



ANNUAL STATEMENT

For the Year Ended December 31, 2015

of the Condition and Affairs of the

North American Swiss Alliance

NAIC Group Code.....0000, 0000
(Current Period) (Prior Period)

NAIC Company Code..... 56375

Employer's ID Number..... 34-0719168

Organized under the Laws of OH

State of Domicile or Port of Entry OH

Country of Domicile US

Incorporated/Organized..... September 6, 1889

Commenced Business..... September 6, 1889

Statutory Home Office

26777 Lorain Road, Suite 321..... North Olmsted OH US 44070
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office

26777 Lorain Road, Suite 321..... North Olmsted OH US..... 44070
(Street and Number) (City or Town, State, Country and Zip Code)

440-777-7114
(Area Code) (Telephone Number)

Mail Address

26777 Lorain Road, Suite 321..... North Olmsted OH US 44070
(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records

26777 Lorain Road, Suite 321..... North Olmsted OH US 44070
(Street and Number) (City or Town, State, Country and Zip Code)

440-777-7114
(Area Code) (Telephone Number)

Internet Web Site Address

n/a

Statutory Statement Contact

Lynn Kosin
(Name)
naswiss@sbcglobal.net
(E-Mail Address)

440-777-7114
(Area Code) (Telephone Number) (Extension)

(Fax Number)

OFFICERS

Name	Title	Name	Title
1. Alois Wendelin Amstutz	President	2. Lynn M. Kosin	Secretary
3. Lynn M. Kosin	Treasurer	4.	

OTHER

Donald Phillips Robison

Vice-President

DIRECTORS OR TRUSTEES

Alois Wendelin Amstutz	Richard Alan Rowland	William George Preslock	Donald Phillips Robison
Richard Herman Hardt	Marilyn Almo Kozma	Carl Hans Kunzler	Darlene Kilchemann
Jan Markowski			

State of..... Cuyahoga
County of..... Ohio

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)

Alois Wendelin Amstutz

1. (Printed Name)

President

(Title)

(Signature)

Lynn M. Kosin

2. (Printed Name)

Secretary

(Title)

(Signature)

Lynn M. Kosin

3. (Printed Name)

Treasurer

(Title)

Subscribed and sworn to before me

This _____ day of _____ 2016

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 _____



LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF CALIFORNIA DURING THE YEAR

NAIC Group Code.....0000

NAIC Society Code.....56375

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Life and Annuities
1. Life insurance.....		
2. Annuity considerations.....		
3. Deposit-type contract funds.....		
4. Other considerations.....		
5. Total (Lines 1 to 4).....		0
DIRECT REFUNDS TO MEMBERS		
Life Insurance:		
6.1 Paid in cash or left on deposit.....		
6.2 Applied to pay renewal premiums.....		
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		361
6.4 Other.....		
6.5 Total (Sum of Lines 6.1 to 6.4).....		361
Annuities:		
7.1 Paid in cash or left on deposit.....		
7.2 Applied to provide paid-up annuities.....		
7.3 Other.....		
7.4 Total (Sum of Lines 7.1 to 7.3).....		0
8. Total (Line 6.5 plus Line 7.4).....		361
DIRECT CLAIMS AND BENEFITS PAID		
9. Death benefits.....		
10. Matured endowments.....		
11. Annuity benefits.....		
12. Surrender values. and withdrawals for life contracts.....		
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0
14. All other benefits, except accident & health.....		
15. Total.....		0
DETAILS OF WRITE-INS		
1301.		
1302.		
1303.		
1398. Summary of remaining write-ins for Line 13 from overflow page.....		0
1399. Totals (Items 1301 thru 1303 plus 1398) (Line 13 above).....		0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		1 Number of Certificates	2 Amount
16. Unpaid December 31, prior year.....			
17. Incurred during current year.....			
Settled during current year:			
18.1 By payment in full.....			
18.2 By payment on compromised claims.....			
18.3 Total paid.....		0	0
18.4 Reduction by compromise.....			
18.5 Amount rejected.....			
18.6 Total settlements.....		0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....		0	0
POLICY EXHIBIT			
20. In force December 31, prior year.....		156	212,098
21. Issued during year.....			
22. Other changes to in force (net).....			3,574
23. In force December 31, current year.....		156	215,672

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Refunds Paid or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Collectively Renewable Certificates.....	NONE				
Other Individual Certificates:					
25.1 Non-cancelable.....					
25.2 Guaranteed renewable.....					
25.3 Non-renewable for stated reasons only.....					
25.4 Other accident only.....					
25.5 Medicare Title XVIII exempt from state taxes or fees.....					
25.6 All Other.....					
25.7 Totals (sum of Lines 25.1 to 25.6).....		0	0	0	0
26. Totals (Line 24 + 25.7).....		0	0	0	0



LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF COLORADO DURING THE YEAR

NAIC Group Code.....0000

NAIC Society Code.....56375

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		1	2
		Number of Certificates	Amount
16.	Unpaid December 31, prior year.....		
17.	Incurred during current year.....		
Settled during current year:			
18.1	By payment in full.....		
18.2	By payment on compromised claims.....		
18.3	Total paid.....	0	0
18.4	Reduction by compromise.....		
18.5	Amount rejected.....		
18.6	Total settlements.....	0	0
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0
POLICY EXHIBIT			
20.	In force December 31, prior year.....	55	69,991
21.	Issued during year.....		
22.	Other changes to in force (net).....	(55)	(69,991)
23.	In force December 31, current year.....	0	(0)

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Refunds Paid or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Collectively Renewable Certificates.....				
Other Individual Certificates:					
25.1	Non-cancelable.....				
25.2	Guaranteed renewable.....				
25.3	Non-renewable for stated reasons only.....				
25.4	Other accident only.....				
25.5	Medicare Title XVIII exempt from state taxes or fees.....				
25.6	All Other.....				
25.7	Totals (sum of Lines 25.1 to 25.6).....	0	0	0	0
26.	Totals (Line 24 + 25.7).....	0	0	0	0



LIFE INSURANCE

DIRECT BUSINESS IN GRAND TOTAL DURING THE YEAR

NAIC Group Code.....0000

NAIC Society Code.....56375

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Life and Annuities
1. Life insurance.....		18,356
2. Annuity considerations.....		
3. Deposit-type contract funds.....		
4. Other considerations.....		
5. Total (Lines 1 to 4).....		18,356
DIRECT REFUNDS TO MEMBERS		
Life Insurance:		
6.1 Paid in cash or left on deposit.....		
6.2 Applied to pay renewal premiums.....		
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		8,176
6.4 Other.....		
6.5 Total (Sum of Lines 6.1 to 6.4).....		8,176
Annuities:		
7.1 Paid in cash or left on deposit.....		
7.2 Applied to provide paid-up annuities.....		
7.3 Other.....		
7.4 Total (Sum of Lines 7.1 to 7.3).....		0
8. Total (Line 6.5 plus Line 7.4).....		8,176
DIRECT CLAIMS AND BENEFITS PAID		
9. Death benefits.....		31,400
10. Matured endowments.....		
11. Annuity benefits.....		
12. Surrender values. and withdrawals for life contracts.....		3,998
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0
14. All other benefits, except accident & health.....		
15. Total.....		35,398
DETAILS OF WRITE-INS		
1301.		
1302.		
1303.		
1398. Summary of remaining write-ins for Line 13 from overflow page.....		0
1399. Totals (Items 1301 thru 1303 plus 1398) (Line 13 above).....		0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		1 Number of Certificates	2 Amount
16. Unpaid December 31, prior year.....		4	4,647
17. Incurred during current year.....		30	45,801
Settled during current year:			
18.1 By payment in full.....		29	45,448
18.2 By payment on compromised claims.....			
18.3 Total paid.....		29	45,448
18.4 Reduction by compromise.....			
18.5 Amount rejected.....			
18.6 Total settlements.....		29	45,448
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....		5	5,000
POLICY EXHIBIT			
20. In force December 31, prior year.....		2,193	4,647,192
21. Issued during year.....		47	120,000
22. Other changes to in force (net).....		(39)	(41,696)
23. In force December 31, current year.....		2,201	4,725,496

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Refunds Paid or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Collectively Renewable Certificates.....	NONE				
Other Individual Certificates:					
25.1 Non-cancelable.....					
25.2 Guaranteed renewable.....					
25.3 Non-renewable for stated reasons only.....					
25.4 Other accident only.....					
25.5 Medicare Title XVIII exempt from state taxes or fees.....					
25.6 All Other.....					
25.7 Totals (sum of Lines 25.1 to 25.6).....		0	0	0	0
26. Totals (Line 24 + 25.7).....		0	0	0	0



LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR

NAIC Group Code.....0000

NAIC Society Code.....56375

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

NONE

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		1	2
		Number of Certificates	Amount
16.	Unpaid December 31, prior year.....	1	739
17.	Incurred during current year.....		
Settled during current year:			
18.1	By payment in full.....	1	739
18.2	By payment on compromised claims.....		
18.3	Total paid.....	1	739
18.4	Reduction by compromise.....		
18.5	Amount rejected.....		
18.6	Total settlements.....	1	739
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0
POLICY EXHIBIT			
20.	In force December 31, prior year.....	45	82,453
21.	Issued during year.....		
22.	Other changes to in force (net).....	(45)	(82,453)
23.	In force December 31, current year.....	0	0

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Refunds Paid or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Collectively Renewable Certificates.....				
Other Individual Certificates:					
25.1	Non-cancelable.....				
25.2	Guaranteed renewable.....				
25.3	Non-renewable for stated reasons only.....				
25.4	Other accident only.....				
25.5	Medicare Title XVIII exempt from state taxes or fees.....				
25.6	All Other.....				
25.7	Totals (sum of Lines 25.1 to 25.6).....	0	0	0	0
26.	Totals (Line 24 + 25.7).....	0	0	0	0

NONE



LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF KENTUCKY DURING THE YEAR

NAIC Group Code.....0000 NAIC Society Code.....56375

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

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

NONE

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		1	2
		Number of Certificates	Amount
16.	Unpaid December 31, prior year.....		
17.	Incurred during current year.....		
Settled during current year:			
18.1	By payment in full.....		
18.2	By payment on compromised claims.....		
18.3	Total paid.....	0	0
18.4	Reduction by compromise.....		
18.5	Amount rejected.....		
18.6	Total settlements.....	0	0
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0
POLICY EXHIBIT			
20.	In force December 31, prior year.....	26	50,271
21.	Issued during year.....		
22.	Other changes to in force (net).....	(26)	(50,271)
23.	In force December 31, current year.....	0	0

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Refunds Paid or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Collectively Renewable Certificates.....				
Other Individual Certificates:					
25.1	Non-cancelable.....				
25.2	Guaranteed renewable.....				
25.3	Non-renewable for stated reasons only.....				
25.4	Other accident only.....				
25.5	Medicare Title XVIII exempt from state taxes or fees.....				
25.6	All Other.....				
25.7	Totals (sum of Lines 25.1 to 25.6).....	0	0	0	0
26.	Totals (Line 24 + 25.7).....	0	0	0	0

NONE



LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAR

NAIC Group Code.....0000 NAIC Society Code.....56375

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

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

NONE

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		1	2
		Number of Certificates	Amount
16.	Unpaid December 31, prior year.....	1	1,654
17.	Incurred during current year.....		
Settled during current year:			
18.1	By payment in full.....	1	1,654
18.2	By payment on compromised claims.....		
18.3	Total paid.....	1	1,654
18.4	Reduction by compromise.....		
18.5	Amount rejected.....		
18.6	Total settlements.....	1	1,654
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0
POLICY EXHIBIT			
20.	In force December 31, prior year.....	9	24,415
21.	Issued during year.....		
22.	Other changes to in force (net).....	(9)	(24,415)
23.	In force December 31, current year.....	0	0

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Refunds Paid or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Collectively Renewable Certificates.....				
Other Individual Certificates:					
25.1	Non-cancelable.....				
25.2	Guaranteed renewable.....				
25.3	Non-renewable for stated reasons only.....				
25.4	Other accident only.....				
25.5	Medicare Title XVIII exempt from state taxes or fees.....				
25.6	All Other.....				
25.7	Totals (sum of Lines 25.1 to 25.6).....	0	0	0	0
26.	Totals (Line 24 + 25.7).....	0	0	0	0

NONE



LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF MISSOURI DURING THE YEAR

NAIC Group Code.....0000 NAIC Society Code.....56375

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

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		1 Number of Certificates	2 Amount
16. Unpaid December 31, prior year.....			
17. Incurred during current year.....			
Settled during current year:			
18.1 By payment in full.....			
18.2 By payment on compromised claims.....			
18.3 Total paid.....		0	0
18.4 Reduction by compromise.....			
18.5 Amount rejected.....			
18.6 Total settlements.....		0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....		0	0
POLICY EXHIBIT			
20. In force December 31, prior year.....		35	31,341
21. Issued during year.....			
22. Other changes to in force (net).....		(35)	(31,341)
23. In force December 31, current year.....		0	0

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Refunds Paid or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Collectively Renewable Certificates.....	NONE				
Other Individual Certificates:					
25.1 Non-cancelable.....					
25.2 Guaranteed renewable.....					
25.3 Non-renewable for stated reasons only.....					
25.4 Other accident only.....					
25.5 Medicare Title XVIII exempt from state taxes or fees.....					
25.6 All Other.....					
25.7 Totals (sum of Lines 25.1 to 25.6).....		0	0	0	0
26. Totals (Line 24 + 25.7).....		0	0	0	0



LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF OHIO DURING THE YEAR

NAIC Group Code.....0000

NAIC Society Code.....56375

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1
		Life and Annuities
1.	Life insurance.....	18,356
2.	Annuity considerations.....	
3.	Deposit-type contract funds.....	
4.	Other considerations.....	
5.	Total (Lines 1 to 4).....	18,356
DIRECT REFUNDS TO MEMBERS		
Life Insurance:		
6.1	Paid in cash or left on deposit.....	
6.2	Applied to pay renewal premiums.....	
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	7,815
6.4	Other.....	
6.5	Total (Sum of Lines 6.1 to 6.4).....	7,815
Annuities:		
7.1	Paid in cash or left on deposit.....	
7.2	Applied to provide paid-up annuities.....	
7.3	Other.....	
7.4	Total (Sum of Lines 7.1 to 7.3).....	0
8.	Total (Line 6.5 plus Line 7.4).....	7,815
DIRECT CLAIMS AND BENEFITS PAID		
9.	Death benefits.....	29,400
10.	Matured endowments.....	
11.	Annuity benefits.....	
12.	Surrender values. and withdrawals for life contracts.....	2,666
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0
14.	All other benefits, except accident & health.....	
15.	Total.....	32,066

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		1	2
		Number of Certificates	Amount
16.	Unpaid December 31, prior year.....	2	2,254
17.	Incurred during current year.....	30	45,801
Settled during current year:			
18.1	By payment in full.....	27	43,055
18.2	By payment on compromised claims.....		
18.3	Total paid.....	27	43,055
18.4	Reduction by compromise.....		
18.5	Amount rejected.....		
18.6	Total settlements.....	27	43,055
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	5	5,000
POLICY EXHIBIT			
20.	In force December 31, prior year.....	1,614	3,758,703
21.	Issued during year.....	47	120,000
22.	Other changes to in force (net).....	384	631,121
23.	In force December 31, current year.....	2,045	4,509,824

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Refunds Paid or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Collectively Renewable Certificates.....	NONE				
Other Individual Certificates:					
25.1 Non-cancelable.....					
25.2 Guaranteed renewable.....					
25.3 Non-renewable for stated reasons only.....					
25.4 Other accident only.....					
25.5 Medicare Title XVIII exempt from state taxes or fees.....					
25.6 All Other.....					
25.7 Totals (sum of Lines 25.1 to 25.6).....		0	0	0	0
26. Totals (Line 24 + 25.7).....		0	0	0	0



LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF OREGON DURING THE YEAR

NAIC Group Code.....0000

NAIC Society Code.....56375

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

NONE

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		1 Number of Certificates	2 Amount
16. Unpaid December 31, prior year.....			
17. Incurred during current year.....			
Settled during current year:			
18.1 By payment in full.....			
18.2 By payment on compromised claims.....			
18.3 Total paid.....		0	0
18.4 Reduction by compromise.....			
18.5 Amount rejected.....			
18.6 Total settlements.....		0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....		0	0
POLICY EXHIBIT			
20. In force December 31, prior year.....		28	58,281
21. Issued during year.....			
22. Other changes to in force (net).....		(28)	(58,281)
23. In force December 31, current year.....		0	0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Refunds Paid or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Collectively Renewable Certificates.....					
Other Individual Certificates:					
25.1 Non-cancelable.....					
25.2 Guaranteed renewable.....					
25.3 Non-renewable for stated reasons only.....					
25.4 Other accident only.....					
25.5 Medicare Title XVIII exempt from state taxes or fees.....					
25.6 All Other.....					
25.7 Totals (sum of Lines 25.1 to 25.6).....	0	0	0	0	0
26. Totals (Line 24 + 25.7).....	0	0	0	0	0

NONE



LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR

NAIC Group Code.....0000

NAIC Society Code.....56375

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

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

NONE

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		1	2
		Number of Certificates	Amount
16.	Unpaid December 31, prior year.....		
17.	Incurred during current year.....		
Settled during current year:			
18.1	By payment in full.....		
18.2	By payment on compromised claims.....		
18.3	Total paid.....	0	0
18.4	Reduction by compromise.....		
18.5	Amount rejected.....		
18.6	Total settlements.....	0	0
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0
POLICY EXHIBIT			
20.	In force December 31, prior year.....	124	178,339
21.	Issued during year.....		
22.	Other changes to in force (net).....	(124)	(178,339)
23.	In force December 31, current year.....	0	0

