	57,289		10,560	9,420
25.3	Non-renewable for stated reasons only (b)	38,628	38,599			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	1,571,665	1,570,479	0	1,043,728	980,495
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,571,665	1,570,479	0	1,043,728	980,495

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

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DIRECT BUSINESS IN THE STATE OF OKLAHOMA DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	11,002,706				11,002,706
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	11,002,706	0	0	0	11,002,706
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,625,000				1,625,000
10.	Matured endowments					0
11.	Annuity benefits	58,252				58,252
12.	Surrender values and withdrawals for life contracts	469,108				469,108
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	2,152,360	0	0	0	2,152,360
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	3	3,300,000							3	3,300,000
17.	Incurred during current year	10	1,625,000							10	1,625,000
	Settled during current year:										
18.1	By payment in full	12	1,925,000							12	1,925,000
18.2	By payment on compromised claims									0	0
18.3	Totals paid	12	1,925,000	0	0	0	0	0	0	12	1,925,000
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	12	1,925,000	0	0	0	0	0	0	12	1,925,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	3,000,000	0	0	0	0	0	0	1	3,000,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	3,226	1,483,362,880		(a)					3,226	1,483,362,880
21.	Issued during year	387	269,103,831							387	269,103,831
22.	Other changes to in force (Net)	(200)	(73,717,359)							(200)	(73,717,359)
23.	In force December 31 of current year	3,413	1,678,749,352	0	(a) 0	0	0	0	0	3,413	1,678,749,352

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	208,271	208,114		36,000	36,000
25.2	Guaranteed renewable (b)	3,535	3,532			
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)	211,806	211,646	0	36,000	36,000
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	211,806	211,646	0	36,000	36,000

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

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DIRECT BUSINESS IN THE STATE OF OREGON DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	6,405,249				6,405,249
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	6,405,249	0	0	0	6,405,249
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	837,057				837,057
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	550,991				550,991
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	1,388,048	0	0	0	1,388,048
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year	7	832,307							7	832,307
Settled during current year:										
18.1 By payment in full	6	672,307							6	672,307
18.2 By payment on compromised claims									0	0
18.3 Totals paid	6	672,307	0	0	0	0	0	0	6	672,307
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	6	672,307	0	0	0	0	0	0	6	672,307
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	160,000	0	0	0	0	0	0	1	160,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	3,721	1,993,698,966		(a)					3,721	1,993,698,966
21. Issued during year	465	305,085,234							465	305,085,234
22. Other changes to in force (Net)	(209)	(94,473,620)							(209)	(94,473,620)
23. In force December 31 of current year	3,977	2,204,310,580	0	(a) 0	0	0	0	0	3,977	2,204,310,580

(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 Employee Health Benefits Plan premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	243,126	242,943		83,198	88,753
25.2 Guaranteed renewable (b)	23,195	23,178			
25.3 Non-renewable for stated reasons only (b)	20,577	20,561			
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	286,898	286,682	0	83,198	88,753
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	286,898	286,682	0	83,198	88,753

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

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DIRECT BUSINESS IN OTHER ALIEN GRAND TOTAL DURING THE YEAR

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

LIFE INSURANCE

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

NONE

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

NONE

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

DIRECT BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	27,871,156				27,871,156
2.	Annuity considerations	27,940				27,940
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	27,899,096	0	0	0	27,899,096
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	7,957,435				7,957,435
10.	Matured endowments					0
11.	Annuity benefits	1,041,697				1,041,697
12.	Surrender values and withdrawals for life contracts	2,489,874				2,489,874
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	11,489,006	0	0	0	11,489,006
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year		(0)							0	(0)
17.	Incurred during current year	73	6,065,849							73	6,065,849
	Settled during current year:										
18.1	By payment in full	73	6,065,849							73	6,065,849
18.2	By payment on compromised claims									0	0
18.3	Totals paid	73	6,065,849	0	0	0	0	0	0	73	6,065,849
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	73	6,065,849	0	0	0	0	0	0	73	6,065,849
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	14,449	5,949,664,496		(a)					14,449	5,949,664,496
21.	Issued during year	954	696,886,393							954	696,886,393
22.	Other changes to in force (Net)	(926)	(389,192,977)							(926)	(389,192,977)
23.	In force December 31 of current year	14,477	6,257,357,912	0	(a) 0	0	0	0	0	14,477	6,257,357,912

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	842,709	842,073		475,443	524,498
25.2	Guaranteed renewable (b)	121,151	121,059		23,443	120,243
25.3	Non-renewable for stated reasons only (b)	33,416	33,390			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	997,276	996,522	0	498,886	644,741
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	997,276	996,522	0	498,886	644,741

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

DIRECT BUSINESS IN PUERTO RICO DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	4,490,863				4,490,863
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	4,490,863	0	0	0	4,490,863
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	100,000				100,000
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	599,812				599,812
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	699,812	0	0	0	699,812
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year	1	100,000							1	100,000
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	100,000	0	0	0	0	0	0	1	100,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	1,136	1,096,295,379		(a)					1,136	1,096,295,379
21. Issued during year	47	58,417,100							47	58,417,100
22. Other changes to in force (Net)	(63)	(35,384,617)							(63)	(35,384,617)
23. In force December 31 of current year	1,120	1,119,327,862	0	(a) 0	0	0	0	0	1,120	1,119,327,862

(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 Employee Health Benefits Plan premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	673,771	673,263			
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	51,423	51,384			
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	725,194	724,647	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	725,194	724,647	0	0	0

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

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DIRECT BUSINESS IN THE STATE OF RHODE ISLAND DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	4,854,631				4,854,631
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	4,854,631	0	0	0	4,854,631
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	277,868				277,868
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	277,868	0	0	0	277,868
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	1	270,909							1	270,909
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	270,909	0	0	0	0	0	0	1	270,909
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	1,037	580,345,515		(a)					1,037	580,345,515
21. Issued during year	164	119,424,648							164	119,424,648
22. Other changes to in force (Net)	(53)	(43,629,848)							(53)	(43,629,848)
23. In force December 31 of current year	1,148	656,140,315	0	(a) 0	0	0	0	0	1,148	656,140,315

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employee Health Benefits Plan premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	26,904	26,884			
25.2 Guaranteed renewable (b)	2,242	2,240			
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)	29,146	29,124	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	29,146	29,124	0	0	0

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

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DIRECT BUSINESS IN THE STATE OF SOUTH CAROLINA DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	3,560,806				3,560,806
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	3,560,806	0	0	0	3,560,806
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,883,540				1,883,540
10.	Matured endowments					0
11.	Annuity benefits	9,074				9,074
12.	Surrender values and withdrawals for life contracts	1,347,896				1,347,896
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	3,240,510	0	0	0	3,240,510
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	500,000							1	500,000
17.	Incurred during current year	9	1,984,216							9	1,984,216
	Settled during current year:										
18.1	By payment in full	8	1,960,735							8	1,960,735
18.2	By payment on compromised claims									0	0
18.3	Totals paid	8	1,960,735	0	0	0	0	0	0	8	1,960,735
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	8	1,960,735	0	0	0	0	0	0	8	1,960,735
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	523,481	0	0	0	0	0	0	2	523,481
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	2,938	1,419,169,387		(a)					2,938	1,419,169,387
21.	Issued during year	224	122,823,898							224	122,823,898
22.	Other changes to in force (Net)	(191)	(93,372,922)							(191)	(93,372,922)
23.	In force December 31 of current year	2,971	1,448,620,363	0	(a) 0	0	0	0	0	2,971	1,448,620,363

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

ACCIDENT AND HEALTH INSURANCE

		1 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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	71,459	71,406		67,307	69,383
25.2	Guaranteed renewable (b)	6,423	6,418			
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)	77,882	77,824	0	67,307	69,383
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	77,882	77,824	0	67,307	69,383

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

DIRECT BUSINESS IN THE STATE OF SOUTH DAKOTA DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	512,614				512,614
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	512,614	0	0	0	512,614
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	169,032				169,032
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	169,032	0	0	0	169,032
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	435	200,033,380		(a)					435	200,033,380
21. Issued during year	30	25,118,062							30	25,118,062
22. Other changes to in force (Net)	(35)	(20,683,206)							(35)	(20,683,206)
23. In force December 31 of current year	430	204,468,236	0	(a) 0	0	0	0	0	430	204,468,236

(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 Employee Health Benefits Plan premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	21,410	21,394			
25.2 Guaranteed renewable (b)	1,108	1,107			
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)	22,518	22,501	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	22,518	22,501	0	0	0

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

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DIRECT BUSINESS IN THE STATE OF TENNESSEE DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	18,790,287				18,790,287
2.	Annuity considerations	3,300				3,300
3.	Deposit-type contract funds	58,065	XXX		XXX	58,065
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	18,851,652	0	0	0	18,851,652
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	14,843,055				14,843,055
10.	Matured endowments					0
11.	Annuity benefits	238,469				238,469
12.	Surrender values and withdrawals for life contracts	2,398,381				2,398,381
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	17,479,905	0	0	0	17,479,905
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year		(0)							0	(0)
17.	Incurred during current year	28	14,266,177							28	14,266,177
	Settled during current year:										
18.1	By payment in full	26	13,852,597							26	13,852,597
18.2	By payment on compromised claims									0	0
18.3	Totals paid	26	13,852,597	0	0	0	0	0	0	26	13,852,597
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	26	13,852,597	0	0	0	0	0	0	26	13,852,597
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	413,580	0	0	0	0	0	0	2	413,580
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	8,241	4,792,089,802		(a)					8,241	4,792,089,802
21.	Issued during year	616	442,464,771							616	442,464,771
22.	Other changes to in force (Net)	(454)	(263,283,092)							(454)	(263,283,092)
23.	In force December 31 of current year	8,403	4,971,271,481	0	(a) 0	0	0	0	0	8,403	4,971,271,481

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	414,329	414,016		238,453	228,145
25.2	Guaranteed renewable (b)	11,441	11,433			
25.3	Non-renewable for stated reasons only (b)	42,938	42,905			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	468,708	468,354	0	238,453	228,145
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	468,708	468,354	0	238,453	228,145

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

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DIRECT BUSINESS IN THE STATE OF TEXAS DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	47,041,170				47,041,170
2.	Annuity considerations	113				113
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	47,041,283	0	0	0	47,041,283
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	17,715,226				17,715,226
10.	Matured endowments					0
11.	Annuity benefits					0
12.	Surrender values and withdrawals for life contracts	3,938,896				3,938,896
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	21,654,122	0	0	0	21,654,122
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	11	684,920							11	684,920
17.	Incurred during current year	58	18,248,814							58	18,248,814
	Settled during current year:										
18.1	By payment in full	52	16,522,177							52	16,522,177
18.2	By payment on compromised claims									0	0
18.3	Totals paid	52	16,522,177	0	0	0	0	0	0	52	16,522,177
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	52	16,522,177	0	0	0	0	0	0	52	16,522,177
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	17	2,411,557	0	0	0	0	0	0	17	2,411,557
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	18,336	11,062,981,391		(a)					18,336	11,062,981,391
21.	Issued during year	1,692	1,230,170,316							1,692	1,230,170,316
22.	Other changes to in force (Net)	(1,272)	(653,143,167)							(1,272)	(653,143,167)
23.	In force December 31 of current year	18,756	11,640,008,540	0	(a) 0	0	0	0	0	18,756	11,640,008,540

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	1,276,766	1,275,802		1,442,771	1,508,435
25.2	Guaranteed renewable (b)	7,074	7,069			
25.3	Non-renewable for stated reasons only (b)	18,453	18,439			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	1,302,293	1,301,310	0	1,442,771	1,508,435
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,302,293	1,301,310	0	1,442,771	1,508,435

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

DIRECT BUSINESS IN THE STATE OF UTAH DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	4,991,003				4,991,003
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	4,991,003	0	0	0	4,991,003
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	2,905,375				2,905,375
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	306,868				306,868
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	3,212,243	0	0	0	3,212,243
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	1	100,000							1	100,000
17. Incurred during current year	7	3,005,375							7	3,005,375
Settled during current year:										
18.1 By payment in full	3	905,375							3	905,375
18.2 By payment on compromised claims									0	0
18.3 Totals paid	3	905,375	0	0	0	0	0	0	3	905,375
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	3	905,375	0	0	0	0	0	0	3	905,375
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	5	2,200,000	0	0	0	0	0	0	5	2,200,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	4,271	2,774,248,096		(a)					4,271	2,774,248,096
21. Issued during year	907	668,160,272							907	668,160,272
22. Other changes to in force (Net)	(301)	(201,896,140)							(301)	(201,896,140)
23. In force December 31 of current year	4,877	3,240,512,228	0	(a) 0	0	0	0	0	4,877	3,240,512,228

(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 Employee Health Benefits Plan premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	117,174	117,086			
25.2 Guaranteed renewable (b)	7,127	7,122			
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)	124,301	124,208	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	124,301	124,208	0	0	0

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

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DIRECT BUSINESS IN THE STATE OF VIRGINIA DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	10,834,679				10,834,679
2.	Annuity considerations	1,460				1,460
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	10,836,139	0	0	0	10,836,139
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	15,772,331				15,772,331
10.	Matured endowments					0
11.	Annuity benefits	59,041				59,041
12.	Surrender values and withdrawals for life contracts	3,484,901				3,484,901
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	19,316,273	0	0	0	19,316,273
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year		0							0	0
17.	Incurred during current year	20	14,685,548							20	14,685,548
	Settled during current year:										
18.1	By payment in full	19	14,477,447							19	14,477,447
18.2	By payment on compromised claims									0	0
18.3	Totals paid	19	14,477,447	0	0	0	0	0	0	19	14,477,447
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	19	14,477,447	0	0	0	0	0	0	19	14,477,447
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	208,101	0	0	0	0	0	0	1	208,101
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	6,892	4,123,812,480		(a)					6,892	4,123,812,480
21.	Issued during year	611	451,526,477							611	451,526,477
22.	Other changes to in force (Net)	(500)	(298,516,757)							(500)	(298,516,757)
23.	In force December 31 of current year	7,003	4,276,822,200	0	(a) 0	0	0	0	0	7,003	4,276,822,200

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	314,414	314,177		759,175	786,486
25.2	Guaranteed renewable (b)	7,299	7,293			
25.3	Non-renewable for stated reasons only (b)	7,301	7,295			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	329,014	328,765	0	759,175	786,486
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	329,014	328,765	0	759,175	786,486

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

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

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	15,354				15,354
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	15,354	0	0	0	15,354
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					0
10.	Matured endowments					0
11.	Annuity benefits					0
12.	Surrender values and withdrawals for life contracts					0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	0	0	0	0	0
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

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

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

NONE

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

DIRECT BUSINESS IN THE STATE OF VERMONT DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	528,776				528,776
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	528,776	0	0	0	528,776
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	180,000				180,000
10. Matured endowments					0
11. Annuity benefits	729				729
12. Surrender values and withdrawals for life contracts	14,079				14,079
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	194,808	0	0	0	194,808
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year	1	180,000							1	180,000
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	180,000	0	0	0	0	0	0	1	180,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	491	236,716,613		(a)					491	236,716,613
21. Issued during year	50	39,402,146							50	39,402,146
22. Other changes to in force (Net)	(21)	(6,950,153)							(21)	(6,950,153)
23. In force December 31 of current year	520	269,168,606	0	(a) 0	0	0	0	0	520	269,168,606

(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 Employee Health Benefits Plan premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	5,401	5,397			
25.2 Guaranteed renewable (b)	887	886			
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)	6,288	6,283	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	6,288	6,283	0	0	0

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

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

DIRECT BUSINESS IN THE STATE OF WASHINGTON DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	11,655,046				11,655,046
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	11,655,046	0	0	0	11,655,046
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	2,983,046				2,983,046
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	1,184,966				1,184,966
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	4,168,012	0	0	0	4,168,012
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year		0							0	0
17. Incurred during current year	13	2,983,046							13	2,983,046
Settled during current year:										
18.1 By payment in full	10	2,640,000							10	2,640,000
18.2 By payment on compromised claims									0	0
18.3 Totals paid	10	2,640,000	0	0	0	0	0	0	10	2,640,000
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	10	2,640,000	0	0	0	0	0	0	10	2,640,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	3	343,046	0	0	0	0	0	0	3	343,046
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	5,762	3,241,108,571		(a)					5,762	3,241,108,571
21. Issued during year	548	406,271,908							548	406,271,908
22. Other changes to in force (Net)	(357)	(183,111,667)							(357)	(183,111,667)
23. In force December 31 of current year	5,953	3,464,268,812	0	(a) 0	0	0	0	0	5,953	3,464,268,812

(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 Employee Health Benefits Plan premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	339,749	339,492		4,909,168	4,903,460
25.2 Guaranteed renewable (b)	23,918	23,899		24,000	1,444
25.3 Non-renewable for stated reasons only (b)	28,373	28,352			
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	392,040	391,743	0	4,933,168	4,904,904
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	392,040	391,743	0	4,933,168	4,904,904

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

DIRECT BUSINESS IN THE STATE OF WISCONSIN DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	11,367,998				11,367,998
2.	Annuity considerations					0
3.	Deposit-type contract funds	5,678	XXX		XXX	5,678
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	11,373,676	0	0	0	11,373,676
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	3,944,250				3,944,250
10.	Matured endowments					0
11.	Annuity benefits	35,424				35,424
12.	Surrender values and withdrawals for life contracts	1,072,786				1,072,786
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	5,052,460	0	0	0	5,052,460
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	9	700,030							9	700,030
17.	Incurred during current year	13	4,294,250							13	4,294,250
	Settled during current year:										
18.1	By payment in full	11	3,269,975							11	3,269,975
18.2	By payment on compromised claims									0	0
18.3	Totals paid	11	3,269,975	0	0	0	0	0	0	11	3,269,975
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	11	3,269,975	0	0	0	0	0	0	11	3,269,975
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	11	1,724,305	0	0	0	0	0	0	11	1,724,305
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	6,452	3,121,946,381		(a)					6,452	3,121,946,381
21.	Issued during year	365	244,477,340							365	244,477,340
22.	Other changes to in force (Net)	(523)	(245,303,584)							(523)	(245,303,584)
23.	In force December 31 of current year	6,294	3,121,120,137	0	(a) 0	0	0	0	0	6,294	3,121,120,137

