



ANNUAL STATEMENT

For the Year Ended December 31, 2015
of the Condition and Affairs of the

Universal Guaranty Life Insurance Company

NAIC Group Code..... 0, 0
(Current Period) (Prior Period)

NAIC Company Code..... 70130

Employer's ID Number..... 31-0727974

Organized under the Laws of Ohio

State of Domicile or Port of Entry Ohio

Country of Domicile US

Incorporated/Organized..... November 15, 1966

Commenced Business..... December 31, 1966

Statutory Home Office

65 East State Street, Suite 2100..... Columbus OH US 43215-4260
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office

5250 S 6th Street Rd..... Springfield IL US..... 62703-5158
(Street and Number) (City or Town, State, Country and Zip Code)

877-881-1777
(Area Code) (Telephone Number)

Mail Address

P.O. Box 5147..... Springfield IL US 62705-5147
(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records

5250 S 6th Street Rd..... Springfield IL US 62703-5158
(Street and Number) (City or Town, State, Country and Zip Code)

877-881-1777
(Area Code) (Telephone Number)

Internet Web Site Address

www.utgins.com

Statutory Statement Contact

Julie Ann Abel
(Name)
accounting@utgins.com
(E-Mail Address)

217-241-6300-344
(Area Code) (Telephone Number) (Extension)
217-529-1066
(Fax Number)

OFFICERS

Name	Title	Name	Title
1. James Patrick Rousey	President	2. Theodore Clayton Miller	Secretary/CFO
3. Julie Ann Abel	Treasurer	4.	
OTHER			
Julie Ann Abel	Vice President	Jacob Joncarl Andrew	Vice President
Michael Keith Borden	Vice President	Jesse Thomas Correll	Chief Executive Officer
Douglas Paul Ditto	Vice President	Douglas August Dockter	Vice President
Theodore Clayton Miller	Senior Vice President		

DIRECTORS OR TRUSTEES

Randall Lanier Attkisson	Joseph Anthony Brinck II	Jesse Thomas Correll	Ward Forrest Correll
Brian Jay Crall #	Howard Lape Dayton Jr	Peter Loyd Ochs	James Patrick Rousey

State of..... Illinois
County of..... Sangamon

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)

James Patrick Rousey

1. (Printed Name)

President

(Title)

(Signature)

Theodore Clayton Miller

2. (Printed Name)

Secretary/CFO

(Title)

(Signature)

Julie Ann Abel

3. (Printed Name)

Treasurer

(Title)

Subscribed and sworn to before me

This 1st day of February 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

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF ALASKA DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	761	0	0	0	761
2. Annuity considerations.....	80	0	0	0	80
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	841	0	0	0	841
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	197	0	0	0	197
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	197	0	0	0	197
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	197	0	0	0	197
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	0	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	4,294	0	0	0	4,294
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	4,294	0	0	0	4,294

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	5	32,082	0	0	0	0	15	11,375	20	43,457
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	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).....	5	32,082	0	0	0	0	15	11,375	20	43,457
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	19	188,664	0	(a).....0	0	0	0	0	19	188,664
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(2)	(71,451)	0	0	0	0	0	0	(2)	(71,451)
23. In force December 31 of current year.....	17	117,213	0	(a).....0	0	0	0	0	17	117,213

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF **ALABAMA** DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	50,838	0	0	510	51,348
2. Annuity considerations.....	506	0	0	0	506
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	51,344	0	0	510	51,854
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	454	0	0	0	454
6.2 Applied to pay renewal premiums.....	185	0	0	0	185
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	21,168	0	0	0	21,168
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	21,807	0	0	0	21,807
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	21,807	0	0	0	21,807
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	337,642	0	2,500	2,504	342,646
10. Matured endowments.....	14,760	0	0	96	14,856
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	152,268	0	0	0	152,268
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	0	0	0	0
15. Totals.....	504,670	0	2,500	2,600	509,770

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	14	38,894	0	0	0	0	4	2,500	18	41,394
17. Incurred during current year.....	177	323,793	0	0	1	2,500	4	2,600	182	328,893
Settled during current year:										
18.1 By payment in full.....	186	352,402	0	0	1	2,500	4	2,600	191	357,502
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	186	352,402	0	0	1	2,500	4	2,600	191	357,502
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	186	352,402	0	0	1	2,500	4	2,600	191	357,502
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	5	10,285	0	0	0	0	4	2,500	9	12,785
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	5,160	11,144,363	0	(a).....0	1	9,000	0	0	5,161	11,153,363
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(254)	(832,101)	0	0	0	(2,500)	0	0	(254)	(834,601)
23. In force December 31 of current year.....	4,906	10,312,262	0	(a).....0	1	6,500	0	0	4,907	10,318,762

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

ACCIDENT AND HEALTH INSURANCE

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

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

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF ARKANSAS DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	118,967	0	0	9,027	127,994
2. Annuity considerations.....	187	0	0	0	187
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	119,154	0	0	9,027	128,181
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	994	0	0	0	994
6.2 Applied to pay renewal premiums.....	111	0	0	0	111
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	2,735	0	0	0	2,735
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	3,840	0	0	0	3,840
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	3,840	0	0	0	3,840
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	193,933	0	0	23,430	217,363
10. Matured endowments.....	12,887	0	0	1,335	14,222
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	96,026	0	0	4,116	100,142
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	302,846	0	0	28,881	331,727

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	(1)	(35,272)	0	0	0	0	(2)	8,500	(3)	(26,772)
17. Incurred during current year.....	59	217,810	0	0	0	0	41	26,765	100	244,575
Settled during current year:										
18.1 By payment in full.....	58	206,820	0	0	0	0	40	24,765	98	231,585
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	58	206,820	0	0	0	0	40	24,765	98	231,585
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	58	206,820	0	0	0	0	40	24,765	98	231,585
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	(24,282)	0	0	0	0	(1)	10,500	(1)	(13,782)
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	2,240	11,974,827	0	(a).....0	0	0	2,070	1,564,495	4,310	13,539,322
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(156)	(726,105)	0	0	0	0	(79)	(56,805)	(235)	(782,910)
23. In force December 31 of current year.....	2,084	11,248,722	0	(a).....0	0	0	1,991	1,507,690	4,075	12,756,412

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN AMERICAN SAMOA DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	0	0	0	0	0
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	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	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	0	0	0	0	0

DETAILS OF WRITE-INS

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF ARIZONA DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	28,909	0	345	95	29,349
2. Annuity considerations.....	423	0	0	0	423
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	29,332	0	345	95	29,772
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	1,290	0	0	0	1,290
6.2 Applied to pay renewal premiums.....	353	0	0	0	353
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	421	0	0	0	421
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	2,064	0	0	0	2,064
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	2,064	0	0	0	2,064
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	120,340	0	0	0	120,340
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	5,355	0	0	0	5,355
12. Surrender values and withdrawals for life contracts.....	98,899	0	0	0	98,899
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	224,594	0	0	0	224,594

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	10	23,055	0	0	0	0	(1)	1,286	9	24,341
17. Incurred during current year.....	9	120,340	0	0	0	0	0	0	9	120,340
Settled during current year:										
18.1 By payment in full.....	9	120,340	0	0	0	0	0	0	9	120,340
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	9	120,340	0	0	0	0	0	0	9	120,340
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	9	120,340	0	0	0	0	0	0	9	120,340
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	10	23,055	0	0	0	0	(1)	1,286	9	24,341
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	238	3,051,138	0	(a).....0	0	0	4	2,500	242	3,053,638
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(14)	(126,127)	0	0	0	0	0	0	(14)	(126,127)
23. In force December 31 of current year.....	224	2,925,011	0	(a).....0	0	0	4	2,500	228	2,927,511

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	0	0
25.2 Guaranteed renewable (b).....	84	84	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	84	84	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	84	84	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.