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Refunds Paid or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Collectively Renewable Certificates.....				
Other Individual Certificates:					
25.1	Non-cancelable.....				
25.2	Guaranteed renewable.....				
25.3	Non-renewable for stated reasons only.....				
25.4	Other accident only.....				
25.5	Medicare Title XVIII exempt from state taxes or fees.....				
25.6	All Other.....				
25.7	Totals (sum of Lines 25.1 to 25.6).....	0	0	0	0
26.	Totals (Line 24 + 25.7).....	0	0	0	0

NONE



LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF WISCONSIN DURING THE YEAR

NAIC Group Code.....0000

NAIC Society Code.....56375

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Life and Annuities
1. Life insurance.....		
2. Annuity considerations.....		
3. Deposit-type contract funds.....		
4. Other considerations.....		
5. Total (Lines 1 to 4).....		0
DIRECT REFUNDS TO MEMBERS		
Life Insurance:		
6.1 Paid in cash or left on deposit.....		
6.2 Applied to pay renewal premiums.....		
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		
6.4 Other.....		
6.5 Total (Sum of Lines 6.1 to 6.4).....		0
Annuities:		
7.1 Paid in cash or left on deposit.....		
7.2 Applied to provide paid-up annuities.....		
7.3 Other.....		
7.4 Total (Sum of Lines 7.1 to 7.3).....		0
8. Total (Line 6.5 plus Line 7.4).....		0
DIRECT CLAIMS AND BENEFITS PAID		
9. Death benefits.....		2,000
10. Matured endowments.....		
11. Annuity benefits.....		
12. Surrender values. and withdrawals for life contracts.....		1,332
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0
14. All other benefits, except accident & health.....		
15. Total.....		3,332
DETAILS OF WRITE-INS		
1301.		
1302.		
1303.		
1398. Summary of remaining write-ins for Line 13 from overflow page.....		0
1399. Totals (Items 1301 thru 1303 plus 1398) (Line 13 above).....		0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED		1 Number of Certificates	2 Amount
16. Unpaid December 31, prior year.....			
17. Incurred during current year.....			
Settled during current year:			
18.1 By payment in full.....			
18.2 By payment on compromised claims.....			
18.3 Total paid.....		0	0
18.4 Reduction by compromise.....			
18.5 Amount rejected.....			
18.6 Total settlements.....		0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....		0	0
POLICY EXHIBIT			
20. In force December 31, prior year.....		101	181,300
21. Issued during year.....			
22. Other changes to in force (net).....		(101)	(181,300)
23. In force December 31, current year.....		0	0

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Refunds Paid or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Collectively Renewable Certificates.....	NONE				
Other Individual Certificates:					
25.1 Non-cancelable.....					
25.2 Guaranteed renewable.....					
25.3 Non-renewable for stated reasons only.....					
25.4 Other accident only.....					
25.5 Medicare Title XVIII exempt from state taxes or fees.....					
25.6 All Other.....					
25.7 Totals (sum of Lines 25.1 to 25.6).....		0	0	0	0
26. Totals (Line 24 + 25.7).....		0	0	0	0

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

Interest Maintenance Reserve

	1 Amount
1. Reserve as of December 31, prior year.....	184,543
2. Current year's realized pre-tax capital gains/(losses) of \$.....0 transferred into the reserve net of taxes of \$.....0.....	632
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).....	185,175
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4).....	35,672
6. Reserve as of December 31, current year (Line 4 minus Line 5).....	149,503

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. 2015.....	35,040	632		35,672
2. 2016.....	29,263			29,263
3. 2017.....	24,021			24,021
4. 2018.....	18,596			18,596
5. 2019.....	13,998			13,998
6. 2020.....	10,603			10,603
7. 2021.....	7,670			7,670
8. 2022.....	5,386			5,386
9. 2023.....	4,458			4,458
10. 2024.....	4,354			4,354
11. 2025.....	4,076			4,076
12. 2026.....	3,961			3,961
13. 2027.....	3,773			3,773
14. 2028.....	3,594			3,594
15. 2029.....	3,265			3,265
16. 2030.....	2,750			2,750
17. 2031.....	1,899			1,899
18. 2032.....	1,099			1,099
19. 2033.....	596			596
20. 2034.....	417			417
21. 2035.....	476			476
22. 2036.....	801			801
23. 2037.....	1,095			1,095
24. 2038.....	1,153			1,153
25. 2039.....	903			903
26. 2040.....	673			673
27. 2041.....	486			486
28. 2042.....	144			144
29. 2043.....	(7)			(7)
30. 2044.....				0
31. 2045 and Later.....				0
32. Total (Lines 1 to 31).....	184,543	632	0	185,175