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

ACCIDENT AND HEALTH INSURANCE

		1 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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	338,685	338,429		85,000	84,179
25.2	Guaranteed renewable (b)	34,149	34,123		1,728	2,985
25.3	Non-renewable for stated reasons only (b)	20,039	20,024			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	392,873	392,576	0	86,728	87,164
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	392,873	392,576	0	86,728	87,164

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

DIRECT BUSINESS IN THE STATE OF WEST VIRGINIA DURING THE YEAR

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

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	1,166,389				1,166,389
2.	Annuity considerations	6,400				6,400
3.	Deposit-type contract funds	225,154	XXX		XXX	225,154
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	1,397,943	0	0	0	1,397,943
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit					0
6.2	Applied to pay renewal premiums					0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4	Other					0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit					0
7.2	Applied to provide paid-up annuities					0
7.3	Other					0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	684,430				684,430
10.	Matured endowments					0
11.	Annuity benefits	29,050				29,050
12.	Surrender values and withdrawals for life contracts	416,781				416,781
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health					0
15.	Totals	1,130,261	0	0	0	1,130,261
	DETAILS OF WRITE-INS					
1301.						0
1302.						0
1303.						0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year									0	0
17.	Incurred during current year	4	634,826							4	634,826
	Settled during current year:										
18.1	By payment in full	4	634,826							4	634,826
18.2	By payment on compromised claims									0	0
18.3	Totals paid	4	634,826	0	0	0	0	0	0	4	634,826
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	4	634,826	0	0	0	0	0	0	4	634,826
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,195	394,407,255		(a)					1,195	394,407,255
21.	Issued during year	48	25,484,428							48	25,484,428
22.	Other changes to in force (Net)	(88)	(38,673,887)							(88)	(38,673,887)
23.	In force December 31 of current year	1,155	381,217,796	0	(a) 0	0	0	0	0	1,155	381,217,796

(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 Employee Health Benefits Plan premium (b)					
24.2	Credit (group and individual)					
24.3	Collectively renewable policies (b)					
24.4	Medicare Title XVIII exempt from state taxes or fees					
	Other Individual Policies:					
25.1	Non-cancelable (b)	266,170	265,969		490,083	487,533
25.2	Guaranteed renewable (b)	3,044	3,042			
25.3	Non-renewable for stated reasons only (b)	2,203	2,201			
25.4	Other accident only					
25.5	All other (b)					
25.6	Totals (Sum of Lines 25.1 to 25.5)	271,417	271,212	0	490,083	487,533
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	271,417	271,212	0	490,083	487,533

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

DIRECT BUSINESS IN THE STATE OF WYOMING DURING THE YEAR

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

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance	1,774,699				1,774,699
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	1,774,699	0	0	0	1,774,699
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	50,000				50,000
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	321,268				321,268
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	371,268	0	0	0	371,268
DETAILS OF WRITE-INS					
1301.					0
1302.					0
1303.					0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year									0	0
17. Incurred during current year	1	50,000							1	50,000
Settled during current year:										
18.1 By payment in full	1	50,000							1	50,000
18.2 By payment on compromised claims									0	0
18.3 Totals paid	1	50,000	0	0	0	0	0	0	1	50,000
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	1	50,000	0	0	0	0	0	0	1	50,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	819	328,947,294		(a)					819	328,947,294
21. Issued during year	97	72,402,539							97	72,402,539
22. Other changes to in force (Net)	(62)	(21,170,558)							(62)	(21,170,558)
23. In force December 31 of current year	854	380,179,275	0	(a) 0	0	0	0	0	854	380,179,275

(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 Employee Health Benefits Plan premium (b)					
24.2 Credit (group and individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)	25,718	25,698			
25.2 Guaranteed renewable (b)	516	516			
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)	26,234	26,214	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	26,234	26,214	0	0	0

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

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

Interest Maintenance Reserve

	1 Amount
1. Reserve as of December 31, prior year	10,145,475
2. Current year's realized pre-tax capital gains/(losses) of $.....4,387,192 transferred into the reserve net of taxes of $.....1,535,517	2,851,676
3. Adjustment for current year's liability gains/(losses) released from the reserve	0
4. Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3)	12,997,151
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)	2,650,447
6. Reserve as of December 31, current year (Line 4 minus Line 5)	10,346,703

Amortization

Year of Amortization	1 Reserve as of December 31, Prior Year	2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3 Adjustment for Current Year's Liability Gains/(Losses) Released from the Reserve	4 Balance Before Reduction for the Current Year's Amortization (Cols. 1 + 2 + 3)
1. 2014	2,155,837	494,610		2,650,447
2. 2015	1,640,973	803,701		2,444,674
3. 2016	1,250,983	544,295		1,795,278
4. 2017	984,258	413,374		1,397,632
5. 2018	863,507	279,053		1,142,560
6. 2019	770,484	137,971		908,455
7. 2020	650,210	58,597		708,807
8. 2021	505,960	46,844		552,804
9. 2022	393,269	34,135		427,404
10. 2023	294,967	21,426		316,393
11. 2024	210,490	7,768		218,258
12. 2025	161,119	750		161,869
13. 2026	111,359	799		112,158
14. 2027	56,056	837		56,893
15. 2028	14,779	921		15,700
16. 2029	(2,435)	956		(1,479)
17. 2030	(6,647)	937		(5,710)
18. 2031	(4,180)	795		(3,385)
19. 2032	2,156	653		2,809
20. 2033	6,169	510		6,679
21. 2034	10,318	347		10,665
22. 2035	12,422	274		12,696
23. 2036	13,252	286		13,538
24. 2037	13,710	297		14,007
25. 2038	12,733	321		13,054
26. 2039	10,080	332		10,412
27. 2040	7,426	309		7,735
28. 2041	4,783	245		5,028
29. 2042	1,435	181		1,616
30. 2043		117		117
31. 2044 and Later		35		35
32. Total (Lines 1 to 31)	10,145,475	2,851,676	0	12,997,151

ASSET VALUATION RESERVE

	Default Component			Equity Component			7
	1 Other Than Mortgage Loans	2 Mortgage Loans	3 Total (Cols. 1 + 2)	4 Common Stock	5 Real Estate and Other Invested Assets	6 Total (Cols. 4 + 5)	Total Amount (Cols. 3 + 6)
1. Reserve as of December 31, prior year	14,033,388	4,845,433	18,878,822	6,862,337	32,006	6,894,343	25,773,165
2. Realized capital gains/(losses) net of taxes - General Account	(45,562)	(42,795)	(88,357)			0	(88,357)
3. Realized capital gains/(losses) net of taxes - Separate Accounts			0			0	0
4. Unrealized capital gains/(losses) - net of deferred taxes - General Account	(2)		(2)	(73,149)		(73,149)	(73,151)
5. Unrealized capital gains/(losses) - net of deferred taxes - Separate Accounts			0			0	0
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves			0			0	0
7. Basic contribution	3,927,352	461,253	4,388,605			0	4,388,605
8. Accumulated balances (Lines 1 through 5, minus 6 plus 7)	17,915,177	5,263,891	23,179,068	6,789,188	32,006	6,821,194	30,000,262
9. Maximum reserve	19,073,006	2,681,718	21,754,725	15,057,112	20,674	15,077,785	36,832,510
10. Reserve objective	13,241,039	2,063,332	15,304,371	15,057,112	20,674	15,077,785	30,382,156
11. 20% of (Line 10 minus Line 8)	(934,828)	(640,112)	(1,574,939)	1,653,585	(2,267)	1,651,318	76,379
12. Balance before transfers (Lines 8 + 11)	16,980,349	4,623,780	21,604,129	8,442,773	29,740	8,472,512	30,076,641
13. Transfers	1,942,062	(1,942,062)	0	9,066	(9,066)	0	0
14. Voluntary contribution			0			0	0
15. Adjustment down to maximum/up to zero			0			0	0
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	18,922,411	2,681,718	21,604,129	8,451,839	20,674	8,472,512	30,076,641

ASSET VALUATION RESERVE

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 (Cols. 1 + 2 + 3)	Basic Contribution 5 Factor	Basic Contribution 6 Amount (Cols. 4 x 5)	Reserve Objective 7 Factor	Reserve Objective 8 Amount (Cols. 4 x 7)	Maximum Reserve 9 Factor	Maximum Reserve 10 Amount (Cols. 4 x 9)
		LONG-TERM BONDS										
1		Exempt obligations	73,846,891	XXX	XXX	73,846,891	0.0000	0	0.0000	0	0.0000	0
2	1	Highest quality	1,332,834,245	XXX	XXX	1,332,834,245	0.0004	533,134	0.0023	3,065,519	0.0030	3,998,503
3	2	High quality	922,288,758	XXX	XXX	922,288,758	0.0019	1,752,349	0.0058	5,349,275	0.0090	8,300,599
4	3	Medium quality	113,122,941	XXX	XXX	113,122,941	0.0093	1,052,043	0.0230	2,601,828	0.0340	3,846,180
5	4	Low quality	15,375,178	XXX	XXX	15,375,178	0.0213	327,491	0.0530	814,884	0.0750	1,153,138
6	5	Lower quality	4,924,123	XXX	XXX	4,924,123	0.0432	212,722	0.1100	541,654	0.1700	837,101
7	6	In or near default	3,646,259	XXX	XXX	3,646,259	0.0000	0	0.2000	729,252	0.2000	729,252
8		Total unrated multi-class securities acquired by conversion		XXX	XXX	0	XXX	0	XXX	0	XXX	
9		Total bonds (sum of Lines 1 through 8)	2,466,038,395	XXX	XXX	2,466,038,395	XXX	3,877,739	XXX	13,102,411	XXX	18,864,773
		PREFERRED STOCKS										
10	1	Highest quality	3,120,000	XXX	XXX	3,120,000	0.0004	1,248	0.0023	7,176	0.0030	9,360
11	2	High quality	10,750,000	XXX	XXX	10,750,000	0.0019	20,425	0.0058	62,350	0.0090	96,750
12	3	Medium quality	2,986,000	XXX	XXX	2,986,000	0.0093	27,770	0.0230	68,678	0.0340	101,524
13	4	Low quality	7,997	XXX	XXX	7,997	0.0213	170	0.0530	424	0.0750	600
14	5	Lower quality		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
15	6	In or near default		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
16		Affiliated life with AVR		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
17		Total preferred stocks (sum of Lines 10 through 16)	16,863,997	XXX	XXX	16,863,997	XXX	49,613	XXX	138,628	XXX	208,234
		SHORT-TERM BONDS										
18		Exempt obligations		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
19	1	Highest quality		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
20	2	High quality		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
21	3	Medium quality		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
22	4	Low quality		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
23	5	Lower quality		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
24	6	In or near default		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
25		Total short-term bonds (sum of Lines 18 thru 24)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
		DERIVATIVE INSTRUMENTS										
26		Exchange traded		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
27	1	Highest quality		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
28	2	High quality		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
29	3	Medium quality		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
30	4	Low quality		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
31	5	Lower quality		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
32	6	In or near default		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
33		Total derivative instruments	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
34		Total (Lines 9 + 17 + 25 + 33)	2,482,902,392	XXX	XXX	2,482,902,392	XXX	3,927,352	XXX	13,241,039	XXX	19,073,006

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 (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
		MORTGAGE LOANS										
		In good standing:										
35		Farm mortgages - CM1 - highest quality			XXX	0	0.0010	0	0.0050	0	0.0065	0
36		Farm mortgages - CM2 - high quality			XXX	0	0.0035	0	0.0100	0	0.0130	0
37		Farm mortgages - CM3 - medium quality			XXX	0	0.0060	0	0.0175	0	0.0225	0
38		Farm mortgages - CM4 - low medium quality			XXX	0	0.0105	0	0.0300	0	0.0375	0
39		Farm mortgages - CM5 - low quality			XXX	0	0.0160	0	0.0425	0	0.0550	0
40		Residential mortgages-insured or guaranteed			XXX	0	0.0003	0	0.0006	0	0.0010	0
41		Residential mortgages-all other			XXX	0	0.0013	0	0.0030	0	0.0040	0
42		Commercial mortgages-insured or guaranteed			XXX	0	0.0003	0	0.0006	0	0.0010	0
43		Commercial mortgages-all other - CM1 - highest quality	347,475,298		XXX	347,475,298	0.0010	347,475	0.0050	1,737,376	0.0065	2,258,589
44		Commercial mortgages-all other - CM2 - high quality	28,300,724		XXX	28,300,724	0.0035	99,053	0.0100	283,007	0.0130	367,909
45		Commercial mortgages-all other - CM3 - medium quality	2,454,198		XXX	2,454,198	0.0060	14,725	0.0175	42,948	0.0225	55,219
46		Commercial mortgages-all other - CM4 - low medium quality			XXX	0	0.0105	0	0.0300	0	0.0375	0
47		Commercial mortgages-all other - CM5 - low quality			XXX	0	0.0160	0	0.0425	0	0.0550	0
		Overdue, not in process:										
48		Farm mortgages			XXX	0	0.0420	0	0.0760	0	0.1200	0
49		Residential mortgages-insured or guaranteed			XXX	0	0.0005	0	0.0012	0	0.0020	0
50		Residential mortgages-all other			XXX	0	0.0025	0	0.0058	0	0.0090	0
51		Commercial mortgages-insured or guaranteed			XXX	0	0.0005	0	0.0012	0	0.0020	0
52		Commercial mortgages-all other			XXX	0	0.0420	0	0.0760	0	0.1200	0
		In process of foreclosure:										
53		Farm mortgages			XXX	0	0.0000	0	0.1700	0	0.1700	0
54		Residential mortgages-insured or guaranteed			XXX	0	0.0000	0	0.0040	0	0.0040	0
55		Residential mortgages-all other			XXX	0	0.0000	0	0.0130	0	0.0130	0
56		Commercial mortgages-insured or guaranteed			XXX	0	0.0000	0	0.0040	0	0.0040	0
57		Commercial mortgages-all other			XXX	0	0.0000	0	0.1700	0	0.1700	0
58		Total Schedule B mortgages (sum of Lines 35 through 57)	378,230,220	0	XXX	378,230,220	XXX	461,253	XXX	2,063,332	XXX	2,681,718
59		Schedule DA mortgages			XXX	0	0.0030	0	0.0100	0	0.0130	0
60		Total mortgage loans on real estate (Lines 58 + 59)	378,230,220	0	XXX	378,230,220	XXX	461,253	XXX	2,063,332	XXX	2,681,718

ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Equity and Other Invested Asset 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 (Cols. 1 + 2 + 3)	Basic Contribution 5 Factor	Basic Contribution 6 Amount (Cols. 4 x 5)	Reserve Objective 7 Factor	Reserve Objective 8 Amount (Cols. 4 x 7)	Maximum Reserve 9 Factor	Maximum Reserve 10 Amount (Cols. 4 x 9)
		COMMON STOCK										
1		Unaffiliated public	3,651	XXX	XXX	3,651	0.0000	0	(a) 0.2000	730	(a) 0.2000	730
2		Unaffiliated private	94,102,385	XXX	XXX	94,102,385	0.0000	0	0.1600	15,056,382	0.1600	15,056,382
3		Federal Home Loan Bank		XXX	XXX	0	0.0000	0	0.0050	0	0.0080	0
4		Affiliated life with AVR		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
		Affiliated Investment Subsidiary:										
5		Fixed income exempt obligations				0	XXX		XXX		XXX	
6		Fixed income highest quality				0	XXX		XXX		XXX	
7		Fixed income high quality				0	XXX		XXX		XXX	
8		Fixed income medium quality				0	XXX		XXX		XXX	
9		Fixed income low quality				0	XXX		XXX		XXX	
10		Fixed income lower quality				0	XXX		XXX		XXX	
11		Fixed income in or near default				0	XXX		XXX		XXX	
12		Unaffiliated common stock public				0	0.0000	0	(a)	0	(a)	0
13		Unaffiliated common stock private				0	0.0000	0	0.1600	0	0.1600	0
14		Real estate				0	(b)	0	(b)	0	(b)	0
15		Affiliated - certain other (see SVO Purposes and Procedures manual)		XXX	XXX	0	0.0000	0	0.1300	0	0.1300	0
16		Affiliated - all other		XXX	XXX	0	0.0000	0	0.1600	0	0.1600	0
17		Total common stock (sum of Lines 1 through 16)	94,106,036	0	0	94,106,036	XXX	0	XXX	15,057,112	XXX	15,057,112
		REAL ESTATE										
18		Home office property (General Account only)				0	0.0000	0	0.0750	0	0.0750	0
19		Investment properties				0	0.0000	0	0.0750	0	0.0750	0
20		Properties acquired in satisfaction of debt				0	0.0000	0	0.1100	0	0.1100	0
21		Total real estate (sum of Lines 18 through 20)	0	0	0	0	XXX	0	XXX	0	XXX	0
		OTHER INVESTED ASSETS										
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS										
22		Exempt obligations		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
23	1	Highest quality		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
24	2	High quality		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
25	3	Medium quality		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
26	4	Low quality		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
27	5	Lower quality		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
28	6	In or near default		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
29		Total with bond characteristics (sum of Lines 22 through 28)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0