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF CALIFORNIA DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	34,546	0	0	144	34,690
2. Annuity considerations.....	1,077	0	0	0	1,077
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	35,623	0	0	144	35,767
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	2,262	0	0	0	2,262
6.2 Applied to pay renewal premiums.....	791	0	0	0	791
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	477	0	0	0	477
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	3,530	0	0	0	3,530
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	3,530	0	0	0	3,530
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	86,685	0	0	6,802	93,487
10. Matured endowments.....	2,343	0	0	0	2,343
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	49,587	0	0	1,040	50,627
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	138,615	0	0	7,842	146,457

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	(10)	(18,186)	0	0	0	0	(11)	(9,889)	(21)	(28,075)
17. Incurred during current year.....	20	81,387	0	0	0	0	10	7,302	30	88,689
Settled during current year:										
18.1 By payment in full.....	23	89,028	0	0	0	0	9	6,802	32	95,830
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	23	89,028	0	0	0	0	9	6,802	32	95,830
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	23	89,028	0	0	0	0	9	6,802	32	95,830
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	(13)	(25,827)	0	0	0	0	(10)	(9,389)	(23)	(35,216)
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	370	4,643,627	0	(a).....0	0	0	87	90,399	457	4,734,026
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	55	82,354	0	0	0	0	(5)	(8,000)	50	74,354
23. In force December 31 of current year.....	425	4,725,981	0	(a).....0	0	0	82	82,399	507	4,808,380

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....	0	0	0	48,000	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	0	0
25.2 Guaranteed renewable (b).....	84	84	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	84	84	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	84	84	0	48,000	0

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



DIRECT BUSINESS IN THE STATE OF CANADA DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	0	0	0	0	0
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	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	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	0	0	0	0	0

DETAILS OF WRITE-INS

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF COLORADO DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	67,027	0	0	0	67,027
2. Annuity considerations.....	1,375	0	0	0	1,375
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	68,402	0	0	0	68,402
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	4,139	0	0	0	4,139
6.2 Applied to pay renewal premiums.....	1,094	0	0	0	1,094
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	560	0	0	0	560
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	5,793	0	0	0	5,793
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	5,793	0	0	0	5,793
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	52,364	0	0	0	52,364
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	32,161	0	0	346	32,507
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	84,525	0	0	346	84,871

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	31,998	0	0	0	0	0	0	1	31,998
17. Incurred during current year.....	4	20,366	0	0	0	0	0	0	4	20,366
Settled during current year:										
18.1 By payment in full.....	5	52,364	0	0	0	0	0	0	5	52,364
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	5	52,364	0	0	0	0	0	0	5	52,364
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	5	52,364	0	0	0	0	0	0	5	52,364
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.....	476	6,762,790	0	(a).....0	0	0	0	0	476	6,762,790
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(11)	(392,812)	0	0	0	0	0	0	(11)	(392,812)
23. In force December 31 of current year.....	465	6,369,978	0	(a).....0	0	0	0	0	465	6,369,978

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	0	0
25.2 Guaranteed renewable (b).....	149	149	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	149	149	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	149	149	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.

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF CONNECTICUT DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	3,420	0	0	0	3,420
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	3,420	0	0	0	3,420
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	371	0	0	0	371
6.2 Applied to pay renewal premiums.....	74	0	0	0	74
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	31	0	0	0	31
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	476	0	0	0	476
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	476	0	0	0	476
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	0	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	0	0	0	0	0

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	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.....	35	503,690	0	(a).....0	0	0	3	1,750	38	505,440
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year.....	35	503,690	0	(a).....0	0	0	3	1,750	38	505,440

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF DISTRICT OF COLUMBIA DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	3,968	0	0	141	4,109
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	3,968	0	0	141	4,109
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	24	0	0	0	24
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	24	0	0	0	24
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	24	0	0	0	24
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	86,000	0	0	0	86,000
10. Matured endowments.....	500	0	0	0	500
11. Annuity benefits.....	20,676	0	0	0	20,676
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	107,176	0	0	0	107,176

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	(1)	(1,248)	0	0	0	0	1	1,248	0	0
17. Incurred during current year.....	4	86,500	0	0	0	0	0	0	4	86,500
Settled during current year:										
18.1 By payment in full.....	4	86,500	0	0	0	0	0	0	4	86,500
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	4	86,500	0	0	0	0	0	0	4	86,500
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	4	86,500	0	0	0	0	0	0	4	86,500
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	(1)	(1,248)	0	0	0	0	1	1,248	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	17	141,044	0	(a).....0	(2)	(17,500)	0	0	15	123,544
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(1)	(1,142)	0	0	0	0	0	0	(1)	(1,142)
23. In force December 31 of current year.....	16	139,902	0	(a).....0	(2)	(17,500)	0	0	14	122,402

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF DELAWARE DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	2,071	.0	.0	14	2,085
2. Annuity considerations.....	.0	.0	.0	.0	.0
3. Deposit-type contract funds.....	.0	XXX	.0	XXX	.0
4. Other considerations.....	.0	.0	.0	.0	.0
5. Totals (Sum of Lines 1 to 4).....	2,071	.0	.0	14	2,085
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	.0	.0	.0	.0	.0
6.2 Applied to pay renewal premiums.....	.0	.0	.0	.0	.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	.0	.0	.0	.0	.0
6.4 Other.....	.0	.0	.0	.0	.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	.0	.0	.0	.0
7.2 Applied to provide paid-up annuities.....	.0	.0	.0	.0	.0
7.3 Other.....	.0	.0	.0	.0	.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	.0	.0	.0	.0
10. Matured endowments.....	.0	.0	.0	.0	.0
11. Annuity benefits.....	.0	.0	.0	.0	.0
12. Surrender values and withdrawals for life contracts.....	1,040	.0	.0	.0	1,040
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....	.0	.0	.0	.0	.0
15. Totals.....	1,040	.0	.0	.0	1,040

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	(1)	(10,000)	.0	.0	.0	.0	1	10,000	.0	.0
17. Incurred during current year.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
Settled during current year:										
18.1 By payment in full.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.2 By payment on compromised claims.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.3 Totals paid.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.4 Reduction by compromise.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.5 Amount rejected.....	.0	.0	.0	.0	.0	.0	.0	.0	.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)	(10,000)	.0	.0	.0	.0	1	10,000	.0	.0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	22	231,644	.0	(a).....0	.0	.0	.0	.0	22	231,644
21. Issued during year.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
22. Other changes to in force (Net).....	(1)	(3,260)	.0	.0	.0	.0	.0	.0	(1)	(3,260)
23. In force December 31 of current year.....	21	228,384	.0	(a).....0	.0	.0	.0	.0	21	228,384

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

ACCIDENT AND HEALTH INSURANCE

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

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

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	321,197	0	0	485	321,682
2. Annuity considerations.....	3,758	0	0	0	3,758
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	324,955	0	0	485	325,440
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	5,674	0	0	0	5,674
6.2 Applied to pay renewal premiums.....	1,753	0	0	0	1,753
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	9,582	0	0	0	9,582
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	17,009	0	0	0	17,009
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	17,009	0	0	0	17,009
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	588,633	0	0	0	588,633
10. Matured endowments.....	1,683	0	0	0	1,683
11. Annuity benefits.....	29,581	0	0	0	29,581
12. Surrender values and withdrawals for life contracts.....	235,218	0	0	1,527	236,745
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	855,115	0	0	1,527	856,642

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	0	(14,300)	0	0	0	0	2	20,000	2	5,700
17. Incurred during current year.....	39	621,065	0	0	0	0	0	0	39	621,065
Settled during current year:										
18.1 By payment in full.....	38	590,316	0	0	0	0	0	0	38	590,316
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	38	590,316	0	0	0	0	0	0	38	590,316
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	38	590,316	0	0	0	0	0	0	38	590,316
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	16,449	0	0	0	0	2	20,000	3	36,449
POLICY EXHIBIT										
20. In force December 31, prior year.....	1,123	37,411,424	0	(a).....0	12	84,000	16	7,393	1,151	37,502,817
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(52)	(2,301,487)	0	0	0	0	(1)	(32)	(53)	(2,301,519)
23. In force December 31 of current year.....	1,071	35,109,937	0	(a).....0	12	84,000	15	7,361	1,098	35,201,298

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	0	0
25.2 Guaranteed renewable (b).....	114	114	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	114	114	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	114	114	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.