ASSET VALUATION RESERVE

	Default Component			Equity Component			7 Total Amount (Cols. 3 + 6)
	1 Other Than Mortgage Loans	2 Mortgage Loans	3 Total (Cols. 1 + 2)	4 Common Stock	5 Real Estate and Other Invested Assets	6 Total (Cols. 4 + 5)	
1. Reserve as of December 31, prior year.....	14,079		14,079			0	14,079
2. Realized capital gains/(losses) net of taxes - General Account.....			0			0	0
3. Realized capital gains/(losses) net of taxes - Separate Accounts.....			0			0	0
4. Unrealized capital gains/(losses) - net of deferred taxes - General Account.....			0			0	0
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.....	2,783		2,783			0	2,783
8. Accumulated balances (Lines 1 through 5, minus 6 plus 7).....	16,861	0	16,861	0	0	0	16,861
9. Maximum reserve.....	16,127		16,127			0	16,127
10. Reserve objective.....	11,370		11,370			0	11,370
11. 20% of (Line 10 minus Line 8).....	(1,098)	0	(1,098)	0	0	0	(1,098)
12. Balance before transfers (Lines 8 + 11).....	15,763	0	15,763	0	0	0	15,763
13. Transfers.....			0			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).....	15,763	0	15,763	0	0	0	15,763

ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

Line Number	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols. 4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
LONG-TERM BONDS												
1		Exempt obligations.....		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
2	1	Highest quality.....	2,665,370	XXX	XXX	2,665,370	0.0004	1,066	0.0023	6,130	0.0030	7,996
3	2	High quality.....	734,489	XXX	XXX	734,489	0.0019	1,396	0.0058	4,260	0.0090	6,610
4	3	Medium quality.....		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
5	4	Low quality.....		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
6	5	Lower quality.....		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
7	6	In or near default.....		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
8		Total unrated multi-class securities acquired by conversion.....		XXX	XXX	0	XXX	0	XXX	0	XXX	
9		Total bonds (sum of Lines 1 through 8).....	3,399,859	XXX	XXX	3,399,859	XXX	2,462	XXX	10,390	XXX	14,607
PREFERRED STOCKS												
10	1	Highest quality.....		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
11	2	High quality.....	168,889	XXX	XXX	168,889	0.0019	321	0.0058	980	0.0090	1,520
12	3	Medium quality.....		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
13	4	Low quality.....		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
14	5	Lower quality.....		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
15	6	In or near default.....		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
16		Affiliated life with AVR.....		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
17		Total preferred stocks (sum of Lines 10 through 16).....	168,889	XXX	XXX	168,889	XXX	321	XXX	980	XXX	1,520
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).....	3,568,748	XXX	XXX	3,568,748	XXX	2,783	XXX	11,370	XXX	16,127