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 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution 5 Factor	Basic Contribution 6 Amount (Cols. 4 x 5)	Reserve Objective 7 Factor	Reserve Objective 8 Amount (Cols. 4 x 7)	Maximum Reserve 9 Factor	Maximum Reserve 10 Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS										
30	1	Highest quality		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
31	2	High quality		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
32	3	Medium quality		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
33	4	Low quality		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
34	5	Lower quality		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
35	6	In or near default		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
36		Affiliated life with AVR		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
37		Total with preferred stock characteristics (sum of Lines 30 through 36)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS										
		In Good Standing Affiliated:										
38		Mortgages - CM1 - highest quality			XXX	0	0.0010	0	0.0050	0	0.0065	0
39		Mortgages - CM2 - high quality			XXX	0	0.0035	0	0.0100	0	0.0130	0
40		Mortgages - CM3 - medium quality			XXX	0	0.0060	0	0.0175	0	0.0225	0
41		Mortgages - CM4 - low medium quality			XXX	0	0.0105	0	0.0300	0	0.0375	0
42		Mortgages - CM5 - low quality			XXX	0	0.0160	0	0.0425	0	0.0550	0
43		Residential mortgages-insured or guaranteed			XXX	0	0.0003	0	0.0006	0	0.0010	0
44		Residential mortgages-all other		XXX	XXX	0	0.0013	0	0.0030	0	0.0040	0
45		Commercial mortgages-insured or guaranteed			XXX	0	0.0003	0	0.0006	0	0.0010	0
		Overdue, Not in Process Affiliated:										
46		Farm mortgages			XXX	0	0.0420	0	0.0760	0	0.1200	0
47		Residential mortgages-insured or guaranteed			XXX	0	0.0005	0	0.0012	0	0.0020	0
48		Residential mortgages-all other			XXX	0	0.0025	0	0.0058	0	0.0090	0
49		Commercial mortgages-insured or guaranteed			XXX	0	0.0005	0	0.0012	0	0.0020	0
50		Commercial mortgages-all other			XXX	0	0.0420	0	0.0760	0	0.1200	0
		In Process of foreclosure Affiliated:										
51		Farm mortgages			XXX	0	0.0000	0	0.1700	0	0.1700	0
52		Residential mortgages-insured or guaranteed			XXX	0	0.0000	0	0.0040	0	0.0040	0
53		Residential mortgages-all other			XXX	0	0.0000	0	0.0130	0	0.0130	0
54		Commercial mortgages-insured or guaranteed			XXX	0	0.0000	0	0.0040	0	0.0040	0
55		Commercial mortgages-all other			XXX	0	0.0000	0	0.1700	0	0.1700	0
56		Total Affiliated (Sum of Lines 38 through 55)	0	0	XXX	0	XXX	0	XXX	0	XXX	0
57		Unaffiliated - In Good Standing with Covenants			XXX	0	(c)	0	(c)	0	(c)	0
58		Unaffiliated - In Good Standing Defeased with Government Securities			XXX	0	0.0010	0	0.0050	0	0.0065	0
59		Unaffiliated - In Good Standing Primarily Senior			XXX	0	0.0035	0	0.0100	0	0.0130	0
60		Unaffiliated - In Good Standing All Other			XXX	0	0.0060	0	0.0175	0	0.0225	0
61		Unaffiliated - Overdue, Not in Process			XXX	0	0.0420	0	0.0760	0	0.1200	0
62		Unaffiliated - In Process of Foreclosure			XXX	0	0.0000	0	0.1700	0	0.1700	0
63		Total Unaffiliated (Sum of Lines 57 through 62)	0	0	XXX	0	XXX	0	XXX	0	XXX	0
64		Total with Mortgage Loan Characteristics (Lines 56 + 63)	0	0	XXX	0	XXX	0	XXX	0	XXX	0

NONE

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 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution 5 Factor	Basic Contribution 6 Amount (Cols. 4 x 5)	Reserve Objective 7 Factor	Reserve Objective 8 Amount (Cols. 4 x 7)	Maximum Reserve 9 Factor	Maximum Reserve 10 Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK										
65		Unaffiliated public		XXX	XXX	0	0.0000	0	(a)	0	(a)	0
66		Unaffiliated private	129,210	XXX	XXX	129,210	0.0000	0	0.1600	20,674	0.1600	20,674
67		Affiliated life with AVR		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
68		Affiliated certain other (see SVO Purposes and Procedures manual)		XXX	XXX	0	0.0000	0	0.1300	0	0.1300	0
69		Affiliated other - all other		XXX	XXX	0	0.0000	0	0.1600	0	0.1600	0
70		Total with Common Stock Characteristics (Sum of Lines 65 through 69)	129,210	XXX	XXX	129,210	XXX	0	XXX	20,674	XXX	20,674
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE										
71		Home office property (general account only)				0	0.0000	0	0.0750	0	0.0750	0
72		Investment properties				0	0.0000	0	0.0750	0	0.0750	0
73		Properties acquired in satisfaction of debt				0	0.0000	0	0.1100	0	0.1100	0
74		Total with Real Estate Characteristics (Sum of Lines 71 through 73)	0	0	0	0	XXX	0	XXX	0	XXX	0
		LOW INCOME HOUSING TAX CREDIT INVESTMENTS										
75		Guaranteed federal low income housing tax credit				0	0.0003	0	0.0006	0	0.0010	0
76		Non-guaranteed federal low income housing tax credit				0	0.0063	0	0.0120	0	0.0190	0
77		Guaranteed state low income housing tax credit				0	0.0003	0	0.0006	0	0.0010	0
78		Non-guaranteed state low income housing tax credit				0	0.0063	0	0.0120	0	0.0190	0
79		All other low income housing tax credit				0	0.0273	0	0.0600	0	0.0975	0
80		Total LIHTC (Sum of Lines 75 through 79)	0	0	0	0	XXX	0	XXX	0	XXX	0
		ALL OTHER INVESTMENTS										
81		NAIC 1 working capital finance investments		XXX		0	0.0000	0	0.0037	0	0.0037	0
82		NAIC 2 working capital finance investments		XXX		0	0.0000	0	0.0120	0	0.0120	0
83		Other invested assets - Schedule BA		XXX		0	0.0000	0	0.1300	0	0.1300	0
84		Other short-term invested assets - Schedule DA		XXX		0	0.0000	0	0.1300	0	0.1300	0
85		Total All Other (sum of Lines 81, 82, 83 and 84)	0	XXX	0	0	XXX	0	XXX	0	XXX	0
86		Total Other Invested Assets - Schedule BA & DA (Sum of Lines 29, 37, 64, 70, 74, 80 and 85)	129,210	0	0	129,210	XXX	0	XXX	20,674	XXX	20,674

(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.

ASSET VALUATION RESERVE (continued)

Basic Contributions, Reserve Objective and Maximum Reserve Calculations

Replications (Synthetic) Assets

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

NONE

SCHEDULE F

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

1 Contract Numbers	2 Claim Numbers	3 State of Residence of Claimant	4 Year of Claim for Death or Disability	5 Amount Claimed	6 Amount Paid During the Year	7 Amount Resisted Dec. 31 of Current Year	8 Why Compromised or Resisted
CLAIMS RESISTED DURING CURRENT YEAR							
Death Claims - Ordinary							
6997036	8625	CA	2013	2,000,000		2,000,000	Policy lapsed prior to the date of death due to non-payment of the required premium
6683329	9091	MO	2014	100,000		100,000	Policy lapsed prior to the date of death due to non-payment of the required premium
2799999. Death Claims - Ordinary				2,100,000	0	2,100,000	XXX
3199999. Subtotal - Resisted Death Claims				2,100,000	0	2,100,000	XXX
5299999. Subtotal - Claims Resisted of During Current Year				2,100,000	0	2,100,000	XXX
5399999. Totals				2,100,000	0	2,100,000	XXX

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

		Total		Group Accident and Health		Credit Accident and Health (Group and Individual)		Collectively Renewable		Other Individual Contracts									
										Non-Cancelable		Guaranteed Renewable		Non-Renewable for Stated Reasons Only		Other Accident Only		All Other	
		1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %	15 Amount	16 %	17 Amount	18 %
PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS																			
1.	Premiums written	64,166,803	XXX		XXX		XXX		XXX	61,009,431	XXX	3,009,535	XXX	147,837	XXX		XXX		XXX
2.	Premiums earned	64,637,424	XXX		XXX		XXX		XXX	61,558,545	XXX	2,917,883	XXX	160,996	XXX		XXX		XXX
3.	Incurred claims	55,877,939	86.4	0	0.0	0	0.0	0	0.0	54,855,604	89.1	942,414	32.3	79,921	49.6	0	0.0	0	0.0
4.	Cost containment expenses	269,963	0.4		0.0		0.0		0.0	264,245	0.4	5,552	0.2	166	0.1		0.0		0.0
5.	Incurred claims and cost containment expenses (Lines 3 and 4)	56,147,902	86.9	0	0.0	0	0.0	0	0.0	55,119,849	89.5	947,966	32.5	80,087	49.7	0	0.0	0	0.0
6	Increase in contract reserves	6,459,851	10.0	0	0.0	0	0.0	0	0.0	5,045,634	8.2	1,399,927	48.0	14,290	8.9	0	0.0	0	0.0
7	Commissions (a)	(721,742)	(1.1)		0.0		0.0		0.0	(724,284)	(1.2)	40,597	1.4	(38,055)	(23.6)		0.0		0.0
8	Other general insurance expenses	8,591,252	13.3		0.0		0.0		0.0	7,987,077	13.0	366,251	12.6	237,924	147.8		0.0		0.0
9	Taxes, licenses and fees	588,622	0.9		0.0		0.0		0.0	547,228	0.9	25,093	0.9	16,301	10.1		0.0		0.0
10	Total other expenses incurred	8,458,132	13.1	0	0.0	0	0.0	0	0.0	7,810,021	12.7	431,941	14.8	216,170	134.3	0	0.0	0	0.0
11.	Aggregate write-ins for deductions	3,967,077	6.1	0	0.0	0	0.0	0	0.0	3,805,127	6.2	139,808	4.8	22,142	13.8	0	0.0	0	0.0
12.	Gain from underwriting before dividends or refunds	(10,395,538)	(16.1)	0	0.0	0	0.0	0	0.0	(10,222,086)	(16.6)	(1,759)	(0.1)	(171,693)	(106.6)	0	0.0	0	0.0
13.	Dividends or refunds	0	0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0
14.	Gain from underwriting after dividends or refunds	(10,395,538)	(16.1)	0	0.0	0	0.0	0	0.0	(10,222,086)	(16.6)	(1,759)	(0.1)	(171,693)	(106.6)	0	0.0	0	0.0
DETAILS OF WRITE-INS																			
1101.	Surrender payments	3,967,077	6.1		0.0		0.0		0.0	3,805,127	6.2	139,808	4.8	22,142	13.8		0.0		0.0
1102.		0	0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0
1103.		0	0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1199.	Total (Lines 1101 thru 1103 plus 1198) (Line 11 above)	3,967,077	6.1	0	0.0	0	0.0	0	0.0	3,805,127	6.2	139,808	4.8	22,142	13.8	0	0.0	0	0.0

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

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (continued)

	1	2	3	4	Other Individual Contracts				
					5	6	7	8	9
	Total	Group Accident and Health	Credit Accident and Health (Group and Individual)	Collectively Renewable	Non-Cancelable	Guaranteed Renewable	Non-Renewable for Stated Reasons Only	Other Accident Only	All Other
PART 2 - RESERVES AND LIABILITIES									
A. Premium Reserves:									
1. Unearned premiums	(1,750,002)				(1,825,627)	141,800	(66,175)		
2. Advance premiums	139,390				134,814	3,579	997		
3. Reserve for rate credits	0								
4. Total premium reserves, current year	(1,610,612)	0	0	0	(1,690,813)	145,379	(65,178)	0	0
5. Total premium reserves, prior year	(1,139,991)				(1,141,699)	53,727	(52,019)		
6. Increase in total premium reserves	(470,621)	0	0	0	(549,114)	91,652	(13,159)	0	0
B. Contract Reserves:									
1. Additional reserves (a)	31,250,680				26,640,062	4,262,348	348,270		
2. Reserve for future contingent benefits	0								
3. Total contract reserves, current year	31,250,680	0	0	0	26,640,062	4,262,348	348,270	0	0
4. Total contract reserves, prior year	24,790,829				21,594,428	2,862,421	333,980		
5. Increase in contract reserves	6,459,851	0	0	0	5,045,634	1,399,927	14,290	0	0
C. Claim Reserves and Liabilities:									
1. Total current year	68,656,378	0	0	0	67,202,173	1,411,970	42,235	0	0
2. Total prior year	21,017,573				20,170,928	803,847	42,798		
3. Increase	47,638,805	0	0	0	47,031,245	608,123	(563)	0	0

PART 3 - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES									
1. Claims Paid During the Year:									
1.1 On claims incurred prior to current year	7,766,606				7,382,993	303,129	80,484		
1.2 On claims incurred during current year	472,528				441,366	31,162			
2. Claim Reserves and Liabilities, December 31, Current Year:									
2.1 On claims incurred prior to current year	64,647,177				63,759,635	887,542			
2.2 On claims incurred during current year	4,009,201				3,442,538	524,428	42,235		
3. Test:									
3.1 Lines 1.1 and 2.1	72,413,783	0	0	0	71,142,628	1,190,671	80,484	0	0
3.2 Claim reserves and liabilities, December 31, prior year	21,017,573				20,170,928	803,847	42,798		
3.3 Line 3.1 minus Line 3.2	51,396,210	0	0	0	50,971,700	386,824	37,686	0	0

PART 4 - REINSURANCE									
A. Reinsurance Assumed:									
1. Premiums written	664,770				592,907	70,906	957		
2. Premiums earned	612,773				545,034	66,784	955		
3. Incurred claims	856,316				750,663	105,653			
4. Commissions	51,077				45,172	5,905			
B. Reinsurance Ceded:									
1. Premiums written	(44,911,985)				(43,133,812)	(2,146,122)	367,949		
2. Premiums earned	(47,265,427)				(45,481,347)	(2,139,894)	355,814		
3. Incurred claims	(35,742,748)				(34,552,110)	(626,597)	(564,041)		
4. Commissions	3,190,272				3,068,102	23,092	99,078		

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

SCHEDULE H - PART 5 - HEALTH CLAIMS

		1 Medical	2 Dental	3 Other	4 Total
A.	Direct:				
1.	Incurred claims			19,278,875	19,278,875
2.	Beginning claim reserves and liabilities			162,541,968	162,541,968
3.	Ending claim reserves and liabilities			155,620,632	155,620,632
4.	Claims paid	0	0	26,200,211	26,200,211
B.	Assumed Reinsurance:				
5.	Incurred claims			856,316	856,316
6.	Beginning claim reserves and liabilities			8,129,391	8,129,391
7.	Ending claim reserves and liabilities			7,637,506	7,637,506
8.	Claims paid	0	0	1,348,201	1,348,201
C.	Ceded Reinsurance:				
9.	Incurred claims			(35,742,748)	(35,742,748)
10.	Beginning claim reserves and liabilities			152,788,348	152,788,348
11.	Ending claim reserves and liabilities			101,169,262	101,169,262
12.	Claims paid	0	0	15,876,338	15,876,338
D.	Net:				
13.	Incurred claims	0	0	55,877,939	55,877,939
14.	Beginning claim reserves and liabilities	0	0	17,883,011	17,883,011
15.	Ending claim reserves and liabilities	0	0	62,088,876	62,088,876
16.	Claims paid	0	0	11,672,074	11,672,074
E.	Net Incurred Claims and Cost Containment Expenses:				
17.	Incurred claims and cost containment expenses			56,147,900	56,147,900
18.	Beginning reserves and liabilities			17,884,259	17,884,259
19.	Ending reserves and liabilities			62,095,376	62,095,376
20.	Paid claims and cost containment expenses	0	0	11,936,783	11,936,783

SCHEDULE S - PART 1 - SECTION 1

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

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

NONE

SCHEDULE S - PART 1 - SECTION 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Premiums	8 Unearned Premiums	9 Reserve Liability Other Than for Unearned Premiums	10 Reinsurance Payable on Paid and Unpaid Losses	11 Modified Coinsurance Reserve	12 Funds Withheld Under Coinsurance
Non-Affiliates - U.S. Non-Affiliates											
61301	47-0098400	05/01/1985	Ameritas Life Insurance Corporation	NE	CO/I	217,516	32,545	3,244,748	13,752		
64017	75-0300900	11/23/1987	Conseco Variable Insurance Company	TX	CO/I	297,947	59,989	4,505,435	84,562		
57320	47-0339250	09/09/1990	Woodmen of the World	NE	CO/I	142,623	18,098	1,905,275	13,561		
0899999.	Total - Non-Affiliates - U.S. Non-Affiliates					658,086	110,632	9,655,458	111,875	0	0
1099999.	Total - Non-Affiliates					658,086	110,632	9,655,458	111,875	0	0
1199999.	Total - U.S.					658,086	110,632	9,655,458	111,875	0	0
9999999.	Total					658,086	110,632	9,655,458	111,875	0	0