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF GEORGIA DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	127,532	0	0	1,364	128,896
2. Annuity considerations.....	427	0	0	0	427
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	127,959	0	0	1,364	129,323
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	1,721	0	0	0	1,721
6.2 Applied to pay renewal premiums.....	266	0	0	0	266
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	360	0	0	0	360
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	2,347	0	0	0	2,347
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	2,347	0	0	0	2,347
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	87,366	0	0	3,135	90,501
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	79	0	0	0	79
12. Surrender values and withdrawals for life contracts.....	77,239	0	0	3,410	80,649
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	164,684	0	0	6,545	171,229

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	(3)	(29,396)	0	0	0	0	4	31,146	1	1,750
17. Incurred during current year.....	19	185,616	0	0	0	0	3	3,135	22	188,751
Settled during current year:										
18.1 By payment in full.....	19	87,366	0	0	0	0	3	3,135	22	90,501
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	19	87,366	0	0	0	0	3	3,135	22	90,501
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	19	87,366	0	0	0	0	3	3,135	22	90,501
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	(3)	68,854	0	0	0	0	4	31,146	1	100,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	727	13,783,350	0	(a).....0	1	5,000	4	2,825	732	13,791,175
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(37)	(1,031,624)	0	0	0	0	0	0	(37)	(1,031,624)
23. In force December 31 of current year.....	690	12,751,726	0	(a).....0	1	5,000	4	2,825	695	12,759,551

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	0	0
25.2 Guaranteed renewable (b).....	91	91	0	(1)	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	91	91	0	(1)	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	91	91	0	(1)	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.

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN GRAND TOTAL DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	8,917,530	0	143,790	260,894	9,322,214
2. Annuity considerations.....	251,790	0	0	0	251,790
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	9,169,320	0	143,790	260,894	9,574,004
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	298,099	0	0	0	298,099
6.2 Applied to pay renewal premiums.....	78,660	0	0	0	78,660
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	122,640	0	0	0	122,640
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	499,399	0	0	0	499,399
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	499,399	0	0	0	499,399
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	16,805,151	0	370,390	503,033	17,678,574
10. Matured endowments.....	216,583	0	0	65,312	281,895
11. Annuity benefits.....	471,285	0	0	0	471,285
12. Surrender values and withdrawals for life contracts.....	5,812,422	0	0	147,095	5,959,517
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	23,305,441	0	370,390	715,440	24,391,271

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	45	470,101	0	0	8	62,800	260	971,750	313	1,504,651
17. Incurred during current year.....	2,021	17,695,901	0	0	78	332,589	990	542,511	3,089	18,571,001
Settled during current year:										
18.1 By payment in full.....	2,027	17,021,734	0	0	81	370,390	1,031	568,345	3,139	17,960,469
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	2,027	17,021,734	0	0	81	370,390	1,031	568,345	3,139	17,960,469
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	2,027	17,021,734	0	0	81	370,390	1,031	568,345	3,139	17,960,469
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	39	1,144,268	0	0	5	24,999	219	945,916	263	2,115,183
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	80,707	1,330,943,814	0	(a).....0	984	11,556,900	69,288	52,461,885	150,979	1,394,962,599
21. Issued during year.....	8	108,500	0	0	4	93,200	0	0	12	201,700
22. Other changes to in force (Net).....	(4,115)	(70,933,574)	0	0	(119)	(1,938,050)	(3,207)	(2,670,052)	(7,441)	(75,541,676)
23. In force December 31 of current year.....	76,600	1,260,118,740	0	(a).....0	869	9,712,050	66,081	49,791,833	143,550	1,319,622,623

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....	0	0	0	108,000	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	0	0
25.2 Guaranteed renewable (b).....	18,030	18,077	0	80,420	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	18,030	18,077	0	80,420	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	18,030	18,077	0	188,420	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 GUAM DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	411	0	0	0	411
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	411	0	0	0	411
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	0	0	0	0	0
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page.....	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above).....	0	0	0	0	0

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF HAWAII DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	286	0	1,005	0	1,291
2. Annuity considerations.....	117	0	0	0	117
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	403	0	1,005	0	1,408
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	84	0	0	0	84
6.2 Applied to pay renewal premiums.....	64	0	0	0	64
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	148	0	0	0	148
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	148	0	0	0	148
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	0	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	0	0	0	0	0

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pol. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	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.....	12	146,024	0	(a).....0	0	0	0	0	12	146,024
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	0	(3,318)	0	0	0	0	0	0	0	(3,318)
23. In force December 31 of current year.....	12	142,706	0	(a).....0	0	0	0	0	12	142,706

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF IOWA DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	187,421	0	1,833	0	189,254
2. Annuity considerations.....	39,585	0	0	0	39,585
3. Deposit-type contract funds.....	0	XXX.....	0	XXX.....	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	227,006	0	1,833	0	228,839
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	12,078	0	0	0	12,078
6.2 Applied to pay renewal premiums.....	790	0	0	0	790
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	801	0	0	0	801
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	13,669	0	0	0	13,669
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	13,669	0	0	0	13,669
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	603,776	0	0	0	603,776
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	63,226	0	0	0	63,226
12. Surrender values and withdrawals for life contracts.....	219,920	0	0	0	219,920
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	886,922	0	0	0	886,922

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	0	1,299	0	0	0	0	1	2,580	1	3,879
17. Incurred during current year.....	22	599,897	0	0	0	0	0	0	22	599,897
Settled during current year:										
18.1 By payment in full.....	23	603,777	0	0	0	0	0	0	23	603,777
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	23	603,777	0	0	0	0	0	0	23	603,777
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	23	603,777	0	0	0	0	0	0	23	603,777
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	(1)	(2,581)	0	0	0	0	1	2,580	0	(1)
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	827	33,394,472	0	(a).....0	0	0	0	0	827	33,394,472
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(45)	(2,666,527)	0	0	0	0	0	0	(45)	(2,666,527)
23. In force December 31 of current year.....	782	30,727,945	0	(a).....0	0	0	0	0	782	30,727,945

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

ACCIDENT AND HEALTH INSURANCE

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

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

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF IDAHO DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	3,968	0	360	0	4,328
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	3,968	0	360	0	4,328
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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	0	0	0	0
10. Matured endowments.....	4,280	0	0	0	4,280
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	2,457	0	0	0	2,457
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	6,737	0	0	0	6,737

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	(1)	(293)	0	0	0	0	1	293	0	0
17. Incurred during current year.....	1	4,280	0	0	0	0	0	0	1	4,280
Settled during current year:										
18.1 By payment in full.....	1	4,280	0	0	0	0	0	0	1	4,280
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	1	4,280	0	0	0	0	0	0	1	4,280
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	1	4,280	0	0	0	0	0	0	1	4,280
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	(1)	(293)	0	0	0	0	1	293	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	25	397,360	0	(a).....0	0	0	1	500	26	397,860
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(1)	(709)	0	0	0	0	0	0	(1)	(709)
23. In force December 31 of current year.....	24	396,651	0	(a).....0	0	0	1	500	25	397,151

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

ACCIDENT AND HEALTH INSURANCE

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

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

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	1,256,200	.0	.0	4,330	1,260,530
2. Annuity considerations.....	61,609	.0	.0	.0	61,609
3. Deposit-type contract funds.....	.0	XXX	.0	XXX	.0
4. Other considerations.....	.0	.0	.0	.0	.0
5. Totals (Sum of Lines 1 to 4).....	1,317,809	.0	.0	4,330	1,322,139
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	84,324	.0	.0	.0	84,324
6.2 Applied to pay renewal premiums.....	40,528	.0	.0	.0	40,528
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	35,485	.0	.0	.0	35,485
6.4 Other.....	.0	.0	.0	.0	.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	160,337	.0	.0	.0	160,337
Annuities:					
7.1 Paid in cash or left on deposit.....	.0	.0	.0	.0	.0
7.2 Applied to provide paid-up annuities.....	.0	.0	.0	.0	.0
7.3 Other.....	.0	.0	.0	.0	.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).....	160,337	.0	.0	0	160,337
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	2,337,469	.0	10,000	6,000	2,353,469
10. Matured endowments.....	11,207	.0	.0	.0	11,207
11. Annuity benefits.....	75,478	.0	.0	.0	75,478
12. Surrender values and withdrawals for life contracts.....	652,992	.0	.0	4,834	657,826
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....	.0	.0	.0	.0	.0
15. Totals.....	3,077,146	.0	10,000	10,834	3,097,980