Asset Valuation Reserve - Default
NONE

Asset Valuation Reserve - Equity
NONE

Asset Valuation Reserve - Equity
NONE

Asset Valuation Reserve - Equity
NONE

Asset Valuation Reserve - Replications (Synthetic) Assets
NONE

Sch. F - Claims
NONE

Sch. H - Pt. 1
NONE

Sch. H - Pt. 2
NONE

Sch. H - Pt. 3
NONE

Sch. H - Pt. 4
NONE

Sch. H - Pt. 5
NONE

Sch. S - Pt. 1 - Sn. 1
NONE

Sch. S - Pt. 1 - Sn. 2
NONE

Sch. S - Pt. 2
NONE

Sch. S - Pt. 3 - Sn. 1
NONE

Sch. S - Pt. 3 - Sn. 2
NONE

Sch. S - Pt. 4
NONE

Sch. S - Pt. 5
NONE

Sch. S - Pt. 6
NONE

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).....	3,617,591		3,617,591
2. Reinsurance (Line 16).....			0
3. Premiums and considerations (Line 15).....			0
4. Net credit for ceded reinsurance.....	XXX	0	0
5. All other admitted assets (balance).....	49,143		49,143
6. Total assets excluding separate accounts (Line 26).....	3,666,734	0	3,666,734
7. Separate account assets (Line 27).....			0
8. Total assets (Line 28).....	3,666,734	0	3,666,734
LIABILITIES, SURPLUS AND OTHER FUNDS (Page 3)			
9. Contract reserves (Lines 1 and 2).....	2,570,000		2,570,000
10. Liability for deposit-type contracts (Line 3).....			0
11. Claim reserves (Line 4).....	5,000		5,000
12. Member refunds/reserves (Lines 5 through 6).....	10,000		10,000
13. Premium & annuity considerations received in advance (Line 7).....			0
14. Other contract liabilities (Line 8).....	149,503		149,503
15. Reinsurance in unauthorized companies (Line 21.2 minus inset amount).....			0
16. Funds held under reinsurance with unauthorized reinsurance (Line 21.3 minus inset amount).....			0
17. Reinsurance with certified reinsurers (Line 24.2 inset amount).....			0
18. Funds held under reinsurance treaties with certified reinsurers (Line 24.3 inset amount)....			0
19. All other liabilities (balance).....	227,300		227,300
20. Total liabilities excluding Separate Accounts (Line 23).....	2,961,803	0	2,961,803
21. Separate Account liabilities (Line 24).....			0
22. Total liabilities (Line 25).....	2,961,803	0	2,961,803
23. Capital & surplus (Line 30).....	704,931	XXX	704,931
24. Total liabilities, capital & surplus (Line 31).....	3,666,734	0	3,666,734
NET CREDIT FOR CEDED REINSURANCE			
25. Contract reserves.....	0		
26. Claim reserves.....	0		
27. Member refunds/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.....	0		
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.....	0		

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					0
2.	Alaska.....AK					0
3.	Arizona.....AZ					0
4.	Arkansas.....AR					0
5.	California.....CA					0
6.	Colorado.....CO					0
7.	Connecticut.....CT					0
8.	Delaware.....DE					0
9.	District of Columbia.....DC					0
10.	Florida.....FL					0
11.	Georgia.....GA					0
12.	Hawaii.....HI					0
13.	Idaho.....ID					0
14.	Illinois.....IL					0
15.	Indiana.....IN					0
16.	Iowa.....IA					0
17.	Kansas.....KS					0
18.	Kentucky.....KY					0
19.	Louisiana.....LA					0
20.	Maine.....ME					0
21.	Maryland.....MD					0
22.	Massachusetts.....MA					0
23.	Michigan.....MI					0
24.	Minnesota.....MN					0
25.	Mississippi.....MS					0
26.	Missouri.....MO					0
27.	Montana.....MT					0
28.	Nebraska.....NE					0
29.	Nevada.....NV					0
30.	New Hampshire.....NH					0
31.	New Jersey.....NJ					0
32.	New Mexico.....NM					0
33.	New York.....NY					0
34.	North Carolina.....NC					0
35.	North Dakota.....ND					0
36.	Ohio.....OH	18,356				18,356
37.	Oklahoma.....OK					0
38.	Oregon.....OR					0
39.	Pennsylvania.....PA					0
40.	Rhode Island.....RI					0
41.	South Carolina.....SC					0
42.	South Dakota.....SD					0
43.	Tennessee.....TN					0
44.	Texas.....TX					0
45.	Utah.....UT					0
46.	Vermont.....VT					0
47.	Virginia.....VA					0
48.	Washington.....WA					0
49.	West Virginia.....WV					0
50.	Wisconsin.....WI					0
51.	Wyoming.....WY					0
52.	American Samoa.....AS					0
53.	Guam.....GU					0
54.	Puerto Rico.....PR					0
55.	US Virgin Islands.....VI					0
56.	Northern Mariana Islands.....MP					0
57.	Canada.....CAN					0
58.	Aggregate Other Alien.....OT					0
59.	Totals.....	18,356	0	0	0	18,356

Sch. Y - Pt. 1A
NONE

Sch. Y - Pt. 2
NONE

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

MARCH FILING		Responses
1.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2.	Will an actuarial opinion be filed with this statement by March 1?	YES
3.	Will the confidential Risk-Based Capital Report be filed with the NAIC by March 1?	YES
4.	Will the confidential Risk-Based Capital Report be filed with the state of domicile, if required, by March 1?	YES
APRIL FILING		
5.	Will Management's Discussion and Analysis be filed by April 1?	YES
6.	Will the Supplemental Investment Risk Interrogatories be filed by April 1?	YES
JUNE FILING		
7.	Will an audited financial report be filed by June 1?	NO
8.	Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	NO
AUGUST FILING		
9.	Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1?	NO