SCHEDULE S - PART 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 Unpaid Losses
Life and Annuity - Affiliates - U.S. - Captive						
13575	26-3791519	03/23/2002	Montgomery Re	VT		667,322
13575	26-3791519	04/01/2004	Montgomery Re	VT		2,448,711
13575	26-3791519	01/01/2011	Montgomery Re	VT		951,572
15363	80-0955278	01/01/2009	Kenwood Re	VT		151,185
15363	80-0955278	01/01/2012	Kenwood Re	VT		4,006,403
15363	80-0955278	01/01/2014	Kenwood Re	VT		1,700,831
0199999.	Total - Life and Annuity Affiliates - U.S. - Captive				0	9,926,024
Life and Annuity - Affiliates - U.S. - Other						
67172	31-0397080	10/01/2009	The Ohio National Life Insurance Comp	OH		791,739
0299999.	Total - Life and Annuity Affiliates - U.S. - Other				0	791,739
0399999.	Total - Life and Annuity Affiliates - U.S. - Total				0	10,717,763
Life and Annuity - Affiliates - Non-U.S. - Other						
80659	38-0397420	04/01/2004	The Canada Life Assurance Company	CAN	45,000	54,000
00000	AA-3190770	01/01/2006	Ace Tempest Life Reinsurance	BMU	10,961	39,896
0599999.	Total - Life and Annuity Affiliates - Non-U.S. - Other				55,961	93,896
0699999.	Total - Life and Annuity Affiliates - Non-U.S. - Total				55,961	93,896
0799999.	Total - Life and Annuity Affiliates				55,961	10,811,659
Life and Annuity - Non-Affiliates - U.S. Non-Affiliates						
90611	41-1366075	01/01/1987	Allianz Life Insurance Co. of North Amer	MN		275,000
90611	41-1366075	04/15/1999	Allianz Life Insurance Co. of North Amer	MN		33,750
90611	41-1366075	07/31/2001	Allianz Life Insurance Co. of North Amer	MN	330,066	207,042
90611	41-1366075	04/01/2003	Allianz Life Insurance Co. of North Amer	MN	135,000	81,000
39845	48-0921045	09/01/1967	Employer's Reassurance Corporation	KS	1,957	
86258	13-2572994	04/01/2004	General & Cologne Life Re of America	CT	2,820	9,724
86258	13-2572994	01/01/2006	General & Cologne Life Re of America	CT		79,792
97071	13-3126819	10/10/2009	Generali USA Life Reassurance Company	MO		250,000
88340	59-2859797	12/01/2005	Hannover Life Reassurance Comp of America	FL		112,500
88340	59-2859797	01/01/2006	Hannover Life Reassurance Comp of America	FL		135,000
88340	59-2859797	01/01/2010	Hannover Life Reassurance Comp of America	FL		16,800
65676	35-0472300	03/01/2000	The Lincoln National Life Insurance Comp	IN		135,000
65676	35-0472300	09/05/2000	The Lincoln National Life Insurance Comp	IN		46,509
65676	35-0472300	04/15/1999	The Lincoln National Life Insurance Comp	IN		33,750
65676	35-0472300	07/31/2001	The Lincoln National Life Insurance Comp	IN	29,988	206,917
65676	35-0472300	01/01/2002	The Lincoln National Life Insurance Comp	IN	5,670	
66346	58-0828824	04/15/1999	Munich American Reassurance Company	GA		33,750
66346	58-0828824	07/31/2001	Munich American Reassurance Company	GA	660,132	414,082
66346	58-0828824	01/01/2002	Munich American Reassurance Company	GA	8,165	
66346	58-0828824	04/01/2003	Munich American Reassurance Company	GA	472,500	220,500
66346	58-0828824	04/01/2004	Munich American Reassurance Company	GA	225,000	189,000
66346	58-0828824	04/01/2004	Munich American Reassurance Company	GA		9,724
66346	58-0828824	01/19/2005	Munich American Reassurance Company	GA	450,000	
66346	58-0828824	09/01/2005	Munich American Reassurance Company	GA		
66346	58-0828824	12/01/2005	Munich American Reassurance Company	GA		247,500
66346	58-0828824	01/01/2006	Munich American Reassurance Company	GA		88,994
66346	58-0828824	06/04/2007	Munich American Reassurance Company	GA	375,000	975,000
66346	58-0828824	10/01/2007	Munich American Reassurance Company	GA	126,674	252,616
93572	43-1235868	01/01/1987	RGA Reinsurance Company	MO		241,263
93572	43-1235868	04/15/1999	RGA Reinsurance Company	MO		33,750
93572	43-1235868	07/31/2001	RGA Reinsurance Company	MO	329,868	206,917
93572	43-1235868	07/31/2001	RGA Reinsurance Company	MO		756,618
93572	43-1235868	04/01/2004	RGA Reinsurance Company	MO		9,724
93572	43-1235868	10/01/2007	RGA Reinsurance Company	MO	126,674	252,616
68713	84-0499703	10/01/1995	Security Life of Denver Insurance Co	CO		20,000
68713	84-0499703	06/01/1998	Security Life of Denver Insurance Co	CO		225,000
68713	84-0499703	06/08/1998	Security Life of Denver Insurance Co	CO		46,509
68713	84-0499703	09/05/2000	Security Life of Denver Insurance Co	CO	330,066	207,042
68713	84-0499703	07/31/2001	Security Life of Denver Insurance Co	CO	11,000	
68713	84-0499703	01/01/2002	Security Life of Denver Insurance Co	CO		535,111
68713	84-0499703	05/01/2002	Security Life of Denver Insurance Co	CO	67,500	103,500
68713	84-0499703	04/01/2003	Security Life of Denver Insurance Co	CO	135,000	27,000
68713	84-0499703	04/01/2004	Security Life of Denver Insurance Co	CO		9,724
82627	06-0839705	01/01/1987	Swiss Re Life & Health America, Inc	CT		15,000
82627	06-0839705	09/05/2000	Swiss Re Life & Health America, Inc	CT		46,509
82627	06-0839705	01/01/2002	Swiss Re Life & Health America, Inc	CT	8,500	
82627	06-0839705	01/01/2006	Swiss Re Life & Health America, Inc	CT		191,978
82627	06-0839705	06/04/2007	Swiss Re Life & Health America, Inc	CT	125,000	975,000
82627	06-0839705	01/01/2010	Swiss Re Life & Health America, Inc	CT		16,800
87572	23-2038295	01/01/2002	Scottish Re USA Inc	NC		95,988
87572	23-2038295	01/01/2006	Scottish Re USA Inc	NC	2,500	
64688	75-6020048	01/01/2006	SCOR Global Life Amer Reinsurance Co	DE	17,729	
86231	39-0989781	01/13/1988	Transamerica Life Insurance Company	NC		58,518

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
86231	39-0989781	01/01/2006	Transamerica Life Insurance Company	NC		162,000
86231	39-0989781	01/01/2006	Transamerica Life Insurance Company	NC	25,577	79,792
86231	39-0989781	10/01/2007	Transamerica Life Insurance Company	NC	126,674	252,616
64688	75-6020048	10/10/2009	SCOR Global Life American Reinsurance Compnay	DE	126,674	252,616
0899999.	Total - Life and Annuity Non-Affiliates - U.S. Non-Affiliates				4,255,734	8,875,541
1099999.	Total - Life and Annuity Non-Affiliates				4,255,734	8,875,541
1199999.	Total - Life and Annuity				4,311,695	19,687,200
Accident and Health - Non-Affiliates - U.S. Non-Affiliates						
39845	48-0921045	09/01/1967	Westport Ins Corp	MO		2,411
86258	13-2572994	01/01/1999	General Re Life Corporation	CT	2,114	75,740
66346	58-0828824	01/01/1999	Munich American Reassurance Company	GA	25,121	115,470
82627	06-0839705	02/01/1981	Swiss Re Life & Health America, Inc	CT	3,634,464	407,514
67598	04-1768571	11/01/1988	Paul Revere Life Ins Co	MA	2,905,552	51,231
63932	13-1970218	02/01/1976	Aviva Life & Annuity Co of NY	NY	250	
1999999.	Total - Accident and Health Non-Affiliates - U.S. Non-Affiliates				6,567,501	652,366
2199999.	Total - Accident and Health Non-Affiliates				6,567,501	652,366
2299999.	Total - Accident and Health				6,567,501	652,366
2399999.	Total U.S.				10,823,235	20,245,670
2499999.	Total Non-U.S				55,961	93,896
9999999.	Total				10,879,196	20,339,566

SCHEDULE S - PART 3 - SECTION 1

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

1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
General Account - Authorized - Affiliates - U.S. - Other														
67172	31-0397080	10/04/2006	Ohio National Life Insurance Company	OH	CO/I	XXXL	303,831,864	143,525,232	139,224,830					
67172	31-0397080	10/01/2009	Ohio National Life Insurance Company	OH	CO/I	XXXL	1,421,359,248	489,895,827	391,801,872	91,874,199				
67172	31-0397080	09/01/2014	Ohio National Life Insurance Company	OH	CO/I	XXXL	162,410,890	53,826,706		53,598,829				
0299999.	Total - General Account - Authorized - Affiliates - U.S. - Other						1,887,602,002	687,247,765	531,026,702	145,473,028	0	0	0	0
0399999.	Total - General Account - Authorized - Affiliates - U.S. - Total						1,887,602,002	687,247,765	531,026,702	145,473,028	0	0	0	0
0799999.	Total - General Account - Authorized - Affiliates						1,887,602,002	687,247,765	531,026,702	145,473,028	0	0	0	0
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates														
90611	41-1366075	04/01/1982	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	27,622	2,458	2,297	4,150				
90611	41-1366075	11/01/1983	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	571,215	18,806	17,347	22,503				
90611	41-1366075	01/01/1987	Allianz Life Insurance Co. of North America	MN	ADB/I	OL								
90611	41-1366075	01/01/1987	Allianz Life Insurance Co. of North America	MN	DIS/I	OL		50	51	101				
90611	41-1366075	01/01/1987	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	3,561,933	58,742	94,183	2,471				
90611	41-1366075	06/01/1988	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	825,000	7,226	6,935	10,711				
90611	41-1366075	02/01/1999	Allianz Life Insurance Co. of North America	MN	DIS/I	OL		532	238	260				
90611	41-1366075	02/01/1999	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	5,988,721	51,709	65,628	39,605				
90611	41-1366075	04/15/1999	Allianz Life Insurance Co. of North America	MN	CO/I	OL	173,045,404	899,774	863,752	245,228				
90611	41-1366075	04/15/1999	Allianz Life Insurance Co. of North America	MN	DIS/I	OL		135,952	84,964	4,405				
90611	41-1366075	04/15/1999	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	91,296,422	527,362	569,255	383,983				
90611	41-1366075	03/15/2000	Allianz Life Insurance Co. of North America	MN	DIS/I	OL		1,324	101	211				
90611	41-1366075	03/15/2000	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	17,255,526	85,386	80,635	50,878				
90611	41-1366075	09/01/2000	Allianz Life Insurance Co. of North America	MN	DIS/I	OL		342	23	49				
90611	41-1366075	09/01/2000	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	4,591,403	22,505	21,483	12,677				
90611	41-1366075	09/30/2000	Allianz Life Insurance Co. of North America	MN	DIS/I	OL		932	874	457				
90611	41-1366075	09/30/2000	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	14,477,173	75,359	68,547	67,185				
90611	41-1366075	07/31/2001	Allianz Life Insurance Co. of North America	MN	CO/I	XXXL	508,288,428	11,469,895	12,156,404	762,462				
90611	41-1366075	07/31/2001	Allianz Life Insurance Co. of North America	MN	DIS/I	OL		131,997	28,512	15,884				
90611	41-1366075	07/31/2001	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	17,034,845	86,425	76,185	61,723				
90611	41-1366075	01/01/2002	Allianz Life Insurance Co. of North America	MN	DIS/I	OL		616	692	845				
90611	41-1366075	01/01/2002	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	24,050,739	119,671	117,541	72,008				
90611	41-1366075	07/01/2002	Allianz Life Insurance Co. of North America	MN	DIS/I	OL		281	287	379				
90611	41-1366075	07/01/2002	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	17,916,317	131,330	334,196	92,297				
90611	41-1366075	01/01/2003	Allianz Life Insurance Co. of North America	MN	ADB/I	OL								
90611	41-1366075	01/01/2003	Allianz Life Insurance Co. of North America	MN	CO/I	XXXL	116,908,853	2,780,137	2,728,200	225,186				
90611	41-1366075	01/01/2003	Allianz Life Insurance Co. of North America	MN	DIS/I	OL		32,288	15,931	4,133				
90611	41-1366075	01/01/2003	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	12,533,336	58,810	57,330	41,988				
90611	41-1366075	04/01/2003	Allianz Life Insurance Co. of North America	MN	CO/I	XXXL	704,306,631	16,790,972	16,784,657	917,974				
90611	41-1366075	04/01/2003	Allianz Life Insurance Co. of North America	MN	DIS/I	OL		169,331	38,880	25,894				

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

1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
90611	41-1366075	04/01/2003	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	103,018,194	517,390	490,577	345,937				
62413	36-0947200	01/01/1987	Continental Assurance Company	IL	YRT/I	OL	395,398	18,738	80,704	26,585				
86258	13-2572994	07/01/1982	General & Cologne Life Re of America	CT	YRT/I	OL	261,899	9,758	8,877	12,120				
86258	13-2572994	01/01/1987	General & Cologne Life Re of America	CT	DIS/I	OL		245	233	49				
86258	13-2572994	01/01/1987	General & Cologne Life Re of America	CT	YRT/I	OL	2,147,248	96,382	96,989	139,303				
86258	13-2572994	04/01/2004	General & Cologne Life Re of America	CT	DIS/I	OL		1,553	1,875	1,778				
86258	13-2572994	04/01/2004	General & Cologne Life Re of America	CT	YRT/I	OL	61,975,115	305,535	240,708	225,836				
86258	13-2572994	01/19/2005	General & Cologne Life Re of America	CT	DIS/I	OL		1,725	1,712	2,154				
86258	13-2572994	01/19/2005	General & Cologne Life Re of America	CT	YRT/I	OL	54,539,985	205,150	189,574	156,658				
86258	13-2572994	12/01/2005	General & Cologne Life Re of America	CT	DIS/I	OL		3,681	164	310				
86258	13-2572994	12/01/2005	General & Cologne Life Re of America	CT	YRT/I	OL	25,169,426	82,982	76,805	34,330				
86258	13-2572994	01/01/2006	General & Cologne Life Re of America	CT	ADB/I	OL								
86258	13-2572994	01/01/2006	General & Cologne Life Re of America	CT	DIS/I	OL		43,863	3,819	7,296				
86258	13-2572994	01/01/2006	General & Cologne Life Re of America	CT	YRT/I	OL	317,517,187	939,897	912,191	595,668				
97071	13-3126819	06/04/2007	Generali USA Life Reassurance Company	MO	DIS/I	OL		133	137	234				
97071	13-3126819	06/04/2007	Generali USA Life Reassurance Company	MO	YRT/I	OL	9,639,474	17,516	14,628	14,422				
97071	13-3126819	10/01/2007	Generali USA Life Reassurance Company	MO	DIS/I	OL		3	3	(7)				
97071	13-3126819	10/01/2007	Generali USA Life Reassurance Company	MO	YRT/I	OL	2,392,788	5,267	4,402	7,338				
97071	13-3126819	10/10/2009	Generali USA Life Reassurance Company	MO	DIS/I	OL		29,356	25,890	5,723				
97071	13-3126819	10/10/2009	Generali USA Life Reassurance Company	MO	YRT/I	OL	295,548,505	698,331	587,175	1,034,775				
88340	59-2859797	01/19/2005	Hannover Life Reassurance Company Of America	FL	DIS/I	OL		27	26	55				
88340	59-2859797	01/19/2005	Hannover Life Reassurance Company Of America	FL	YRT/I	OL	1,774,389	2,702	2,455	3,760				
88340	59-2859797	09/01/2005	Hannover Life Reassurance Company Of America	FL	CO/I	XXXL	202,902,955	4,142,543	3,935,510	268,241				
88340	59-2859797	09/01/2005	Hannover Life Reassurance Company Of America	FL	DIS/I	OL		30,348	3,830	6,981				
88340	59-2859797	12/01/2005	Hannover Life Reassurance Company Of America	FL	CO/I	XXXL	75,754,045	1,591,420	1,515,345	98,475				
88340	59-2859797	12/01/2005	Hannover Life Reassurance Company Of America	FL	DIS/I	OL		11,725	1,047	1,891				
88340	59-2859797	01/01/2006	Hannover Life Reassurance Company Of America	FL	CO/I	XXXL	1,172,230,804	22,045,716	20,451,338	1,587,938				
88340	59-2859797	01/01/2006	Hannover Life Reassurance Company Of America	FL	DIS/I	OL		223,673	23,739	45,806				
88340	59-2859797	01/01/2006	Hannover Life Reassurance Company Of America	FL	YRT/I	OL	6,748,844	9,885	8,088	16,390				
88340	59-2859797	01/01/2010	Hannover Life Reassurance Company Of America	FL	YRT/I	OL	72,331,987	65,859	34,338	115,586				
88340	59-2859797	01/01/2014	Hannover Life Reassurance Company Of America	FL	DIS/I	OL				1				
88340	59-2859797	01/01/2014	Hannover Life Reassurance Company Of America	FL	YRT/I	OL	8,656,496	18,092		18,810				
86258	13-2572994	10/01/1988	General & Cologne Life Re of America	CT	YRT/I	OL	119,151	1,530	1,377	2,336				
65676	35-0472300	03/18/1982	Lincoln National Life Insurance Company	IN	DIS/I	OL		434	349	872				
65676	35-0472300	03/18/1982	Lincoln National Life Insurance Company	IN	YRT/I	OL	7,883,344	355,636	322,603	413,311				
65676	35-0472300	03/09/1998	Lincoln National Life Insurance Company	IN	ADB/I	OL								
65676	35-0472300	03/09/1998	Lincoln National Life Insurance Company	IN	DIS/I	OL		150	175	152				
65676	35-0472300	03/09/1998	Lincoln National Life Insurance Company	IN	YRT/I	OL	7,177,109	54,438	49,487	59,007				