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	(2)	249,557	.0	.0	.0	.0	16	51,634	14	301,191
17. Incurred during current year.....	121	2,509,110	.0	.0	.2	10,000	8	6,500	131	2,525,610
Settled during current year:										
18.1 By payment in full.....	120	2,348,676	.0	.0	.2	10,000	7	6,000	129	2,364,676
18.2 By payment on compromised claims.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.3 Totals paid.....	120	2,348,676	.0	.0	.2	10,000	7	6,000	129	2,364,676
18.4 Reduction by compromise.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.5 Amount rejected.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.6 Total settlements.....	120	2,348,676	.0	.0	.2	10,000	7	6,000	129	2,364,676
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	(1)	409,991	.0	.0	.0	.0	17	52,134	16	462,125
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	8,044	275,330,070	.0	(a).....0	12	103,100	1,131	932,732	9,187	276,365,902
21. Issued during year.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
22. Other changes to in force (Net).....	(316)	(12,557,450)	.0	.0	(2)	(10,000)	(58)	(49,030)	(376)	(12,616,480)
23. In force December 31 of current year.....	7,728	262,772,620	.0	(a).....0	10	93,100	1,073	883,702	8,811	263,749,422

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....	.0	.0	.0	60,000	.0
24.1 Federal Employee Health Benefits Plan premium (b).....	.0	.0	.0	.0	.0
24.2 Credit (group and individual).....	.0	.0	.0	.0	.0
24.3 Collectively renewable policies (b).....	.0	.0	.0	.0	.0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	.0	.0	.0	.0	.0
Other Individual Policies:					
25.1 Non-cancelable (b).....	.0	.0	.0	.0	.0
25.2 Guaranteed renewable (b).....	.86	.86	.0	(18)	.0
25.3 Non-renewable for stated reasons only (b).....	.0	.0	.0	.0	.0
25.4 Other accident only.....	.0	.0	.0	.0	.0
25.5 All other (b).....	.0	.0	.0	.0	.0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	.86	.86	.0	(18)	.0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	.86	.86	.0	59,982	.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.

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF INDIANA DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	251,837	0	0	120	251,957
2. Annuity considerations.....	19,951	0	0	0	19,951
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	271,788	0	0	120	271,908
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	15,161	0	0	0	15,161
6.2 Applied to pay renewal premiums.....	1,081	0	0	0	1,081
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	2,130	0	0	0	2,130
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	18,372	0	0	0	18,372
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	18,372	0	0	0	18,372
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	276,257	0	5,000	440	281,697
10. Matured endowments.....	5,502	0	0	0	5,502
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	254,002	0	0	430	254,432
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	535,761	0	5,000	870	541,631

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	(1)	28,489	0	0	0	0	3	23,956	2	52,445
17. Incurred during current year.....	42	241,314	0	0	1	5,000	2	440	45	246,754
Settled during current year:										
18.1 By payment in full.....	41	281,759	0	0	1	5,000	2	440	44	287,199
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	41	281,759	0	0	1	5,000	2	440	44	287,199
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	41	281,759	0	0	1	5,000	2	440	44	287,199
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	(11,956)	0	0	0	0	3	23,956	3	12,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,859	28,984,538	0	(a).....0	3	20,000	7	6,500	1,869	29,011,038
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(91)	(980,657)	0	0	0	0	0	0	(91)	(980,657)
23. In force December 31 of current year.....	1,768	28,003,881	0	(a).....0	3	20,000	7	6,500	1,778	28,030,381

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	0	0
25.2 Guaranteed renewable (b).....	6,381	6,381	0	(5)	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	6,381	6,381	0	(5)	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	6,381	6,381	0	(5)	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.

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF KANSAS DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	484,100	0	495	1,426	486,021
2. Annuity considerations.....	4,560	0	0	0	4,560
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	488,660	0	495	1,426	490,581
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	6,352	0	0	0	6,352
6.2 Applied to pay renewal premiums.....	324	0	0	0	324
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	3,656	0	0	0	3,656
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	10,332	0	0	0	10,332
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	10,332	0	0	0	10,332
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	1,063,279	0	0	8,109	1,071,388
10. Matured endowments.....	10,890	0	0	350	11,240
11. Annuity benefits.....	7,093	0	0	0	7,093
12. Surrender values and withdrawals for life contracts.....	323,113	0	0	698	323,811
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	1,404,375	0	0	9,157	1,413,532

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	(3)	(22,092)	0	0	0	0	10	82,826	7	60,734
17. Incurred during current year.....	70	1,133,856	0	0	0	0	10	8,959	80	1,142,815
Settled during current year:										
18.1 By payment in full.....	66	1,074,168	0	0	0	0	9	8,459	75	1,082,627
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	66	1,074,168	0	0	0	0	9	8,459	75	1,082,627
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	66	1,074,168	0	0	0	0	9	8,459	75	1,082,627
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	37,596	0	0	0	0	11	83,326	12	120,922
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	2,594	45,989,764	0	(a).....0	1	7,500	8	8,500	2,603	46,005,764
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(155)	(3,660,889)	0	0	(1)	(7,500)	0	0	(156)	(3,668,389)
23. In force December 31 of current year.....	2,439	42,328,875	0	(a).....0	0	0	8	8,500	2,447	42,337,375

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	0	0
25.2 Guaranteed renewable (b).....	2,623	2,623	0	61,459	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	2,623	2,623	0	61,459	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	2,623	2,623	0	61,459	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.

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF KENTUCKY DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	50,979	0	155	218	51,352
2. Annuity considerations.....	1,136	0	0	0	1,136
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	52,115	0	155	218	52,488
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	377	0	0	0	377
6.2 Applied to pay renewal premiums.....	844	0	0	0	844
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	1,777	0	0	0	1,777
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	2,998	0	0	0	2,998
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	2,998	0	0	0	2,998
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	135,270	0	55,000	2,473	192,743
10. Matured endowments.....	3,000	0	0	0	3,000
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	48,293	0	0	1,251	49,544
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	186,563	0	55,000	3,724	245,287

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	4,001	0	0	3	30,300	0	0	4	34,301
17. Incurred during current year.....	32	137,270	0	0	8	27,200	3	2,473	43	166,943
Settled during current year:										
18.1 By payment in full.....	32	138,270	0	0	10	55,000	3	2,473	45	195,743
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	32	138,270	0	0	10	55,000	3	2,473	45	195,743
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	32	138,270	0	0	10	55,000	3	2,473	45	195,743
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	3,001	0	0	1	2,500	0	0	2	5,501
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	370	5,610,318	0	(a).....0	91	1,268,800	13	10,980	474	6,890,098
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(33)	(181,668)	0	0	(7)	(119,900)	(2)	(4,400)	(42)	(305,968)
23. In force December 31 of current year.....	337	5,428,650	0	(a).....0	84	1,148,900	11	6,580	432	6,584,130

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	0	0
25.2 Guaranteed renewable (b).....	480	480	0	1,190	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	480	480	0	1,190	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	480	480	0	1,190	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.