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		
10.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
11.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
12.	Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	YES
13.	Will the statement 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
14.	Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?	NO
15.	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
16.	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
17.	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
18.	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
19.	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
20.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be field 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 XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
22.	Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?	NO
23.	Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?	NO
24.	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
25.	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
26.	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
27.	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
28.	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
29.	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
30.	Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1?	NO
31.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
32.	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
33.	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
34.	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
35.	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		
36.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
37.	Will the Interest-Sensitive Life Insurance Products Report Forms be filed with the state of domicile and the NAIC by April 1?	YES
38.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
39.	Will the Analysis of Annuity Operations by Lines of Business be filed with the state of domicile and the NAIC by April 1?	YES
40.	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
41.	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
42.	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

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

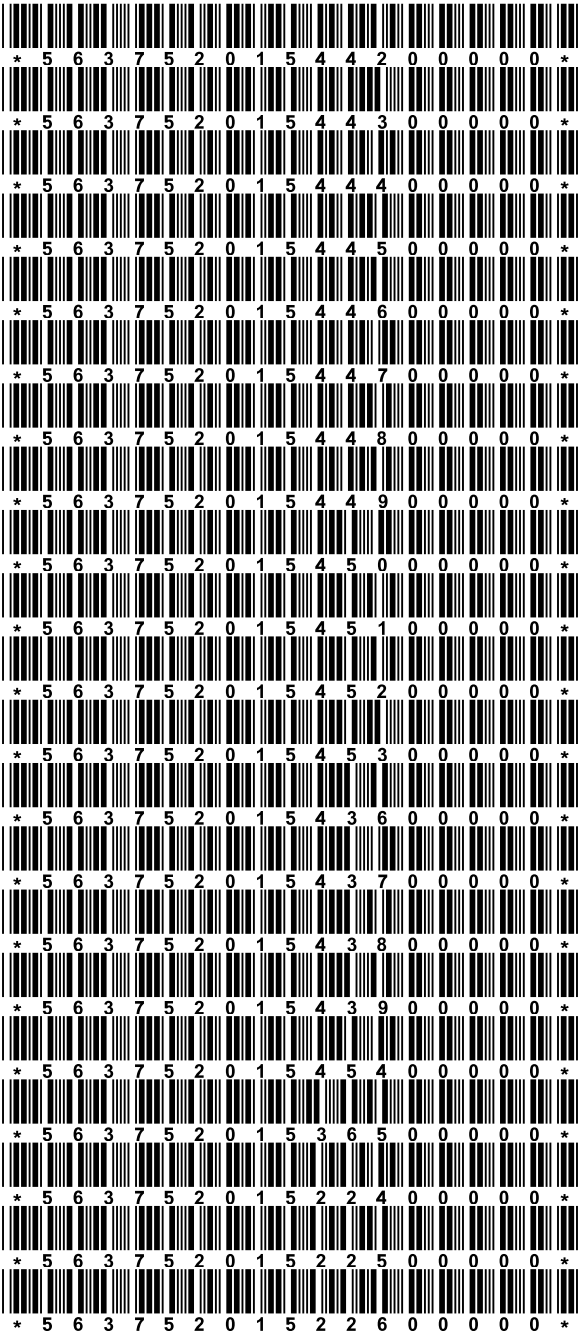
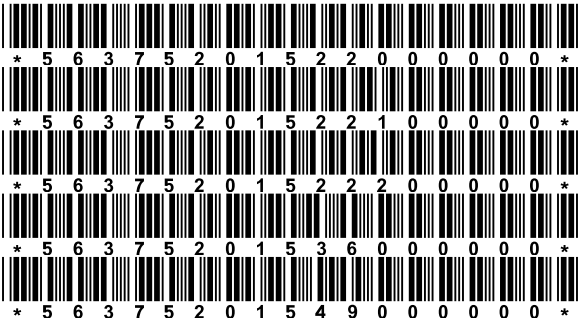
43. Will the confidential Actuarial Memorandum required by Actuarial Guideline XXXVIII 8D be filed with the state of domicile by April 30?	YES
44. Will the Supplemental XXX/AXXX Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
AUGUST FILING	
45. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

EXPLANATIONS:

BARCODES:

- 1.
- 2.
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7. The data for this supplement is not required to be filed.
8. The data for this supplement is not required to be filed.
9. The data for this supplement is not required to be filed.
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14. The data for this supplement is not required to be filed.
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34. The data for this supplement is not required to be filed.
- 35.
36. The data for this supplement is not required to be filed.
- 37.



SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

38. The data for this supplement is not required to be filed.



39.

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41. The data for this supplement is not required to be filed.



42. The data for this supplement is not required to be filed.



43.

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NONE**

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NONE**

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