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1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
65676	35-0472300	06/01/1998	Lincoln National Life Insurance Company	IN	DIS/I	OL		3,355	841	(594)				
65676	35-0472300	06/01/1998	Lincoln National Life Insurance Company	IN	YRT/I	OL	12,743,462	118,354	122,836	89,981				
65676	35-0472300	02/01/1999	Lincoln National Life Insurance Company	IN	DIS/I	OL		532	238	260				
65676	35-0472300	02/01/1999	Lincoln National Life Insurance Company	IN	YRT/I	OL	9,185,962	52,832	66,592	40,548				
65676	35-0472300	04/15/1999	Lincoln National Life Insurance Company	IN	CO/I	OL	173,045,411	899,774	863,752	245,228				
65676	35-0472300	04/15/1999	Lincoln National Life Insurance Company	IN	DIS/I	OL		136,042	85,166	4,542				
65676	35-0472300	04/15/1999	Lincoln National Life Insurance Company	IN	YRT/I	OL	96,382,518	544,434	592,662	409,591				
65676	35-0472300	03/01/2000	Lincoln National Life Insurance Company	IN	CO/I	XXXL	155,605,823	2,586,680	2,831,790	244,699				
65676	35-0472300	03/01/2000	Lincoln National Life Insurance Company	IN	DIS/I	OL		71,907	31,240	7,131				
65676	35-0472300	03/15/2000	Lincoln National Life Insurance Company	IN	DIS/I	OL		1,324	101	212				
65676	35-0472300	03/15/2000	Lincoln National Life Insurance Company	IN	YRT/I	OL	17,268,469	85,450	80,695	50,916				
65676	35-0472300	09/01/2000	Lincoln National Life Insurance Company	IN	CO/I	XXXL	294,760,098	6,138,793	6,511,814	477,175				
65676	35-0472300	09/01/2000	Lincoln National Life Insurance Company	IN	DIS/I	OL		79,841	21,207	9,809				
65676	35-0472300	09/01/2000	Lincoln National Life Insurance Company	IN	YRT/I	OL	4,131,796	21,550	20,647	13,614				
65676	35-0472300	09/05/2000	Lincoln National Life Insurance Company	IN	YRT/I	OL	19,556,709	190,679	182,920	173,520				
65676	35-0472300	09/30/2000	Lincoln National Life Insurance Company	IN	DIS/I	OL		1,075	1,006	750				
65676	35-0472300	09/30/2000	Lincoln National Life Insurance Company	IN	YRT/I	OL	19,037,096	85,848	79,092	82,472				
65676	35-0472300	07/01/2001	Lincoln National Life Insurance Company	IN	DIS/I	OL		19	99	172				
65676	35-0472300	07/01/2001	Lincoln National Life Insurance Company	IN	YRT/I	OL	789,491	3,951	3,825	1,826				
65676	35-0472300	07/31/2001	Lincoln National Life Insurance Company	IN	CO/I	XXXL	501,336,595	11,336,374	12,018,728	749,934				
65676	35-0472300	07/31/2001	Lincoln National Life Insurance Company	IN	DIS/I	OL		131,109	28,366	15,640				
65676	35-0472300	07/31/2001	Lincoln National Life Insurance Company	IN	YRT/I	OL	13,402,310	76,757	67,306	54,447				
65676	35-0472300	01/01/2002	Lincoln National Life Insurance Company	IN	DIS/I	OL		617	693	846				
65676	35-0472300	01/01/2002	Lincoln National Life Insurance Company	IN	YRT/I	OL	23,341,019	114,290	112,700	74,872				
65676	35-0472300	07/01/2002	Lincoln National Life Insurance Company	IN	DIS/I	OL		281	287	379				
65676	35-0472300	07/01/2002	Lincoln National Life Insurance Company	IN	YRT/I	OL	15,746,903	116,064	110,907	72,289				
65676	35-0472300	01/01/2003	Lincoln National Life Insurance Company	IN	ADB/I	OL								
65676	35-0472300	01/01/2003	Lincoln National Life Insurance Company	IN	CO/I	XXXL	116,242,186	2,758,137	2,728,200	207,660				
65676	35-0472300	01/01/2003	Lincoln National Life Insurance Company	IN	DIS/I	OL		32,266	15,910	4,088				
65676	35-0472300	01/01/2003	Lincoln National Life Insurance Company	IN	YRT/I	OL	11,853,594	58,223	56,893	43,279				
65676	35-0472300	04/01/2003	Lincoln National Life Insurance Company	IN	YRT/I	OL	21,867	37	33	18				
65676	35-0472300	01/19/2005	Lincoln National Life Insurance Company	IN	YRT/I	OL	3,522,550	30,141	30,213	24,936				
76694	23-2044256	12/31/2009	London Life Insurance Company	PA	YRT/I	OL	6,617,736,943			28,473,136				
66346	58-0828824	04/01/1984	Munich American Reassurance Company	GA	YRT/I	OL	75,614	504	468	664				
66346	58-0828824	03/01/1998	Munich American Reassurance Company	GA	DIS/I	OL		421	44	(59)				
66346	58-0828824	03/01/1998	Munich American Reassurance Company	GA	YRT/I	OL	3,185,577	6,099	5,619	4,130				
66346	58-0828824	03/09/1998	Munich American Reassurance Company	GA	ADB/I	OL								
66346	58-0828824	03/09/1998	Munich American Reassurance Company	GA	DIS/I	OL		150	175	152				

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1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
66346	58-0828824	03/09/1998	Munich American Reassurance Company	GA	YRT/I	OL	7,177,113	54,438	49,487	59,007				
66346	58-0828824	06/01/1998	Munich American Reassurance Company	GA	DIS/I	OL		3,355	841	(594)				
66346	58-0828824	06/01/1998	Munich American Reassurance Company	GA	YRT/I	OL	12,502,278	117,573	122,169	86,926				
66346	58-0828824	02/01/1999	Munich American Reassurance Company	GA	DIS/I	OL		532	238	260				
66346	58-0828824	02/01/1999	Munich American Reassurance Company	GA	YRT/I	OL	5,988,725	51,709	65,628	39,605				
66346	58-0828824	04/15/1999	Munich American Reassurance Company	GA	CO/I	OL	173,045,411	899,774	863,752	245,228				
66346	58-0828824	04/15/1999	Munich American Reassurance Company	GA	DIS/I	OL		135,952	84,964	4,406				
66346	58-0828824	04/15/1999	Munich American Reassurance Company	GA	YRT/I	OL	91,846,013	511,311	554,990	377,337				
66346	58-0828824	03/15/2000	Munich American Reassurance Company	GA	DIS/I	OL		1,324	101	211				
66346	58-0828824	03/15/2000	Munich American Reassurance Company	GA	YRT/I	OL	17,255,527	85,386	80,635	50,878				
66346	58-0828824	09/01/2000	Munich American Reassurance Company	GA	CO/I	XXXL	286,913,287	5,903,085	6,262,759	460,230				
66346	58-0828824	09/01/2000	Munich American Reassurance Company	GA	DIS/I	OL		75,807	20,739	8,861				
66346	58-0828824	09/01/2000	Munich American Reassurance Company	GA	YRT/I	OL	4,725,903	27,481	26,304	14,755				
66346	58-0828824	09/30/2000	Munich American Reassurance Company	GA	DIS/I	OL		1,486	1,391	952				
66346	58-0828824	09/30/2000	Munich American Reassurance Company	GA	YRT/I	OL	25,660,298	119,823	109,956	114,548				
66346	58-0828824	07/31/2001	Munich American Reassurance Company	GA	CO/I	XXXL	1,003,272,746	22,686,297	24,051,819	1,502,596				
66346	58-0828824	07/31/2001	Munich American Reassurance Company	GA	DIS/I	OL		166,874	56,337	30,870				
66346	58-0828824	07/31/2001	Munich American Reassurance Company	GA	YRT/I	OL	22,305,474	118,920	105,519	85,709				
66346	58-0828824	01/01/2002	Munich American Reassurance Company	GA	DIS/I	OL		870	1,000	1,223				
66346	58-0828824	01/01/2002	Munich American Reassurance Company	GA	YRT/I	OL	35,965,959	169,204	166,577	113,771				
66346	58-0828824	07/01/2002	Munich American Reassurance Company	GA	DIS/I	OL		445	460	628				
66346	58-0828824	07/01/2002	Munich American Reassurance Company	GA	YRT/I	OL	23,713,784	168,525	160,957	105,036				
66346	58-0828824	01/01/2003	Munich American Reassurance Company	GA	ADB/I	OL								
66346	58-0828824	01/01/2003	Munich American Reassurance Company	GA	CO/I	XXXL	117,708,850	2,803,585	2,755,522	226,383				
66346	58-0828824	01/01/2003	Munich American Reassurance Company	GA	DIS/I	OL		32,358	16,001	4,273				
66346	58-0828824	01/01/2003	Munich American Reassurance Company	GA	YRT/I	OL	14,598,112	70,887	69,311	53,471				
66346	58-0828824	04/01/2003	Munich American Reassurance Company	GA	CO/I	XXXL	1,880,743,461	43,508,339	43,958,216	2,494,236				
66346	58-0828824	04/01/2003	Munich American Reassurance Company	GA	DIS/I	OL		160,118	117,785	65,610				
66346	58-0828824	04/01/2003	Munich American Reassurance Company	GA	YRT/I	OL	125,028,941	536,975	506,281	379,756				
66346	58-0828824	04/01/2004	Munich American Reassurance Company	GA	CO/I	XXXL	1,756,632,057	41,178,337	40,773,337	2,457,962				
66346	58-0828824	04/01/2004	Munich American Reassurance Company	GA	DIS/I	OL		180,762	266,743	50,008				
66346	58-0828824	04/01/2004	Munich American Reassurance Company	GA	YRT/I	OL	99,907,089	474,671	382,102	426,248				
66346	58-0828824	11/01/2004	Munich American Reassurance Company	GA	YRT/I	OL	3,420,000	12,584	14,111	9,781				
66346	58-0828824	01/19/2005	Munich American Reassurance Company	GA	CO/I	XXXL	943,188,614	21,077,384	20,239,617	1,394,803				
66346	58-0828824	01/19/2005	Munich American Reassurance Company	GA	DIS/I	OL		153,250	102,806	33,366				
66346	58-0828824	01/19/2005	Munich American Reassurance Company	GA	YRT/I	OL	129,039,228	442,340	405,485	332,423				
66346	58-0828824	07/01/2005	Munich American Reassurance Company	GA	CO/I	XXXL	174,308,168	4,272,915	4,071,545	345,698				
66346	58-0828824	07/01/2005	Munich American Reassurance Company	GA	DIS/I	OL		20,279	4,080	8,111				

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1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
66346	58-0828824	07/01/2005	Munich American Reassurance Company	GA	YRT/I	OL	82,738,527	303,688	285,650	130,331				
66346	58-0828824	09/01/2005	Munich American Reassurance Company	GA	CO/I	XXXL	233,663,180	5,177,952	5,029,812	425,424				
66346	58-0828824	09/01/2005	Munich American Reassurance Company	GA	DIS/I	OL		26,981	6,538	11,585				
66346	58-0828824	09/01/2005	Munich American Reassurance Company	GA	YRT/I	OL	105,659,558	252,393	255,084	110,416				
66346	58-0828824	12/01/2005	Munich American Reassurance Company	GA	CO/I	XXXL	69,659,002	1,648,687	1,596,990	132,497				
66346	58-0828824	12/01/2005	Munich American Reassurance Company	GA	DIS/I	OL		8,950	1,604	3,008				
66346	58-0828824	12/01/2005	Munich American Reassurance Company	GA	YRT/I	OL	55,422,285	506,118	471,982	64,061				
66346	58-0828824	01/01/2006	Munich American Reassurance Company	GA	ADB/I	OL								
66346	58-0828824	01/01/2006	Munich American Reassurance Company	GA	CO/I	XXXL	673,853,438	12,078,871	11,301,227	1,068,479				
66346	58-0828824	01/01/2006	Munich American Reassurance Company	GA	DIS/I	OL		128,244	15,014	28,896				
66346	58-0828824	01/01/2006	Munich American Reassurance Company	GA	YRT/I	OL	102,755,429	380,874	356,063	538,367				
66346	58-0828824	06/04/2007	Munich American Reassurance Company	GA	DIS/I	OL		167	171	293				
66346	58-0828824	06/04/2007	Munich American Reassurance Company	GA	YRT/I	OL	15,593,473	24,059	20,163	21,108				
66346	58-0828824	10/01/2007	Munich American Reassurance Company	GA	DIS/I	OL		1,792	2,074	3,562				
66346	58-0828824	10/01/2007	Munich American Reassurance Company	GA	YRT/I	OL	131,172,492	349,421	331,344	506,222				
66346	58-0828824	10/10/2009	Munich American Reassurance Company	GA	DIS/I	OL		56,942	51,236	10,138				
66346	58-0828824	10/10/2009	Munich American Reassurance Company	GA	YRT/I	OL	330,130,320	707,645	595,313	1,114,835				
66346	58-0828824	04/01/2011	Munich American Reassurance Company	GA	CO/I	XXXL	7,639,189,640	110,667,748	95,891,393	10,452,030				
66346	58-0828824	04/01/2011	Munich American Reassurance Company	GA	DIS/I	OL		879,402	169,729	264,582				
66346	58-0828824	01/01/2014	Munich American Reassurance Company	GA	DIS/I	OL				7				
66346	58-0828824	01/01/2014	Munich American Reassurance Company	GA	YRT/I	OL	21,402,445	25,089		21,862				
93572	43-1235868	01/01/1977	RGA Reinsurance Company	MO	DIS/I	OL		28	114	161				
93572	43-1235868	01/01/1977	RGA Reinsurance Company	MO	YRT/I	OL	2,465,000	26,150	27,435	26,683				
93572	43-1235868	01/01/1983	RGA Reinsurance Company	MO	DIS/I	OL		142,582	137,680					
93572	43-1235868	01/01/1983	RGA Reinsurance Company	MO	YRT/I	OL	400,000	3,748	3,368	3,792				
93572	43-1235868	02/01/1983	RGA Reinsurance Company	MO	DIS/I	OL		200	178	402				
93572	43-1235868	02/01/1983	RGA Reinsurance Company	MO	YRT/I	OL	2,958,859	31,412	32,123	30,213				
93572	43-1235868	01/01/1984	RGA Reinsurance Company	MO	YRT/I	OL	2,715,480	71,711	109,269	57,671				
93572	43-1235868	06/01/1984	RGA Reinsurance Company	MO	YRT/I	OL	6,465,333	249,493	232,623	229,932				
93572	43-1235868	01/01/1987	RGA Reinsurance Company	MO	ADB/I	OL								
93572	43-1235868	01/01/1987	RGA Reinsurance Company	MO	DIS/I	OL		5,431	5,802	469				
93572	43-1235868	01/01/1987	RGA Reinsurance Company	MO	YRT/I	OL	67,986,234	1,075,575	1,175,775	1,207,954				
93572	43-1235868	05/01/1988	RGA Reinsurance Company	MO	DIS/I	OL		145	320	237				
93572	43-1235868	05/01/1988	RGA Reinsurance Company	MO	YRT/I	OL	675,000	4,730	4,281	7,426				
93572	43-1235868	11/14/1991	RGA Reinsurance Company	MO	DIS/I	OL		2	1	820				
93572	43-1235868	11/14/1991	RGA Reinsurance Company	MO	YRT/I	OL	18,569,486	171,435	166,364	287,695				
93572	43-1235868	01/01/1994	RGA Reinsurance Company	MO	ADB/I	OL								

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

1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
93572	43-1235868	01/01/1994	RGA Reinsurance Company	MO	DIS/I	OL		156	174	320				
93572	43-1235868	01/01/1994	RGA Reinsurance Company	MO	YRT/I	OL	21,762,136	565,042	554,025	709,385				
93572	43-1235868	10/01/1995	RGA Reinsurance Company	MO	ADB/I	OL								
93572	43-1235868	10/01/1995	RGA Reinsurance Company	MO	DIS/I	OL		2,252	16,807	1,443				
93572	43-1235868	10/01/1995	RGA Reinsurance Company	MO	YRT/I	OL	48,432,599	544,031	517,160	589,631				
93572	43-1235868	07/01/1997	RGA Reinsurance Company	MO	DIS/I	OL		827	727	1,079				
93572	43-1235868	07/01/1997	RGA Reinsurance Company	MO	YRT/I	OL	26,801,988	258,625	242,143	243,833				
93572	43-1235868	03/09/1998	RGA Reinsurance Company	MO	ADB/I	OL								
93572	43-1235868	03/09/1998	RGA Reinsurance Company	MO	DIS/I	OL		301	350	304				
93572	43-1235868	03/09/1998	RGA Reinsurance Company	MO	YRT/I	OL	16,674,415	143,690	130,062	138,858				
93572	43-1235868	06/01/1998	RGA Reinsurance Company	MO	DIS/I	OL		3,794	1,681	(1,189)				
93572	43-1235868	06/01/1998	RGA Reinsurance Company	MO	YRT/I	OL	26,364,976	241,194	260,707	164,087				
93572	43-1235868	02/01/1999	RGA Reinsurance Company	MO	DIS/I	OL		588	357	390				
93572	43-1235868	02/01/1999	RGA Reinsurance Company	MO	YRT/I	OL	9,793,385	80,830	101,169	60,777				
93572	43-1235868	04/15/1999	RGA Reinsurance Company	MO	CO/I	OL	173,045,411	899,774	863,752	245,228				
93572	43-1235868	04/15/1999	RGA Reinsurance Company	MO	DIS/I	OL		151,308	97,718	5,302				
93572	43-1235868	04/15/1999	RGA Reinsurance Company	MO	YRT/I	OL	167,439,477	1,038,570	1,284,064	747,638				
93572	43-1235868	03/15/2000	RGA Reinsurance Company	MO	DIS/I	OL		1,324	152	317				
93572	43-1235868	03/15/2000	RGA Reinsurance Company	MO	YRT/I	OL	30,489,760	297,943	272,415	118,972				
93572	43-1235868	09/01/2000	RGA Reinsurance Company	MO	CO/I	XXXL	286,913,282	5,903,085	6,262,759	460,229				
93572	43-1235868	09/01/2000	RGA Reinsurance Company	MO	DIS/I	OL		77,299	20,792	8,978				
93572	43-1235868	09/01/2000	RGA Reinsurance Company	MO	YRT/I	OL	5,319,800	33,050	30,364	1,681				
93572	43-1235868	09/30/2000	RGA Reinsurance Company	MO	DIS/I	OL		1,540	1,442	978				
93572	43-1235868	09/30/2000	RGA Reinsurance Company	MO	YRT/I	OL	38,583,401	333,014	305,265	296,792				
93572	43-1235868	07/31/2001	RGA Reinsurance Company	MO	CO/I	XXXL	557,023,595	12,138,040	12,974,882	816,526				
93572	43-1235868	07/31/2001	RGA Reinsurance Company	MO	DIS/I	OL		131,456	28,839	16,251				
93572	43-1235868	07/31/2001	RGA Reinsurance Company	MO	YRT/I	OL	40,157,886	179,682	173,618	121,625				
93572	43-1235868	01/01/2002	RGA Reinsurance Company	MO	DIS/I	OL		899	1,036	1,263				
93572	43-1235868	01/01/2002	RGA Reinsurance Company	MO	YRT/I	OL	58,184,970	581,425	529,897	392,448				
93572	43-1235868	07/01/2002	RGA Reinsurance Company	MO	DIS/I	OL		415	417	554				
93572	43-1235868	07/01/2002	RGA Reinsurance Company	MO	YRT/I	OL	27,262,961	323,753	301,928	189,501				
93572	43-1235868	01/01/2003	RGA Reinsurance Company	MO	ADB/I	OL								
93572	43-1235868	01/01/2003	RGA Reinsurance Company	MO	CO/I	XXXL	118,667,186	2,899,672	2,868,344	217,851				
93572	43-1235868	01/01/2003	RGA Reinsurance Company	MO	DIS/I	OL		32,385	16,035	4,328				
93572	43-1235868	01/01/2003	RGA Reinsurance Company	MO	YRT/I	OL	19,627,907	99,044	96,853	71,317				
93572	43-1235868	04/01/2003	RGA Reinsurance Company	MO	DIS/I	OL		1,317	2,533	871				
93572	43-1235868	04/01/2003	RGA Reinsurance Company	MO	YRT/I	OL	126,023,054	898,131	821,221	548,477				
93572	43-1235868	04/01/2004	RGA Reinsurance Company	MO	DIS/I	OL		1,553	1,905	1,718				