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF LOUISIANA DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	262,557	0	120	47,350	310,027
2. Annuity considerations.....	1,680	0	0	0	1,680
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	264,237	0	120	47,350	311,707
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	371	0	0	0	371
6.2 Applied to pay renewal premiums.....	225	0	0	0	225
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	1,810	0	0	0	1,810
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	2,406	0	0	0	2,406
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	2,406	0	0	0	2,406
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	243,940	0	0	83,789	327,729
10. Matured endowments.....	7,707	0	0	19,126	26,833
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	89,954	0	0	20,022	109,976
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	341,601	0	0	122,937	464,538

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	11	32,316	0	0	0	0	27	44,076	38	76,392
17. Incurred during current year.....	55	226,251	0	0	0	0	150	92,839	205	319,090
Settled during current year:										
18.1 By payment in full.....	55	251,647	0	0	0	0	167	102,915	222	354,562
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	55	251,647	0	0	0	0	167	102,915	222	354,562
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	55	251,647	0	0	0	0	167	102,915	222	354,562
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	11	6,920	0	0	0	0	10	34,000	21	40,920
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,011	28,492,586	0	(a).....0	0	0	12,757	11,233,645	15,768	39,726,231
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(180)	(1,741,345)	0	0	0	0	(564)	(531,865)	(744)	(2,273,210)
23. In force December 31 of current year.....	2,831	26,751,241	0	(a).....0	0	0	12,193	10,701,780	15,024	37,453,021

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

ACCIDENT AND HEALTH INSURANCE

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

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

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF MASSACHUSETTS DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	4,681	.0	.0	.48	4,729
2. Annuity considerations.....	160	.0	.0	.0	160
3. Deposit-type contract funds.....	.0	XXX	.0	XXX	.0
4. Other considerations.....	.0	.0	.0	.0	.0
5. Totals (Sum of Lines 1 to 4).....	4,841	.0	.0	.48	4,889
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	435	.0	.0	.0	435
6.2 Applied to pay renewal premiums.....	70	.0	.0	.0	70
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	24	.0	.0	.0	24
6.4 Other.....	.0	.0	.0	.0	.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	529	.0	.0	.0	529
Annuities:					
7.1 Paid in cash or left on deposit.....	.0	.0	.0	.0	.0
7.2 Applied to provide paid-up annuities.....	.0	.0	.0	.0	.0
7.3 Other.....	.0	.0	.0	.0	.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).....	529	.0	.0	.0	529
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	10,054	.0	.0	.0	10,054
10. Matured endowments.....	.0	.0	.0	.0	.0
11. Annuity benefits.....	.0	.0	.0	.0	.0
12. Surrender values and withdrawals for life contracts.....	8,330	.0	.0	.0	8,330
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....	.0	.0	.0	.0	.0
15. Totals.....	18,384	.0	.0	.0	18,384

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17. Incurred during current year.....	1	10,054	.0	.0	.0	.0	.0	.0	1	10,054
Settled during current year:										
18.1 By payment in full.....	1	10,054	.0	.0	.0	.0	.0	.0	1	10,054
18.2 By payment on compromised claims.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.3 Totals paid.....	1	10,054	.0	.0	.0	.0	.0	.0	1	10,054
18.4 Reduction by compromise.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.5 Amount rejected.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.6 Total settlements.....	1	10,054	.0	.0	.0	.0	.0	.0	1	10,054
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	49	2,867,605	.0	(a).....0	.0	.0	.0	.0	49	2,867,605
21. Issued during year.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
22. Other changes to in force (Net).....	.0	(2,244)	.0	.0	.0	.0	.0	.0	.0	(2,244)
23. In force December 31 of current year.....	49	2,865,361	.0	(a).....0	.0	.0	.0	.0	49	2,865,361

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF MARYLAND DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	8,377	0	0	96	8,473
2. Annuity considerations.....	1,410	0	0	0	1,410
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	9,787	0	0	96	9,883
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	650	0	0	0	650
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	650	0	0	0	650
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	650	0	0	0	650
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	17,196	0	0	0	17,196
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	12,104	0	0	1,510	13,614
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	29,300	0	0	1,510	30,810

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	9	17,196	0	0	0	0	0	0	9	17,196
Settled during current year:										
18.1 By payment in full.....	9	17,196	0	0	0	0	0	0	9	17,196
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	9	17,196	0	0	0	0	0	0	9	17,196
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	9	17,196	0	0	0	0	0	0	9	17,196
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.....	111	1,284,726	0	(a).....0	0	0	8	3,740	119	1,288,466
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(7)	(143,686)	0	0	0	0	0	0	(7)	(143,686)
23. In force December 31 of current year.....	104	1,141,040	0	(a).....0	0	0	8	3,740	112	1,144,780

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF MAINE DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	100	.0	12,806	.0	12,906
2. Annuity considerations.....	.0	.0	.0	.0	.0
3. Deposit-type contract funds.....	.0	XXX	.0	XXX	.0
4. Other considerations.....	.0	.0	.0	.0	.0
5. Totals (Sum of Lines 1 to 4).....	100	.0	12,806	.0	12,906
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	176	.0	.0	.0	176
6.2 Applied to pay renewal premiums.....	.0	.0	.0	.0	.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	.0	.0	.0	.0	.0
6.4 Other.....	.0	.0	.0	.0	.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	176	.0	.0	.0	176
Annuities:					
7.1 Paid in cash or left on deposit.....	.0	.0	.0	.0	.0
7.2 Applied to provide paid-up annuities.....	.0	.0	.0	.0	.0
7.3 Other.....	.0	.0	.0	.0	.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).....	176	.0	.0	.0	176
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	.0	.0	.0	.0	.0
10. Matured endowments.....	.0	.0	.0	.0	.0
11. Annuity benefits.....	.0	.0	.0	.0	.0
12. Surrender values and withdrawals for life contracts.....	.0	.0	.0	.0	.0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....	.0	.0	.0	.0	.0
15. Totals.....	.0	.0	.0	.0	.0

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17. Incurred during current year.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
Settled during current year:										
18.1 By payment in full.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.2 By payment on compromised claims.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.3 Totals paid.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.4 Reduction by compromise.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.5 Amount rejected.....	.0	.0	.0	.0	.0	.0	.0	.0	.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.....	5	190,018	.0	(a).....0	.0	.0	.0	.0	5	190,018
21. Issued during year.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
22. Other changes to in force (Net).....	.0	5,846	.0	.0	.0	.0	.0	.0	.0	5,846
23. In force December 31 of current year.....	5	195,864	.0	(a).....0	.0	.0	.0	.0	5	195,864

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	176,101	0	0	1,350	177,451
2. Annuity considerations.....	2,145	0	0	0	2,145
3. Deposit-type contract funds.....	0	XXX.....	0	XXX.....	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	178,246	0	0	1,350	179,596
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	2,904	0	0	0	2,904
6.2 Applied to pay renewal premiums.....	1,284	0	0	0	1,284
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	340	0	0	0	340
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	4,528	0	0	0	4,528
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	4,528	0	0	0	4,528
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	306,095	0	0	2,600	308,695
10. Matured endowments.....	1,000	0	0	0	1,000
11. Annuity benefits.....	15,247	0	0	0	15,247
12. Surrender values and withdrawals for life contracts.....	147,908	0	0	1,461	149,369
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	470,250	0	0	4,061	474,311

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	(1)	(3,001)	0	0	0	0	2	6,000	1	2,999
17. Incurred during current year.....	30	317,645	0	0	0	0	5	2,600	35	320,245
Settled during current year:										
18.1 By payment in full.....	27	307,095	0	0	0	0	5	2,600	32	309,695
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	27	307,095	0	0	0	0	5	2,600	32	309,695
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	27	307,095	0	0	0	0	5	2,600	32	309,695
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	7,549	0	0	0	0	2	6,000	4	13,549
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	913	19,528,695	0	(a).....0	0	0	9	5,153	922	19,533,848
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(63)	(1,379,661)	0	0	0	0	(1)	(575)	(64)	(1,380,236)
23. In force December 31 of current year.....	850	18,149,034	0	(a).....0	0	0	8	4,578	858	18,153,612

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	0	0
25.2 Guaranteed renewable (b).....	168	168	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	168	168	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	168	168	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.