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1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
93572	43-1235868	04/01/2004	RGA Reinsurance Company	MO	YRT/I	OL	146,994,728	618,224	533,051	564,613				
93572	43-1235868	01/19/2005	RGA Reinsurance Company	MO	DIS/I	OL		1,947	2,017	2,601				
93572	43-1235868	01/19/2005	RGA Reinsurance Company	MO	YRT/I	OL	89,564,684	513,772	446,027	330,966				
93572	43-1235868	06/04/2007	RGA Reinsurance Company	MO	DIS/I	OL		167	171	293				
93572	43-1235868	06/04/2007	RGA Reinsurance Company	MO	YRT/I	OL	12,049,344	21,893	18,282	18,060				
93572	43-1235868	10/01/2007	RGA Reinsurance Company	MO	DIS/I	OL		1,412	1,621	2,843				
93572	43-1235868	10/01/2007	RGA Reinsurance Company	MO	YRT/I	OL	141,534,191	405,058	384,572	621,299				
93572	43-1235868	07/01/2008	RGA Reinsurance Company	MO	YRT/I	OL	5,428,140	18,585	17,195	12,087				
93572	43-1235868	10/10/2009	RGA Reinsurance Company	MO	DIS/I	OL		30,317	26,807	7,697				
93572	43-1235868	10/10/2009	RGA Reinsurance Company	MO	YRT/I	OL	357,008,196	1,085,091	904,148	1,756,693				
93572	43-1235868	01/01/2014	RGA Reinsurance Company	MO	DIS/I	OL				157				
93572	43-1235868	01/01/2014	RGA Reinsurance Company	MO	YRT/I	OL	25,602,638	42,758		46,094				
68713	84-0499703	08/01/1993	Security Life of Denver Insurance Company	CO	DIS/I	OL		4	3					
68713	84-0499703	08/01/1993	Security Life of Denver Insurance Company	CO	YRT/I	OL	3,427,695	22,177	22,537	36,863				
68713	84-0499703	01/01/1994	Security Life of Denver Insurance Company	CO	ADB/I	OL								
68713	84-0499703	01/01/1994	Security Life of Denver Insurance Company	CO	DIS/I	OL		127	143	260				
68713	84-0499703	01/01/1994	Security Life of Denver Insurance Company	CO	YRT/I	OL	16,994,937	193,898	191,750	205,525				
68713	84-0499703	10/01/1995	Security Life of Denver Insurance Company	CO	ADB/I	OL								
68713	84-0499703	10/01/1995	Security Life of Denver Insurance Company	CO	DIS/I	OL		2,252	16,807	1,443				
68713	84-0499703	10/01/1995	Security Life of Denver Insurance Company	CO	YRT/I	OL	40,585,162	671,665	633,897	663,475				
68713	84-0499703	07/01/1997	Security Life of Denver Insurance Company	CO	DIS/I	OL		929	825	1,285				
68713	84-0499703	07/01/1997	Security Life of Denver Insurance Company	CO	YRT/I	OL	23,545,382	435,413	409,716	593,116				
68713	84-0499703	03/09/1998	Security Life of Denver Insurance Company	CO	ADB/I	OL								
68713	84-0499703	03/09/1998	Security Life of Denver Insurance Company	CO	DIS/I	OL		301	350	304				
68713	84-0499703	03/09/1998	Security Life of Denver Insurance Company	CO	YRT/I	OL	14,859,645	110,942	100,725	120,484				
68713	84-0499703	06/01/1998	Security Life of Denver Insurance Company	CO	DIS/I	OL		4,027	1,907	(721)				
68713	84-0499703	06/01/1998	Security Life of Denver Insurance Company	CO	YRT/I	OL	27,472,487	250,099	260,586	182,792				
68713	84-0499703	06/08/1998	Security Life of Denver Insurance Company	CO	ADB/I	OL		392	349					
68713	84-0499703	06/08/1998	Security Life of Denver Insurance Company	CO	CO/I	OL	175,278,787	941,942	873,828	281,914				
68713	84-0499703	06/08/1998	Security Life of Denver Insurance Company	CO	DIS/I	OL		34,549	2,949	5,219				
68713	84-0499703	06/08/1998	Security Life of Denver Insurance Company	CO	YRT/I	OL	941,009	2,241	913	2,453				
68713	84-0499703	02/01/1999	Security Life of Denver Insurance Company	CO	DIS/I	OL		588	357	390				
68713	84-0499703	02/01/1999	Security Life of Denver Insurance Company	CO	YRT/I	OL	9,048,075	77,843	99,911	59,299				
68713	84-0499703	04/15/1999	Security Life of Denver Insurance Company	CO	DIS/I	OL		50,139	38,153	2,492				
68713	84-0499703	04/15/1999	Security Life of Denver Insurance Company	CO	YRT/I	OL	137,278,127	782,425	849,988	558,715				
68713	84-0499703	03/15/2000	Security Life of Denver Insurance Company	CO	DIS/I	OL		1,324	152	317				
68713	84-0499703	03/15/2000	Security Life of Denver Insurance Company	CO	YRT/I	OL	25,889,760	128,111	120,983	75,862				
68713	84-0499703	09/01/2000	Security Life of Denver Insurance Company	CO	DIS/I	OL		342	45	95				

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1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
68713	84-0499703	09/01/2000	Security Life of Denver Insurance Company	CO	YRT/I	OL	7,116,800	38,987	37,279	14,189				
68713	84-0499703	09/05/2000	Security Life of Denver Insurance Company	CO	YRT/I	OL	19,556,654	190,678	182,919	173,520				
68713	84-0499703	09/30/2000	Security Life of Denver Insurance Company	CO	DIS/I	OL		1,809	1,696	886				
68713	84-0499703	09/30/2000	Security Life of Denver Insurance Company	CO	YRT/I	OL	41,918,962	188,398	168,841	194,981				
68713	84-0499703	10/02/2000	Security Life of Denver Insurance Company	CO	YRT/I	OL	757,873	10,937	10,526	9,793				
68713	84-0499703	07/31/2001	Security Life of Denver Insurance Company	CO	CO/I	XXXL	501,638,431	11,343,204	12,025,967	750,386				
68713	84-0499703	07/31/2001	Security Life of Denver Insurance Company	CO	DIS/I	OL		131,764	29,191	16,675				
68713	84-0499703	07/31/2001	Security Life of Denver Insurance Company	CO	YRT/I	OL	24,556,279	152,525	136,156	100,229				
68713	84-0499703	01/01/2002	Security Life of Denver Insurance Company	CO	CO/I	XXXL	26,235,186	989,795	931,941	81,178				
68713	84-0499703	01/01/2002	Security Life of Denver Insurance Company	CO	DIS/I	OL		6,229	1,901	2,751				
68713	84-0499703	01/01/2002	Security Life of Denver Insurance Company	CO	YRT/I	OL	44,275,006	236,607	297,679	119,584				
68713	84-0499703	05/01/2002	Security Life of Denver Insurance Company	CO	ADB/I	OL								
68713	84-0499703	05/01/2002	Security Life of Denver Insurance Company	CO	DIS/I	OL		6,831	7,126	13,714				
68713	84-0499703	05/01/2002	Security Life of Denver Insurance Company	CO	YRT/I	OL	159,005,562	2,286,072	2,042,244	1,202,644				
68713	84-0499703	07/01/2002	Security Life of Denver Insurance Company	CO	DIS/I	OL		479	480	599				
68713	84-0499703	07/01/2002	Security Life of Denver Insurance Company	CO	YRT/I	OL	31,019,389	309,007	290,803	164,715				
68713	84-0499703	01/01/2003	Security Life of Denver Insurance Company	CO	ADB/I	OL								
68713	84-0499703	01/01/2003	Security Life of Denver Insurance Company	CO	CO/I	XXXL	94,048,667	2,132,180	2,270,274	164,671				
68713	84-0499703	01/01/2003	Security Life of Denver Insurance Company	CO	DIS/I	OL		27,337	15,506	3,275				
68713	84-0499703	01/01/2003	Security Life of Denver Insurance Company	CO	YRT/I	OL	22,304,473	125,758	120,274	88,070				
68713	84-0499703	04/01/2003	Security Life of Denver Insurance Company	CO	CO/I	XXXL	460,926,216	22,550,996	21,889,343	605,848				
68713	84-0499703	04/01/2003	Security Life of Denver Insurance Company	CO	CO/I	AXXX	399,312,920	19,536,541	18,963,334	524,863				
68713	84-0499703	04/01/2003	Security Life of Denver Insurance Company	CO	DIS/I	OL		159,920	29,068	29,059				
68713	84-0499703	04/01/2003	Security Life of Denver Insurance Company	CO	YRT/I	OL	104,955,899	512,966	486,045	348,792				
68713	84-0499703	04/01/2004	Security Life of Denver Insurance Company	CO	CO/I	XXXL	809,778,374	19,958,669	19,311,325	1,042,239				
68713	84-0499703	04/01/2004	Security Life of Denver Insurance Company	CO	DIS/I	OL		142,042	142,861	22,842				
68713	84-0499703	04/01/2004	Security Life of Denver Insurance Company	CO	YRT/I	OL	86,666,878	473,976	380,093	349,969				
82627	06-0839705	11/01/1981	Swiss Re Life & Health America, Inc	CT	YRT/I	OL	1,762,639	16,820	16,363	36,997				
82627	06-0839705	01/01/1982	Swiss Re Life & Health America, Inc	CT	DIS/I	OL		338	193	448				
82627	06-0839705	01/01/1982	Swiss Re Life & Health America, Inc	CT	YRT/I	OL	566,000	3,386	3,129	5,196				
82627	06-0839705	06/06/1983	Swiss Re Life & Health America, Inc	CT	YRT/I	OL	2,814,133	102,433	99,304	97,606				
82627	06-0839705	06/01/1984	Swiss Re Life & Health America, Inc	CT	DIS/I	OL		180	188	361				
82627	06-0839705	06/01/1984	Swiss Re Life & Health America, Inc	CT	YRT/I	OL	5,237,246	90,043	141,138	(16,874)				
82627	06-0839705	01/01/1987	Swiss Re Life & Health America, Inc	CT	ADB/I	OL		48	48	(1,526)				
82627	06-0839705	01/01/1987	Swiss Re Life & Health America, Inc	CT	DIS/I	OL		1,687	2,407	1,378				
82627	06-0839705	01/01/1987	Swiss Re Life & Health America, Inc	CT	YRT/I	OL	39,749,869	914,287	891,918	968,272				
82627	06-0839705	01/01/1990	Swiss Re Life & Health America, Inc	CT	DIS/I	OL		1,568	780	1,968				
82627	06-0839705	01/01/1990	Swiss Re Life & Health America, Inc	CT	YRT/I	OL	900,000	3,447	3,123	5,823				

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1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
82627	06-0839705	11/14/1991	Swiss Re Life & Health America, Inc	CT	DIS/I	OL		36	1	820				
82627	06-0839705	11/14/1991	Swiss Re Life & Health America, Inc	CT	YRT/I	OL	19,369,937	302,655	257,888	496,352				
82627	06-0839705	10/16/1992	Swiss Re Life & Health America, Inc	CT	DIS/I	OL		252,395	242,901					
82627	06-0839705	10/16/1992	Swiss Re Life & Health America, Inc	CT	YRT/I	OL	650,000	7,495	6,760	16,221				
82627	06-0839705	08/01/1993	Swiss Re Life & Health America, Inc	CT	DIS/I	OL		4	3					
82627	06-0839705	08/01/1993	Swiss Re Life & Health America, Inc	CT	YRT/I	OL	5,459,904	86,973	79,834	192,338				
82627	06-0839705	01/01/1994	Swiss Re Life & Health America, Inc	CT	ADB/I	OL								
82627	06-0839705	01/01/1994	Swiss Re Life & Health America, Inc	CT	DIS/I	OL		456	503	806				
82627	06-0839705	01/01/1994	Swiss Re Life & Health America, Inc	CT	YRT/I	OL	45,407,277	499,029	481,619	512,973				
82627	06-0839705	10/01/1995	Swiss Re Life & Health America, Inc	CT	ADB/I	OL								
82627	06-0839705	10/01/1995	Swiss Re Life & Health America, Inc	CT	DIS/I	OL		6,900	68,770	4,386				
82627	06-0839705	10/01/1995	Swiss Re Life & Health America, Inc	CT	YRT/I	OL	107,501,753	1,431,842	1,391,486	1,485,855				
82627	06-0839705	07/01/1997	Swiss Re Life & Health America, Inc	CT	DIS/I	OL		2,480	2,180	3,238				
82627	06-0839705	07/01/1997	Swiss Re Life & Health America, Inc	CT	YRT/I	OL	57,927,133	810,848	753,347	887,557				
82627	06-0839705	03/09/1998	Swiss Re Life & Health America, Inc	CT	ADB/I	OL								
82627	06-0839705	03/09/1998	Swiss Re Life & Health America, Inc	CT	DIS/I	OL		601	699	608				
82627	06-0839705	03/09/1998	Swiss Re Life & Health America, Inc	CT	YRT/I	OL	29,834,000	224,591	204,210	243,381				
82627	06-0839705	06/01/1998	Swiss Re Life & Health America, Inc	CT	DIS/I	OL		7,588	3,363	(2,377)				
82627	06-0839705	06/01/1998	Swiss Re Life & Health America, Inc	CT	YRT/I	OL	50,549,416	473,705	494,616	351,120				
82627	06-0839705	02/01/1999	Swiss Re Life & Health America, Inc	CT	DIS/I	OL		588	357	390				
82627	06-0839705	02/01/1999	Swiss Re Life & Health America, Inc	CT	YRT/I	OL	9,819,641	137,428	152,058	105,076				
82627	06-0839705	04/15/1999	Swiss Re Life & Health America, Inc	CT	DIS/I	OL		50,139	38,153	2,492				
82627	06-0839705	04/15/1999	Swiss Re Life & Health America, Inc	CT	YRT/I	OL	155,971,104	1,025,852	1,060,047	657,978				
82627	06-0839705	03/15/2000	Swiss Re Life & Health America, Inc	CT	DIS/I	OL		1,324	152	317				
82627	06-0839705	03/15/2000	Swiss Re Life & Health America, Inc	CT	YRT/I	OL	25,889,760	128,111	120,983	76,336				
82627	06-0839705	09/01/2000	Swiss Re Life & Health America, Inc	CT	DIS/I	OL		342	35	73				
82627	06-0839705	09/01/2000	Swiss Re Life & Health America, Inc	CT	YRT/I	OL	4,919,800	28,608	27,487	15,360				
82627	06-0839705	09/05/2000	Swiss Re Life & Health America, Inc	CT	YRT/I	OL	19,556,655	190,678	182,919	173,520				
82627	06-0839705	09/29/2000	Swiss Re Life & Health America, Inc	CT	YRT/I	OL	791,589	49,913	45,941	31,090				
82627	06-0839705	09/30/2000	Swiss Re Life & Health America, Inc	CT	DIS/I	OL		1,398	1,310	684				
82627	06-0839705	09/30/2000	Swiss Re Life & Health America, Inc	CT	YRT/I	OL	21,687,811	127,233	120,299	104,910				
82627	06-0839705	10/02/2000	Swiss Re Life & Health America, Inc	CT	YRT/I	OL	757,873	10,937	10,526	9,793				
82627	06-0839705	07/31/2001	Swiss Re Life & Health America, Inc	CT	DIS/I	OL		1,390	1,129	1,356				
82627	06-0839705	07/31/2001	Swiss Re Life & Health America, Inc	CT	YRT/I	OL	22,778,423	158,305	140,840	104,592				
82627	06-0839705	01/01/2002	Swiss Re Life & Health America, Inc	CT	DIS/I	OL		894	1,032	1,253				
82627	06-0839705	01/01/2002	Swiss Re Life & Health America, Inc	CT	YRT/I	OL	42,839,623	367,518	340,632	208,014				
82627	06-0839705	07/01/2002	Swiss Re Life & Health America, Inc	CT	DIS/I	OL		315	307	350				

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

1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
82627	06-0839705	07/01/2002	Swiss Re Life & Health America, Inc.	CT	YRT/I	OL	20,829,940	169,684	162,401	104,616				
82627	06-0839705	01/01/2003	Swiss Re Life & Health America, Inc.	CT	ADB/I	OL								
82627	06-0839705	01/01/2003	Swiss Re Life & Health America, Inc.	CT	DIS/I	OL		284	298	571				
82627	06-0839705	01/01/2003	Swiss Re Life & Health America, Inc.	CT	YRT/I	OL	17,570,984	95,868	94,297	70,221				
82627	06-0839705	04/01/2003	Swiss Re Life & Health America, Inc.	CT	YRT/I	OL	3,000,000	2,528	2,316	2,472				
82627	06-0839705	01/19/2005	Swiss Re Life & Health America, Inc.	CT	YRT/I	OL	3,522,551	30,141	30,213	24,936				
82627	06-0839705	01/01/2006	Swiss Re Life & Health America, Inc.	CT	YRT/I	OL	74,298,446	366,155	343,980	314,683				
82627	06-0839705	07/01/2008	Swiss Re Life & Health America, Inc.	CT	YRT/I	OL	7,565,531	25,076	22,861	18,907				
82627	06-0839705	01/01/2010	Swiss Re Life & Health America, Inc.	CT	YRT/I	OL	72,269,327	65,715	34,181	95,652				
82627	06-0839705	07/01/2011	Swiss Re Life & Health America, Inc.	CT	CO/I	XXXL	7,639,189,458	110,686,226	95,891,053	10,452,175				
82627	06-0839705	07/01/2011	Swiss Re Life & Health America, Inc.	CT	DIS/I	OL		992,523	169,729	264,582				
82627	06-0839705	03/19/2013	Swiss Re Life & Health America, Inc.	CT	YRT/I	OL	9,823,069	1,669	1,406	2,481				
82627	06-0839705	01/01/2014	Swiss Re Life & Health America, Inc.	CT	DIS/I	OL				6				
82627	06-0839705	01/01/2014	Swiss Re Life & Health America, Inc.	CT	YRT/I	OL	35,481,529	47,833		53,221				
87572	23-2038295	09/01/2000	Scottish Re U.S. Inc.	NC	DIS/I	OL		753	395	222				
87572	23-2038295	09/01/2000	Scottish Re U.S. Inc.	NC	YRT/I	OL	5,810,810	31,175	29,159	22,662				
87572	23-2038295	09/30/2000	Scottish Re U.S. Inc.	NC	YRT/I	OL	1,759,505	9,993	8,614	11,087				
87572	23-2038295	07/31/2001	Scottish Re U.S. Inc.	NC	DIS/I	OL		700	332	399				
87572	23-2038295	07/31/2001	Scottish Re U.S. Inc.	NC	YRT/I	OL	4,676,107	31,909	28,655	18,722				
87572	23-2038295	01/01/2002	Scottish Re U.S. Inc.	NC	DIS/I	OL		296	304	369				
87572	23-2038295	01/01/2002	Scottish Re U.S. Inc.	NC	YRT/I	OL	8,168,102	45,986	45,611	27,030				
87572	23-2038295	07/01/2002	Scottish Re U.S. Inc.	NC	DIS/I	OL		93	90	103				
87572	23-2038295	07/01/2002	Scottish Re U.S. Inc.	NC	YRT/I	OL	6,126,434	49,907	47,721	30,768				
87572	23-2038295	01/01/2003	Scottish Re U.S. Inc.	NC	ADB/I	OL								
87572	23-2038295	01/01/2003	Scottish Re U.S. Inc.	NC	DIS/I	OL		73	76	147				
87572	23-2038295	01/01/2003	Scottish Re U.S. Inc.	NC	YRT/I	OL	4,501,556	24,437	24,061	17,932				
87572	23-2038295	01/19/2005	Scottish Re U.S. Inc.	NC	YRT/I	OL	3,522,542	30,141	30,213	24,936				
87572	23-2038295	01/01/2006	Scottish Re U.S. Inc.	NC	YRT/I	OL	37,149,243	183,078	171,990	157,342				
64688	75-6020048	04/01/2004	SCOR Global Life Americas Reinsurance Company	TX	YRT/I	OL	4,511,099	1,128	747	5,374				
64688	75-6020048	01/19/2005	SCOR Global Life Americas Reinsurance Company	TX	YRT/I	OL	2,219,639	278	217	2,791				
64688	75-6020048	01/01/2006	SCOR Global Life Americas Reinsurance Company	TX	DIS/I	OL								
64688	75-6020048	01/01/2006	SCOR Global Life Americas Reinsurance Company	TX	YRT/I	OL	10,670,372	720	626	9,198				
64688	75-6020048	10/01/2007	SCOR Global Life Americas Reinsurance Company	TX	DIS/I	OL		1,402	1,616	2,843				
64688	75-6020048	10/01/2007	SCOR Global Life Americas Reinsurance Company	TX	YRT/I	OL	99,323,176	307,670	293,397	408,020				
64688	75-6020048	10/10/2009	SCOR Global Life Americas Reinsurance Company	TX	DIS/I	OL		1,320	1,155	2,976				
64688	75-6020048	10/10/2009	SCOR Global Life Americas Reinsurance Company	TX	YRT/I	OL	247,728,521	835,743	696,370	1,300,124				
64688	75-6020048	01/01/2014	SCOR Global Life Americas Reinsurance Company	TX	DIS/I	OL				19				
64688	75-6020048	01/01/2014	SCOR Global Life Americas Reinsurance Company	TX	YRT/I	OL	36,071,327	58,492		59,792				

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

1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
86231	39-0989781	01/13/1988	Transamerica Life Insurance Company	NC	YRT/I	OL			1,749	(28)				
86231	39-0989781	01/01/2006	Transamerica Life Insurance Company	NC	ADB/I	OL								
86231	39-0989781	01/01/2006	Transamerica Life Insurance Company	NC	CO/I	XXXL	1,481,353,052	22,469,670	21,132,555	2,006,359				
86231	39-0989781	01/01/2006	Transamerica Life Insurance Company	NC	DIS/I	OL		228,143	29,788	57,570				
86231	39-0989781	01/01/2006	Transamerica Life Insurance Company	NC	YRT/I	OL	143,343,845	778,554	711,624	932,712				
86231	39-0989781	06/04/2007	Transamerica Life Insurance Company	NC	DIS/I	OL		40	56	30				
86231	39-0989781	06/04/2007	Transamerica Life Insurance Company	NC	YRT/I	OL	6,247,558	16,022	14,219	8,803				
86231	39-0989781	10/01/2007	Transamerica Life Insurance Company	NC	DIS/I	OL		1,570	1,772	3,165				
86231	39-0989781	10/01/2007	Transamerica Life Insurance Company	NC	YRT/I	OL	156,404,549	454,021	426,048	689,446				
0899999	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates						45,470,282,726	633,508,919	597,078,751	110,589,928	0	0	0	0
General Account - Authorized - Non-Affiliates - Non-U.S. Non-Affiliates														
93572	43-1235868	07/31/2001	RGA Reinsurance Company											
80659	38-0397420	04/01/2004	The Canada Life Assurance Company	CAN	CO/I	XXXL	632,909,836	14,930,937	14,688,406	856,258				
80659	38-0397420	04/01/2004	The Canada Life Assurance Company	CAN	DIS/I	OL		140,344	101,561	17,553				
80659	38-0397420	04/01/2004	The Canada Life Assurance Company	CAN	YRT/I	OL	7,732,352	14,715	11,580	20,901				
80659	38-0397420	01/19/2005	The Canada Life Assurance Company	CAN	CO/I	XXXL	462,541,419	10,018,464	9,447,905	632,533				
80659	38-0397420	01/19/2005	The Canada Life Assurance Company	CAN	DIS/I	OL		107,278	40,344	14,521				
80659	38-0397420	01/19/2005	The Canada Life Assurance Company	CAN	YRT/I	OL	4,678,615	8,256	6,986	11,222				
80659	38-0397420	07/01/2005	The Canada Life Assurance Company	CAN	CO/I	XXXL	172,978,593	5,069,694	4,773,896	296,537				
80659	38-0397420	07/01/2005	The Canada Life Assurance Company	CAN	DIS/I	OL		26,071	2,860	5,689				
80659	38-0397420	09/01/2005	The Canada Life Assurance Company	CAN	CO/I	XXXL	232,328,764	4,992,042	4,717,586	348,534				
80659	38-0397420	09/01/2005	The Canada Life Assurance Company	CAN	DIS/I	OL		40,456	4,193	7,726				
80659	38-0397420	01/01/2014	The Canada Life Assurance Company	CAN	DIS/I	OL				4				
80659	38-0397420	01/01/2014	The Canada Life Assurance Company	CAN	YRT/I	OL	14,571,421	16,587		15,303				
80675	38-0397420	08/01/1982	The Canada Life Assurance Company	CAN	COMB/I	OL	495,120	7,941	7,171	8,991				
80675	38-0397420	09/10/1987	The Canada Life Assurance Company	CAN	YRT/I	OL	98,588	1,392	1,238	2,625				
0999999	Total - General Account - Authorized - Non-Affiliates - Non-U.S. Non-Affiliates						1,528,334,708	35,374,177	33,803,726	2,238,397	0	0	0	0
1099999	Total - General Account - Authorized - Non-Affiliates						46,998,617,434	668,883,096	630,882,477	112,828,325	0	0	0	0
1199999	Total - General Account - Authorized						48,886,219,436	1,356,130,861	1,161,909,179	258,301,353	0	0	0	0
General Account - Unauthorized - Affiliates - U.S. - Captive														
15363	80-0955278	12/31/2013	Kenwood Re Inc	VT	CO/I	XXXL	58,469,107,583	333,825,232	244,358,115	85,535,528				
15363	80-0955278	12/31/2013	Kenwood Re Inc	VT	DIS/I	OL		3,836,078	2,574,800	2,110,333				
13575	26-3791519	12/31/2008	Montgomery Re	VT	CO/I	XXXL			8,640,720	(14,013,599)				
13575	26-3791519	12/31/2008	Montgomery Re	VT	DIS/I	OL			79,709	(86,465)				
13575	26-3791519	06/30/2009	Montgomery Re	VT	CO/I	XXXL	7,807,294,958	43,969,122	57,351,549	20,471,659				
13575	26-3791519	06/30/2009	Montgomery Re	VT	DIS/I	OL		846,171	883,221	292,321				
13575	26-3791519	05/01/2011	Montgomery Re	VT	CO/I	XXXL	23,065	6,342	5,609	345				
13575	26-3791519	05/01/2011	Montgomery Re	VT	CO/I	AXXX	504,984,713	138,845,805	122,792,243	7,562,271				

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

1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
13575.....	26-3791519....	05/01/2011	Montgomery Re.....	VT.....	DIS/I.....	OL.....	.....	204,256	170,359	.....(2,561)	.....	.....	.....	.....
13575.....	26-3791519....	07/01/2012	Montgomery Re.....	VT.....	CO/I.....	XXXL.....	16,702,032,902	115,026,803	107,148,694	29,654,670	.....	.....	.....	.....
13575.....	26-3791519....	07/01/2012	Montgomery Re.....	VT.....	DIS/I.....	OL.....	.....	1,281,151	1,325,733	615,509	.....	.....	.....	.....
1288888.	Total - General Account - Unauthorized - Affiliates - U.S. - Captive.....						83,483,443,221	637,840,960	545,330,752	132,140,011	0	0	0	0
1499999.	Total - General Account - Unauthorized - Affiliates - U.S. - Total.....						83,483,443,221	637,840,960	545,330,752	132,140,011	0	0	0	0
1899999.	Total - General Account - Unauthorized - Affiliates.....						83,483,443,221	637,840,960	545,330,752	132,140,011	0	0	0	0
General Account - Unauthorized - Non-Affiliates - Non-U.S. Non-Affiliates														
00000.....	AA-3190770...	01/01/2006	Ace Tempest Life Reinsurance	BMU.....	DIS/I.....	OL	.....	528	532	1,059	.....	.....	.....	.....
00000.....	AA-3190770...	01/01/2006	Ace Tempest Life Reinsurance	BMU.....	YRT/I.....	OL	48,003,155	178,383	168,796	184,886	.....	.....	.....	.....
2099999.	Total - General Account - Unauthorized - Non-Affiliates - Non-U.S. Non-Affiliates.....						48,003,155	178,911	169,328	185,945	0	0	0	0
2199999.	Total - General Account - Unauthorized - Non-Affiliates.....						48,003,155	178,911	169,328	185,945	0	0	0	0
2299999.	Total - General Account - Unauthorized.....						83,531,446,376	638,019,871	545,500,080	132,325,956	0	0	0	0
3499999.	Total - General Account - Authorized, Unauthorized and Certified.....						..132,417,665,812	1,994,150,732	1,707,409,259	390,627,309	0	0	0	0
6999999.	Total U.S.....						..130,841,327,949	1,958,597,644	1,673,436,205	388,202,967	0	0	0	0
7099999.	Total Non-U.S.....						1,576,337,863	35,553,088	33,973,054	2,424,342	0	0	0	0
9999999.	Total.....						..132,417,665,812	1,994,150,732	1,707,409,259	390,627,309	0	0	0	0

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 - Affiliates - U.S. - Other													
67172	31-0397080	08/03/1979	The Ohio National Life Insurance Company	OH	CO/I	LTDI	(55,466,208)						
0299999.	Total - General Account - Authorized - Affiliates - U.S. - Other						(55,466,208)	0	0	0	0	0	0
0399999.	Total - General Account - Authorized - Affiliates - U.S. - Total						(55,466,208)	0	0	0	0	0	0
0799999.	Total - General Account - Authorized - Affiliates						(55,466,208)	0	0	0	0	0	0
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates													
39845	48-0921045	09/01/1967	Westport Ins Corp	MO	CO/I	LTDI	14,259	3,072	105,041				
86258	13-2572994	01/01/1999	General Re Life Corporation	CT	CO/I	LTDI	439,209	228,413	1,075,875				
66346	58-0828824	01/01/1999	Munich American Reassurance Company	GA	CO/I	LTDI	3,793,015	2,029,199	2,491,366				
82627	06-0839705	02/01/1981	Swiss Re Life & Health America, Inc	CT	CO/I	LTDI	5,691,279	2,864,281	88,451,289				
67598	04-1768571	11/01/1988	Paul Revere Life Ins Co	MA	CO/I	LTDI	616,459	298,262	12,908,638				
0899999.	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates						10,554,221	5,423,227	105,032,209	0	0	0	0
1099999.	Total - General Account - Authorized - Non-Affiliates						10,554,221	5,423,227	105,032,209	0	0	0	0
1199999.	Total - General Account - Authorized						(44,911,987)	5,423,227	105,032,209	0	0	0	0
3499999.	Total - General Account - Authorized, Unauthorized and Certified						(44,911,987)	5,423,227	105,032,209	0	0	0	0
6999999.	Total - U.S.						(44,911,987)	5,423,227	105,032,209	0	0	0	0
9999999.	Total						(44,911,987)	5,423,227	105,032,209	0	0	0	0

SCHEDULE S - PART 4

Reinsurance Ceded To Unauthorized Companies

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Reserve Credit Taken	6 Paid and Unpaid Losses Recoverable (Debit)	7 Other Debits	8 Total (Cols. 5 + 6 + 7)	9 Letters of Credit	10 Issuing or Confirming Bank Reference Number (a)	11 Trust Agreements	12 Funds Deposited by and Withheld from Reinsurers	13 Other	14 Miscellaneous Balances (Credit)	15 Sum of Cols. 9 + 11 + 12 + 13 + 14 But Not in Excess of Col. 8
General Account - Life and Annuity - Affiliates - U.S. - Captive														
15363	80-0955278.	12/31/2013	Kenwood Re Inc.	333,825,232	5,717,360		339,542,592			121,924,818		237,579,881	5,169,857	339,542,592
15363	80-0955278.	12/31/2013	Kenwood Re Inc.	3,836,078	141,059		3,977,137			3,977,137			59,385	3,977,137
13575	26-3791519.	12/31/2008	Montgomery Re				0							0
13575	26-3791519.	12/31/2008	Montgomery Re				0							0
13575	26-3791519.	06/30/2009	Montgomery Re	43,969,122	520,598		44,489,720			45,631,628		14,571,054	435,996	44,489,720
13575	26-3791519.	06/30/2009	Montgomery Re	846,171	525,963		1,372,134			1,407,352			8,391	1,372,134
13575	26-3791519.	05/01/2011	Montgomery Re	6,342			6,342			6,505		65,454	63	6,342
13575	26-3791519.	05/01/2011	Montgomery Re	138,845,805	1,643,947		140,489,752			144,095,671		44,713,673	1,327,210	140,489,752
13575	26-3791519.	05/01/2011	Montgomery Re	204,256			204,256			209,499			2,025	204,256
13575	26-3791519.	07/01/2012	Montgomery Re	115,026,803	1,361,928		116,388,731			119,376,054		37,636,001	1,140,601	116,388,731
13575	26-3791519.	07/01/2012	Montgomery Re	1,281,151	15,169		1,296,320			1,329,592			12,704	1,296,320
0199999	Total - General Account - Life and Annuity - Affiliates - U.S. - Captive			637,840,960	9,926,024	0	647,766,984	0	XXX	437,958,256	0	334,566,063	8,156,232	647,766,984
0399999	Total - General Account - Life and Annuity - Affiliates - U.S. - Total			637,840,960	9,926,024	0	647,766,984	0	XXX	437,958,256	0	334,566,063	8,156,232	647,766,984
0799999	Total - General Account - Life and Annuity - Affiliates			637,840,960	9,926,024	0	647,766,984	0	XXX	437,958,256	0	334,566,063	8,156,232	647,766,984
General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates														
00000	AA-3190770.	01/01/2006	Ace Tempest Life Reinsurance	528			528	528	0001				51	528
00000	AA-3190770.	01/01/2006	Ace Tempest Life Reinsurance	178,383			178,383	194,472	0001				18,597	178,383
0999999	Total - General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates			178,911	0	0	178,911	195,000	XXX	0	0	0	18,648	178,911
1099999	Total - General Account - Life and Annuity - Non-Affiliates			178,911	0	0	178,911	195,000	XXX	0	0	0	18,648	178,911
1199999	Total - General Account - Life and Annuity			638,019,871	9,926,024	0	647,945,895	195,000	XXX	437,958,256	0	334,566,063	8,174,880	647,945,895
2399999	Total - General Account			638,019,871	9,926,024	0	647,945,895	195,000	XXX	437,958,256	0	334,566,063	8,174,880	647,945,895
3599999	Total - U.S.			637,840,960	9,926,024	0	647,766,984	0	XXX	437,958,256	0	334,566,063	8,156,232	647,766,984
3699999	Total - Non-U.S.			178,911	0	0	178,911	195,000	XXX	0	0	0	18,648	178,911
9999999	Total			638,019,871	9,926,024	0	647,945,895	195,000	XXX	437,958,256	0	334,566,063	8,174,880	647,945,895