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF MINNESOTA DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	12,233	.0	.0	.45	12,278
2. Annuity considerations.....	260	.0	.0	.0	260
3. Deposit-type contract funds.....	.0	XXX	.0	XXX	.0
4. Other considerations.....	.0	.0	.0	.0	.0
5. Totals (Sum of Lines 1 to 4).....	12,493	.0	.0	.45	12,538
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	767	.0	.0	.0	767
6.2 Applied to pay renewal premiums.....	99	.0	.0	.0	99
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	16	.0	.0	.0	16
6.4 Other.....	.0	.0	.0	.0	.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	882	.0	.0	.0	882
Annuities:					
7.1 Paid in cash or left on deposit.....	.0	.0	.0	.0	.0
7.2 Applied to provide paid-up annuities.....	.0	.0	.0	.0	.0
7.3 Other.....	.0	.0	.0	.0	.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).....	882	.0	.0	.0	882
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	.0	.0	.0	.0	.0
10. Matured endowments.....	.0	.0	.0	.0	.0
11. Annuity benefits.....	.0	.0	.0	.0	.0
12. Surrender values and withdrawals for life contracts.....	6,311	.0	.0	.619	6,930
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....	.0	.0	.0	.0	.0
15. Totals.....	6,311	.0	.0	.619	6,930

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17. Incurred during current year.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
Settled during current year:										
18.1 By payment in full.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.2 By payment on compromised claims.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.3 Totals paid.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.4 Reduction by compromise.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.5 Amount rejected.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.6 Total settlements.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	.81	1,118,006	.0	(a).....0	.0	.0	.0	.0	.81	1,118,006
21. Issued during year.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
22. Other changes to in force (Net).....	(.3)	(18,762)	.0	.0	.0	.0	.0	.0	(.3)	(18,762)
23. In force December 31 of current year.....	.78	1,099,244	.0	(a).....0	.0	.0	.0	.0	.78	1,099,244

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF MISSOURI DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	273,728	0	0	5,874	279,602
2. Annuity considerations.....	14,714	0	0	0	14,714
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	288,442	0	0	5,874	294,316
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	7,609	0	0	0	7,609
6.2 Applied to pay renewal premiums.....	2,582	0	0	0	2,582
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	784	0	0	0	784
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	10,975	0	0	0	10,975
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	10,975	0	0	0	10,975
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	583,937	0	0	11,138	595,075
10. Matured endowments.....	7,289	0	0	2,962	10,251
11. Annuity benefits.....	33,750	0	0	0	33,750
12. Surrender values and withdrawals for life contracts.....	242,571	0	0	2,364	244,935
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	867,547	0	0	16,464	884,011

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	(8)	(84,109)	0	0	0	0	20	124,452	12	40,343
17. Incurred during current year.....	77	725,972	0	0	0	0	18	14,100	95	740,072
Settled during current year:										
18.1 By payment in full.....	77	591,226	0	0	0	0	18	14,100	95	605,326
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	77	591,226	0	0	0	0	18	14,100	95	605,326
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	77	591,226	0	0	0	0	18	14,100	95	605,326
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	(8)	50,637	0	0	0	0	20	124,452	12	175,089
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	2,854	42,573,518	0	(a).....0	0	0	1,678	1,396,118	4,532	43,969,636
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(162)	(1,993,719)	0	0	0	0	(67)	(64,613)	(229)	(2,058,332)
23. In force December 31 of current year.....	2,692	40,579,799	0	(a).....0	0	0	1,611	1,331,505	4,303	41,911,304

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	0	0
25.2 Guaranteed renewable (b).....	130	130	0	8,496	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	130	130	0	8,496	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	130	130	0	8,496	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 NORTHERN MARIANA ISLANDS DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	0	0	0	0	0
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	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	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	0	0	0	0	0

DETAILS OF WRITE-INS

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF MISSISSIPPI DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	190,470	0	180	46,501	237,151
2. Annuity considerations.....	1,164	0	0	0	1,164
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	191,634	0	180	46,501	238,315
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	34	0	0	0	34
6.2 Applied to pay renewal premiums.....	852	0	0	0	852
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	3,816	0	0	0	3,816
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	4,702	0	0	0	4,702
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	4,702	0	0	0	4,702
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	234,482	0	0	56,661	291,143
10. Matured endowments.....	1,668	0	0	17,968	19,636
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	128,335	0	0	13,218	141,553
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	364,485	0	0	87,847	452,332

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	10	77,001	0	0	0	0	10	8,804	20	85,805
17. Incurred during current year.....	39	167,508	0	0	0	0	310	77,726	349	245,234
Settled during current year:										
18.1 By payment in full.....	44	236,149	0	0	0	0	309	74,630	353	310,779
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	44	236,149	0	0	0	0	309	74,630	353	310,779
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	44	236,149	0	0	0	0	309	74,630	353	310,779
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	5	8,360	0	0	0	0	11	11,900	16	20,260
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	2,389	27,342,196	0	(a).....0	0	0	21,034	9,680,910	23,423	37,023,106
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(132)	(2,114,815)	0	0	0	0	(941)	(602,403)	(1,073)	(2,717,218)
23. In force December 31 of current year.....	2,257	25,227,381	0	(a).....0	0	0	20,093	9,078,507	22,350	34,305,888

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF MONTANA DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	32,624	0	0	0	32,624
2. Annuity considerations.....	660	0	0	0	660
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	33,284	0	0	0	33,284
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	31	0	0	0	31
6.2 Applied to pay renewal premiums.....	69	0	0	0	69
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	100	0	0	0	100
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	100	0	0	0	100
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	3,780	0	0	0	3,780
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	3,780	0	0	0	3,780

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	0	(1)	0	0	0	0	0	0	0	(1)
17. Incurred during current year.....	1	3,780	0	0	0	0	0	0	1	3,780
Settled during current year:										
18.1 By payment in full.....	1	3,780	0	0	0	0	0	0	1	3,780
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	1	3,780	0	0	0	0	0	0	1	3,780
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	1	3,780	0	0	0	0	0	0	1	3,780
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	(1)	0	0	0	0	0	0	0	(1)
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	111	2,254,993	0	(a).....0	0	0	0	0	111	2,254,993
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(1)	7,818	0	0	0	0	0	0	(1)	7,818
23. In force December 31 of current year.....	110	2,262,811	0	(a).....0	0	0	0	0	110	2,262,811

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	149,249	0	0	176	149,425
2. Annuity considerations.....	2,913	0	0	0	2,913
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	152,162	0	0	176	152,338
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	1,445	0	0	0	1,445
6.2 Applied to pay renewal premiums.....	338	0	0	0	338
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	146	0	0	0	146
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,929	0	0	0	1,929
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	1,929	0	0	0	1,929
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	153,088	0	0	1,000	154,088
10. Matured endowments.....	872	0	0	0	872
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	166,985	0	0	0	166,985
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	0	0	0	0
15. Totals.....	320,945	0	0	1,000	321,945

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	19,034	0	0	0	0	1	8,572	2	27,606
17. Incurred during current year.....	24	166,624	0	0	0	0	1	1,000	25	167,624
Settled during current year:										
18.1 By payment in full.....	24	153,960	0	0	0	0	1	1,000	25	154,960
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	24	153,960	0	0	0	0	1	1,000	25	154,960
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	24	153,960	0	0	0	0	1	1,000	25	154,960
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	31,698	0	0	0	0	1	8,572	2	40,270
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	724	17,447,643	0	(a).....0	11	75,500	14	7,363	749	17,530,506
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(45)	(1,073,912)	0	0	0	0	0	0	(45)	(1,073,912)
23. In force December 31 of current year.....	679	16,373,731	0	(a).....0	11	75,500	14	7,363	704	16,456,594

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	0	0
25.2 Guaranteed renewable (b).....	99	99	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	99	99	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	99	99	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.

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF NORTH DAKOTA DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	2,350	.0	.0	.96	2,446
2. Annuity considerations.....	.0	.0	.0	.0	.0
3. Deposit-type contract funds.....	.0	XXX	.0	XXX	.0
4. Other considerations.....	.0	.0	.0	.0	.0
5. Totals (Sum of Lines 1 to 4).....	2,350	.0	.0	.96	2,446
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	.0	.0	.0	.0	.0
6.2 Applied to pay renewal premiums.....	.0	.0	.0	.0	.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	.0	.0	.0	.0	.0
6.4 Other.....	.0	.0	.0	.0	.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	.0	.0	.0	.0
7.2 Applied to provide paid-up annuities.....	.0	.0	.0	.0	.0
7.3 Other.....	.0	.0	.0	.0	.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	.0	.0	.0	.0
10. Matured endowments.....	.0	.0	.0	.0	.0
11. Annuity benefits.....	.0	.0	.0	.0	.0
12. Surrender values and withdrawals for life contracts.....	.0	.0	.0	.0	.0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....	.0	.0	.0	.0	.0
15. Totals.....	.0	.0	.0	.0	.0

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17. Incurred during current year.....	1	10,000	.0	.0	.0	.0	.0	.0	1	10,000
Settled during current year:										
18.1 By payment in full.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.2 By payment on compromised claims.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.3 Totals paid.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.4 Reduction by compromise.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.5 Amount rejected.....	.0	.0	.0	.0	.0	.0	.0	.0	.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	10,000	.0	.0	.0	.0	.0	.0	1	10,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	10	439,207	.0	(a).....0	.0	.0	.0	.0	10	439,207
21. Issued during year.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
22. Other changes to in force (Net).....	(3)	(210,000)	.0	.0	.0	.0	.0	.0	(3)	(210,000)
23. In force December 31 of current year.....	7	229,207	.0	(a).....0	.0	.0	.0	.0	7	229,207

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

ACCIDENT AND HEALTH INSURANCE

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

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

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF NEBRASKA DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	88,769	0	101	94	88,964
2. Annuity considerations.....	2,652	0	0	0	2,652
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	91,421	0	101	94	91,616
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	140	0	0	0	140
6.2 Applied to pay renewal premiums.....	183	0	0	0	183
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	20	0	0	0	20
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	343	0	0	0	343
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	343	0	0	0	343
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	7,200	0	0	0	7,200
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	8,806	0	0	0	8,806
12. Surrender values and withdrawals for life contracts.....	37,777	0	0	0	37,777
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	53,783	0	0	0	53,783

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	1	7,200	0	0	0	0	0	0	1	7,200
Settled during current year:										
18.1 By payment in full.....	1	7,200	0	0	0	0	0	0	1	7,200
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	1	7,200	0	0	0	0	0	0	1	7,200
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	1	7,200	0	0	0	0	0	0	1	7,200
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.....	202	9,342,679	0	(a).....0	0	0	2	2,000	204	9,344,679
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(7)	(209,624)	0	0	0	0	0	0	(7)	(209,624)
23. In force December 31 of current year.....	195	9,133,055	0	(a).....0	0	0	2	2,000	197	9,135,055

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF NEW HAMPSHIRE DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	227	0	0	0	227
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	227	0	0	0	227
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	61	0	0	0	61
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	125	0	0	0	125
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	186	0	0	0	186
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	186	0	0	0	186
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	10,016	0	0	0	10,016
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	959	0	0	0	959
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	10,975	0	0	0	10,975

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	2	10,016	0	0	0	0	0	0	2	10,016
Settled during current year:										
18.1 By payment in full.....	2	10,016	0	0	0	0	0	0	2	10,016
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	2	10,016	0	0	0	0	0	0	2	10,016
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	2	10,016	0	0	0	0	0	0	2	10,016
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	212,646	0	(a).....0	0	0	0	0	8	212,646
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(1)	(535)	0	0	0	0	0	0	(1)	(535)
23. In force December 31 of current year.....	7	212,111	0	(a).....0	0	0	0	0	7	212,111

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

ACCIDENT AND HEALTH INSURANCE

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

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

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF NEW JERSEY DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	6,627	0	0	77	6,704
2. Annuity considerations.....	962	0	0	0	962
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	7,589	0	0	77	7,666
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	397	0	0	0	397
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	154	0	0	0	154
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	551	0	0	0	551
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	551	0	0	0	551
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	15,000	0	0	0	15,000
10. Matured endowments.....	200	0	0	0	200
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	16,349	0	0	0	16,349
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	31,549	0	0	0	31,549

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	3	15,200	0	0	0	0	0	0	3	15,200
Settled during current year:										
18.1 By payment in full.....	3	15,200	0	0	0	0	0	0	3	15,200
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	3	15,200	0	0	0	0	0	0	3	15,200
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	3	15,200	0	0	0	0	0	0	3	15,200
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.....	80	1,179,191	0	(a).....0	0	0	0	0	80	1,179,191
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(9)	(90,780)	0	0	0	0	0	0	(9)	(90,780)
23. In force December 31 of current year.....	71	1,088,411	0	(a).....0	0	0	0	0	71	1,088,411

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

ACCIDENT AND HEALTH INSURANCE

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

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

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF NEW MEXICO DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	30,575	0	0	0	30,575
2. Annuity considerations.....	1,475	0	0	0	1,475
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	32,050	0	0	0	32,050
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	268	0	0	0	268
6.2 Applied to pay renewal premiums.....	60	0	0	0	60
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	56	0	0	0	56
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	384	0	0	0	384
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	384	0	0	0	384
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	40,086	0	0	0	40,086
10. Matured endowments.....	1,000	0	0	0	1,000
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	42,231	0	0	0	42,231
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	83,317	0	0	0	83,317

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	0	1	0	0	0	0	0	0	0	1
17. Incurred during current year.....	5	41,086	0	0	0	0	0	0	5	41,086
Settled during current year:										
18.1 By payment in full.....	5	41,086	0	0	0	0	0	0	5	41,086
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	5	41,086	0	0	0	0	0	0	5	41,086
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	5	41,086	0	0	0	0	0	0	5	41,086
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	1	0	0	0	0	0	0	0	1
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	169	2,912,561	0	(a).....0	0	0	1	500	170	2,913,061
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(11)	(382,591)	0	0	0	0	0	0	(11)	(382,591)
23. In force December 31 of current year.....	158	2,529,970	0	(a).....0	0	0	1	500	159	2,530,470

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF NEVADA DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	6,006	0	0	28	6,034
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	6,006	0	0	28	6,034
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	451	0	0	0	451
6.2 Applied to pay renewal premiums.....	111	0	0	0	111
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	49	0	0	0	49
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	611	0	0	0	611
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	611	0	0	0	611
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	15,027	0	0	504	15,531
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	15,027	0	0	504	15,531

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	0	1	0	0	0	0	0	0	0	1
17. Incurred during current year.....	2	15,027	0	0	0	0	1	504	3	15,531
Settled during current year:										
18.1 By payment in full.....	2	15,027	0	0	0	0	1	504	3	15,531
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	2	15,027	0	0	0	0	1	504	3	15,531
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	2	15,027	0	0	0	0	1	504	3	15,531
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	1	0	0	0	0	0	0	0	1
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	42	1,115,297	0	(a).....0	0	0	0	0	42	1,115,297
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(1)	(8,655)	0	0	0	0	0	0	(1)	(8,655)
23. In force December 31 of current year.....	41	1,106,642	0	(a).....0	0	0	0	0	41	1,106,642

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

ACCIDENT AND HEALTH INSURANCE

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

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

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF NEW YORK DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	10,059	0	0	40	10,099
2. Annuity considerations.....	486	0	0	0	486
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	10,545	0	0	40	10,585
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	696	0	0	0	696
6.2 Applied to pay renewal premiums.....	302	0	0	0	302
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	31	0	0	0	31
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,029	0	0	0	1,029
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	1,029	0	0	0	1,029
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	7,781	0	0	303	8,084
10. Matured endowments.....	0	0	0	500	500
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	26,955	0	0	0	26,955
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	34,736	0	0	803	35,539

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	4,250	0	0	0	0	0	0	1	4,250
17. Incurred during current year.....	2	3,531	0	0	0	0	2	803	4	4,334
Settled during current year:										
18.1 By payment in full.....	3	7,781	0	0	0	0	2	803	5	8,584
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	3	7,781	0	0	0	0	2	803	5	8,584
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	3	7,781	0	0	0	0	2	803	5	8,584
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.....	135	1,864,020	0	(a).....0	0	0	1	500	136	1,864,520
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(6)	(638,931)	0	0	0	0	0	0	(6)	(638,931)
23. In force December 31 of current year.....	129	1,225,089	0	(a).....0	0	0	1	500	130	1,225,589