(a)

Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
0001	2	121000248	Wells Fargo	195,000

SCHEDULE S - PART 5

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

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

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	345,715	303,873	323,959	255,677	193,458
2.	Commissions and reinsurance expense allowances	56,641	63,585	50,686	108,257	27,915
3.	Contract claims	186,279	160,974	160,380	160,901	135,057
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				504,780	74,386
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				1,344,288	985,808
10.	Liability for deposit-type contracts					
11.	Contract claims unpaid	20,340	14,394	16,773	25,702	14,399
12.	Amounts recoverable on reinsurance	10,879	7,791	8,961	12,686	7,661
13.	Experience rating refunds due or unpaid					
14.	Policyholders' dividends (not included in Line 10)					
15.	Commissions and reinsurance expense allowances due					
16.	Unauthorized reinsurance offset					
17.	Offset for reinsurance with certified reinsurers				XXX	XXX
C.	**UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)**					
18.	Funds deposited by and withheld from (F)					
19.	Letters of credit (L)	195	40,185		145	150,000
20.	Trust agreements (T)	437,958	379,911		380,126	47,251
21.	Other (O)	334,566	173,904			
D.	**REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)**					
22.	Multiple beneficiary trust				XXX	XXX
23.	Funds deposited by and withheld from (F)				XXX	XXX
24.	Letters of credit (L)				XXX	XXX
25.	Trust agreements (T)				XXX	XXX
26.	Other (O)				XXX	XXX

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

		1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
	ASSETS (Page 2, Col. 3)			
1.	Cash and invested assets (Line 12)	3,050,053,363		3,050,053,363
2.	Reinsurance (Line 16)	10,879,196		10,879,196
3.	Premiums and considerations (Line 15)	133,594,822		133,594,822
4.	Net credit for ceded reinsurance	XXX	2,124,945,733	2,124,945,733
5.	All other admitted assets (balance)	139,716,246		139,716,246
6.	Total assets excluding Separate Accounts (Line 26)	3,334,243,627	2,124,945,733	5,459,189,360
7.	Separate Account Assets (Line 27)	271,568,009		271,568,009
8.	Total assets (Line 28)	3,605,811,636	2,124,945,733	5,730,757,369
	LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9.	Contract reserves (Lines 1 and 2)	2,836,111,656	2,104,606,167	4,940,717,823
10.	Liability for deposit-type contracts (Line 3)	3,346,196		3,346,196
11.	Claim reserves (Line 4)	8,493,570	20,339,566	28,833,136
12.	Policyholder dividends/reserves (Lines 5 through 7)			0
13.	Premium & annuity considerations received in advance (Line 8)	684,459		684,459
14.	Other contract liabilities (Line 9)	10,346,703		10,346,703
15.	Reinsurance in unauthorized companies (Line 24.02 minus inset amount)			0
16.	Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount)			0
17.	Reinsurance with certified reinsurers (Line 24.02 inset amount)			0
18.	Funds held under reinsurance treaties with certified reinsurers (Line 24.03 inset amount)			0
19.	All other liabilities (balance)	179,240,848		179,240,848
20.	Total liabilities excluding Separate Accounts (Line 26)	3,038,223,433	2,124,945,733	5,163,169,166
21.	Separate Account liabilities (Line 27)	271,568,009		271,568,009
22.	Total liabilities (Line 28)	3,309,791,442	2,124,945,733	5,434,737,175
23.	Capital & surplus (Line 38)	296,020,190	XXX	296,020,190
24.	Total liabilities, capital & surplus (Line 39)	3,605,811,632	2,124,945,733	5,730,757,365
	NET CREDIT FOR CEDED REINSURANCE			
25.	Contract reserves	2,104,606,167		
26.	Claim reserves	20,339,566		
27.	Policyholder dividends/reserves	0		
28.	Premium & annuity considerations received in advance	0		
29.	Liability for deposit-type contracts	0		
30.	Other contract liabilities	0		
31.	Reinsurance ceded assets	0		
32.	Other ceded reinsurance recoverables	0		
33.	Total ceded reinsurance recoverables	2,124,945,733		
34.	Premiums and considerations	0		
35.	Reinsurance in unauthorized companies	0		
36.	Funds held under reinsurance treaties with unauthorized reinsurers	0		
37.	Reinsurance with certified reinsurers	0		
38.	Funds held under reinsurance treaties with certified reinsurers	0		
39.	Other ceded reinsurance payables/offsets	0		
40.	Total ceded reinsurance payables/offsets	0		
41.	Total net credit for ceded reinsurance	2,124,945,733		

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.		Direct Business Only					
		1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1.	Alabama AL	10,466,803	240	323,028			10,790,071
2.	Alaska AK	101,932		5,368			107,300
3.	Arizona AZ	9,103,861	360	133,696			9,237,917
4.	Arkansas AR	7,681,170		88,654			7,769,824
5.	California CA	57,502,981		1,464,107			58,967,088
6.	Colorado CO	16,983,766		1,375,408			18,359,174
7.	Connecticut CT	6,447,671		178,773			6,626,444
8.	Delaware DE	2,602,924		24,583			2,627,507
9.	District of Columbia DC	740,379		46,229			786,608
10.	Florida FL	36,254,162		861,164		730,634	37,845,960
11.	Georgia GA	24,630,169		397,790			25,027,959
12.	Hawaii HI	111,125		6,931		61,977	180,033
13.	Idaho ID	3,714,304		246,882			3,961,186
14.	Illinois IL	27,636,274		419,278		74,997	28,130,549
15.	Indiana IN	21,397,019		243,443			21,640,462
16.	Iowa IA	5,743,621		155,399			5,899,020
17.	Kansas KS	7,083,497	9,250	333,030			7,425,777
18.	Kentucky KY	5,700,004		286,168			5,986,172
19.	Louisiana LA	6,368,100		214,034			6,582,134
20.	Maine ME	12,255,086		2,705			12,257,791
21.	Maryland MD	11,790,065	4,644	439,468			12,234,177
22.	Massachusetts MA	18,169,219		197,811			18,367,030
23.	Michigan MI	14,473,915		869,057			15,342,972
24.	Minnesota MN	7,143,500		266,523			7,410,023
25.	Mississippi MS	12,768,675		162,227		87,098	13,018,000
26.	Missouri MO	8,803,129	340	231,301			9,034,770
27.	Montana MT	7,770,285		54,677			7,824,962
28.	Nebraska NE	6,649,267		129,032			6,778,299
29.	Nevada NV	1,759,241		48,850			1,808,091
30.	New Hampshire NH	2,147,863		49,730			2,197,593
31.	New Jersey NJ	29,795,200	400	385,316			30,180,916
32.	New Mexico NM	1,068,525		39,016			1,107,541
33.	New York NY	913,538		43,637		251,891	1,209,066
34.	North Carolina NC	12,744,223	46,368	448,440			13,239,031
35.	North Dakota ND	1,135,959		45,154			1,181,113
36.	Ohio OH	34,885,226		1,571,666		659,205	37,116,097
37.	Oklahoma OK	11,002,706		211,806			11,214,512
38.	Oregon OR	6,405,249		286,898			6,692,147
39.	Pennsylvania PA	27,871,156	27,940	997,276			28,896,372
40.	Rhode Island RI	4,854,631		29,146			4,883,777
41.	South Carolina SC	3,560,806		77,882			3,638,688
42.	South Dakota SD	512,614		22,518			535,132
43.	Tennessee TN	18,790,287	3,300	468,708		58,065	19,320,360
44.	Texas TX	47,041,170	113	1,302,293			48,343,576
45.	Utah UT	4,991,003		124,302			5,115,305
46.	Vermont VT	528,776		6,288			535,064
47.	Virginia VA	10,834,679	1,460	329,014			11,165,153
48.	Washington WA	11,655,046		392,040			12,047,086
49.	West Virginia WV	1,166,389	6,400	271,417		225,154	1,669,360
50.	Wisconsin WI	11,367,998		392,872		5,678	11,766,548
51.	Wyoming WY	1,774,699		26,234			1,800,933
52.	American Samoa AS						0
53.	Guam GU						0
54.	Puerto Rico PR	4,490,863		725,194			5,216,057
55.	US Virgin Islands VI	15,354					15,354
56.	Northern Mariana Islands MP						0
57.	Canada CAN	7,808					7,808
58.	Aggregate Other Alien OT						0
59.	Totals	601,413,912	100,815	17,452,463	0	2,154,699	621,121,889

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

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

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

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

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 *
0704.....	Ohio National Mutual Holdings, Inc.	.....	31-0742113..	.....	.....	.....	The O.N. Equity Sales Company.....	OH.....	NIA.....	The Ohio National Life Insurance Company.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	.....
0704.....	Ohio National Mutual Holdings, Inc.	.....	32-0071428..	.....	.....	.....	Ohio National Insurance Agency, Inc.....	OH.....	NIA.....	The O.N. Equity Sales Company.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	.....
0704.....	Ohio National Mutual Holdings, Inc.	.....	31-0784369..	.....	.....	.....	O.N. Investment Management Company.....	OH.....	NIA.....	The O.N. Equity Sales Company.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	.....
0704.....	Ohio National Mutual Holdings, Inc.	.....	63-1202147..	.....	.....	.....	Ohio National insurance Agency of Alabama, Inc...	AL.....	NIA.....	The O.N. Equity Sales Company.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	.....
0704.....	Ohio National Mutual Holdings, Inc.	.....	31-1684349..	.....	.....	.....	ON Flight, Inc.....	OH.....	NIA.....	Ohio National Financial Services, Inc.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	.....
0704.....	Ohio National Mutual Holdings, Inc.	.....	26-4812790..	.....	.....	.....	Financial Way Realty, Inc.....	OH.....	NIA.....	Ohio National Financial Services, Inc.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	.....
0704.....	Ohio National Mutual Holdings, Inc.	.....	03-0374493..	.....	.....	.....	Suffolk Capital Management, LLC.....	NY.....	NIA.....	Ohio National Financial Services, Inc.....	Ownership, Board of Directors, Management	.....84.698	Ohio National Mutual Holdings, Inc.....	.....
0704.....	Ohio National Mutual Holdings, Inc.	.....	46-5464819..	.....	.....	.....	ON Tech, LLC.....	DE.....	NIA.....	Ohio National Financial Services, Inc.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	.....

SCHEDULE Y

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
Affiliated Transactions												
00000	31-1614095	Ohio National Mutual Holdings, Inc.									0	
00000	31-1614097	Ohio National Financial Sevices, Inc.									0	
00000	98-0602966	Sycamore Re, Ltd.									0	
00000	46-3873878	Ohio National Foreign Holdings, LLC									0	
00000	00-0000000	Ohio National International Holdings Cooperatief U.A.									0	
00000	00-0000000	ON Netherlands Holdings B.V.									0	
00000	31-1702660	ON Global Holdings, SMLLC									0	
00000	00-0000000	Ohio National Sudamerica S.A.									0	
00000	00-0000000	Ohio National Seguros de Vida S.A.									0	
00000	00-0000000	Ohio National Seguros de Vida S.A.									0	
00000	00-0000000	ONSV do Brasil Participações Ltda.									0	
00000	00-0000000	O.N. International do Brasil Participações Ltda.									0	
00000	06-1187459	Fiduciary Capital Management, Inc.									0	
67172	31-0397080	The Ohio National Life Insurance Company	31,000,000		(2,700,000)		55,727,000	(29,366,871)			54,660,129	(688,039,504)
89206	31-0962495	Ohio National Life Assurance Corporation	(31,000,000)		2,700,000		(55,740,385)	86,319,450			2,279,065	1,335,806,488
85472	13-2740556	National Security Life and Annuity Co.									0	
13575	26-3791519	Montgomery Re, Inc.						2,019,660			2,019,660	(304,247,255)
15363	80-0955278	Kenwood Re, Inc.						(58,972,239)			(58,972,239)	(343,519,729)
00000	31-1454693	Ohio National Investments, Inc.									0	
00000	31-1454699	Ohio National Equities, Inc.					9,295				9,295	
00000	31-0742113	The O.N. Equity Sales Company					4,090				4,090	
00000	32-0071428	Ohio National Insurance Agency, Inc.									0	
00000	31-0784369	O.N. Investment Management Company									0	
00000	63-1202147	Ohio National Insurance Agency of Alabama, Inc.									0	
00000	31-1684349	ON Flight, Inc.									0	
00000	26-4812790	Financial Way Reality, Inc.									0	
00000	03-0374493	Suffolk Capital Management, LLC.									0	
00000	46-5464819	ONTech, LLC.									0	
9999999	Control Totals		0	0	0	0	0	0	XXX	0	0	0

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

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

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

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

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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EXPLANATIONS:

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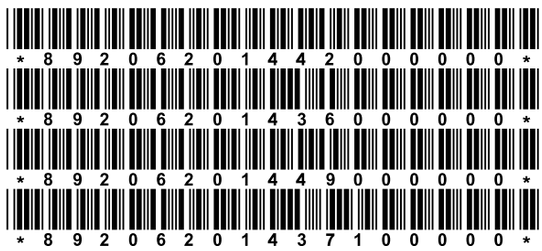
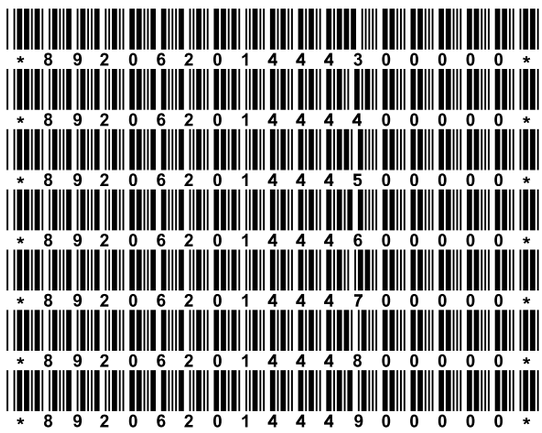
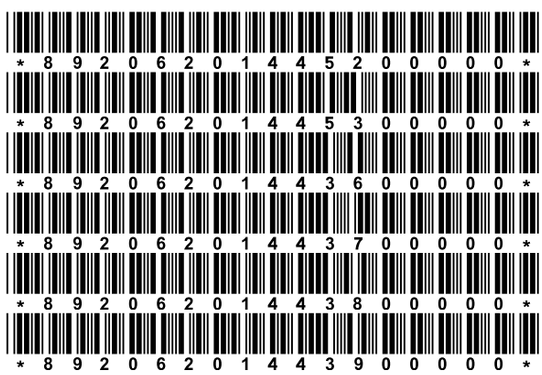
BAR CODE:







SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

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Overflow Page for Write-Ins

Additional Write-ins for Exhibit 2:

	Insurance				5	6
	1	Accident and Health		4		
		2	3	All Other Lines		
	Life	Cost Containment	All Other	of Business	Investment	Total
09.304. Regional General Agent Development	66,160		4,946			71,106
09.397. Summary of remaining write-ins for Line 9.3	66,160	0	4,946	0	0	71,106

Overflow Page for Write-Ins

NONE

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

SCHEDULE O SUPPLEMENT

NONE

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

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

SUPPLEMENTAL SCHEDULE O - PART 1

Development of Incurred Losses
($000 OMITTED)

Section A - Group Accident and Health

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

NONE

Section B - Other Accident and Health

1. Prior	2,603	3,033	2,500	2,204	6,146
2. 2010	619	144	199	135	190
3. 2011	XXX	68	225	303	407
4. 2012	XXX	XXX	75	209	423
5. 2013	XXX	XXX	XXX	77	600
6. 2014	XXX	XXX	XXX	XXX	473

Section C - Credit Accident and Health

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

NONE

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

SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O - PART 2

Development of Incurred Losses

($000 OMITTED)

Section A - Group Accident and Health

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

NONE

Section B - Other Accident and Health

1. Prior					
2. 2010					
3. 2011	XXX				
4. 2012	XXX	XXX	402		
5. 2013	XXX	XXX	XXX	158	
6. 2014	XXX	XXX	XXX	XXX	265

Section C - Credit Accident and Health

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

NONE

SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O - PART 3

Development of Incurred Losses

($000 OMITTED)

Section A - Group Accident and Health

NONE

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

Section B - Other Accident and Health

1. 2010	2,663	955	612	XXX	XXX
2. 2011	XXX	1,672	1,167	1,218	XXX
3. 2012	XXX	XXX	1,932	1,071	2,193
4. 2013	XXX	XXX	XXX	1,885	3,158
5. 2014	XXX	XXX	XXX	XXX	4,482

Section C - Credit Accident and Health

NONE

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

SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O - PART 4

Development of Incurred Losses

($000 OMITTED)

Section A - Group Accident and Health

NONE

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

Section B - Other Accident and Health

1. 2010	2,663	955	612	517	929
2. 2011	XXX	1,672	1,167	1,218	2,932
3. 2012	XXX	XXX	1,932	1,071	2,193
4. 2013	XXX	XXX	XXX	1,885	3,158
5. 2014	XXX	XXX	XXX	XXX	4,482

Section C - Credit Accident and Health

NONE

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

SUPPLEMENTAL SCHEDULE O - PART 5

($000 OMITTED)

Reserve and Liability Methodology - Exhibits 6 and 8

Line of Business	1 Methodology	2 Amount
1. Industrial life		
2. Ordinary life		8,494
3. Individual annuity		
4. Supplementary contracts		
5. Credit life		
6. Group life		
7. Group annuities		
8. Group accident and health		
9. Credit accident and health		
10. Other accident and health	Standard Factor and Other	68,056
11. Total		76,550

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

2014 ALPHABETICAL INDEX
LIFE ANNUAL STATEMENT BLANK