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

ACCIDENT AND HEALTH INSURANCE

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

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

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF OHIO DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	2,386,361	0	2,475	87	2,388,923
2. Annuity considerations.....	18,997	0	0	0	18,997
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	2,405,358	0	2,475	87	2,407,920
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	118,397	0	0	0	118,397
6.2 Applied to pay renewal premiums.....	13,735	0	0	0	13,735
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	27,433	0	0	0	27,433
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	159,565	0	0	0	159,565
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	159,565	0	0	0	159,565
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	5,339,823	0	36,064	1,766	5,377,653
10. Matured endowments.....	3,000	0	0	270	3,270
11. Annuity benefits.....	46,113	0	0	0	46,113
12. Surrender values and withdrawals for life contracts.....	1,244,788	0	0	2,629	1,247,417
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	6,633,724	0	36,064	4,665	6,674,453

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	0	142,538	0	0	0	0	19	121,862	19	264,400
17. Incurred during current year.....	172	5,504,533	0	0	9	36,064	3	2,036	184	5,542,633
Settled during current year:										
18.1 By payment in full.....	173	5,342,823	0	0	9	36,064	3	2,036	185	5,380,923
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	173	5,342,823	0	0	9	36,064	3	2,036	185	5,380,923
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	173	5,342,823	0	0	9	36,064	3	2,036	185	5,380,923
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	(1)	304,248	0	0	0	0	19	121,862	18	426,110
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	11,587	456,944,685	0	(a).....0	91	820,550	44	28,667	11,722	457,793,902
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(435)	(21,380,203)	0	0	(5)	(83,500)	(4)	(3,788)	(444)	(21,467,491)
23. In force December 31 of current year.....	11,152	435,564,482	0	(a).....0	86	737,050	40	24,879	11,278	436,326,411

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	0	0
25.2 Guaranteed renewable (b).....	208	208	0	(8)	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	208	208	0	(8)	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	208	208	0	(8)	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.

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF OKLAHOMA DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	235,904	0	0	2,878	238,782
2. Annuity considerations.....	4,679	0	0	0	4,679
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	240,583	0	0	2,878	243,461
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	4,132	0	0	0	4,132
6.2 Applied to pay renewal premiums.....	5,871	0	0	0	5,871
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	10,003	0	0	0	10,003
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	10,003	0	0	0	10,003
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	341,703	0	0	8,500	350,203
10. Matured endowments.....	23,140	0	0	1,379	24,519
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	152,778	0	0	3,667	156,445
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	517,621	0	0	13,546	531,167

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	(4)	(5,890)	0	0	0	0	13	44,950	9	39,060
17. Incurred during current year.....	70	437,095	0	0	0	0	19	11,879	89	448,974
Settled during current year:										
18.1 By payment in full.....	70	364,843	0	0	0	0	18	9,879	88	374,722
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	70	364,843	0	0	0	0	18	9,879	88	374,722
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	70	364,843	0	0	0	0	18	9,879	88	374,722
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	(4)	66,362	0	0	0	0	14	46,950	10	113,312
POLICY EXHIBIT										
20. In force December 31, prior year.....	2,365	17,972,266	0	(a).....0	0	0	1,015	832,828	3,380	18,805,094
21. Issued during year.....	1	50,000	0	0	0	0	0	0	1	50,000
22. Other changes to in force (Net).....	(139)	(1,488,959)	0	0	0	0	(50)	(46,048)	(189)	(1,535,007)
23. In force December 31 of current year.....	2,227	16,533,307	0	(a).....0	0	0	965	786,780	3,192	17,320,087

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	0	0
25.2 Guaranteed renewable (b).....	57	57	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	57	57	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	57	57	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.

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF OREGON DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	10,776	0	13,580	26	24,382
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	10,776	0	13,580	26	24,382
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	651	0	0	0	651
6.2 Applied to pay renewal premiums.....	113	0	0	0	113
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	72	0	0	0	72
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	836	0	0	0	836
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	836	0	0	0	836
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	63,462	0	0	0	63,462
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	881	0	0	0	881
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	64,343	0	0	0	64,343

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	8	73,462	0	0	0	0	0	0	8	73,462
Settled during current year:										
18.1 By payment in full.....	7	63,462	0	0	0	0	0	0	7	63,462
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	7	63,462	0	0	0	0	0	0	7	63,462
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	7	63,462	0	0	0	0	0	0	7	63,462
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.....	77	1,016,794	0	(a).....0	0	0	0	0	77	1,016,794
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(7)	(71,602)	0	0	0	0	0	0	(7)	(71,602)
23. In force December 31 of current year.....	70	945,192	0	(a).....0	0	0	0	0	70	945,192

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



DIRECT BUSINESS IN OTHER ALIEN GRAND TOTAL DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	0	0	0	0	0
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	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	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	0	0	0	0	0

NONE

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	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.....	0	0	0	(a).....0	0	0	0	0	0	0
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	0	0	0	0	0	0	0	0	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	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	0	0
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
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.

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	210,721	0	0	175	210,896
2. Annuity considerations.....	34,357	0	0	0	34,357
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	245,078	0	0	175	245,253
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	3,994	0	0	0	3,994
6.2 Applied to pay renewal premiums.....	786	0	0	0	786
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	697	0	0	0	697
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	5,477	0	0	0	5,477
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	5,477	0	0	0	5,477
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	184,023	0	0	3,500	187,523
10. Matured endowments.....	4,344	0	0	0	4,344
11. Annuity benefits.....	9,588	0	0	0	9,588
12. Surrender values and withdrawals for life contracts.....	177,898	0	0	0	177,898
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	0	0	0	0
15. Totals.....	375,853	0	0	3,500	379,353

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	0	1	0	0	0	0	0	0	0	1
17. Incurred during current year.....	19	284,840	0	0	0	0	4	3,500	23	288,340
Settled during current year:										
18.1 By payment in full.....	14	188,367	0	0	0	0	4	3,500	18	191,867
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	14	188,367	0	0	0	0	4	3,500	18	191,867
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	14	188,367	0	0	0	0	4	3,500	18	191,867
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	5	96,474	0	0	0	0	0	0	5	96,474
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,126	24,530,755	0	(a).....0	0	0	5	4,000	1,131	24,534,755
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(48)	(1,124,662)	0	0	0	0	0	0	(48)	(1,124,662)
23. In force December 31 of current year.....	1,078	23,406,093	0	(a).....0	0	0	5	4,000	1,083	23,410,093

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	0	0
25.2 Guaranteed renewable (b).....	8	8	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	8	8	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	8	8	0	0	0

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



DIRECT BUSINESS IN PUERTO RICO DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	642	0	0	0	642
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	642	0	0	0	642
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	0	0	0	0	0

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF RHODE ISLAND DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	485	0	0	0	485
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	485	0	0	0	485
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	125	0	0	0	125
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	125	0	0	0	125
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	125	0	0	0	125
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	0	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	0	0	0	0	0

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	(1)	(5,000)	0	0	0	0	1	5,000	0	0
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	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)	(5,000)	0	0	0	0	1	5,000	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	12	254,274	0	(a).....0	0	0	0	0	12	254,274
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year.....	12	254,274	0	(a).....0	0	0	0	0	12	254,274

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

ACCIDENT AND HEALTH INSURANCE

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

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

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF SOUTH CAROLINA DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	164,283	0	0	29	164,312
2. Annuity considerations.....	420	0	0	0	420
3. Deposit-type contract funds.....	0	XXX.....	0	XXX.....	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	164,703	0	0	29	164,732
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	702	0	0	0	702
6.2 Applied to pay renewal premiums.....	350	0	0	0	350
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	110	0	0	0	110
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,162	0	0	0	1,162
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	1,162	0	0	0	1,162
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	202,767	0	0	0	202,767
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	76,733	0	0	443.....	77,176
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	279,500	0	0	443.....	279,943

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	0	51	0	0	0	0	1	2,449	1	2,500
17. Incurred during current year.....	9	225,267	0	0	0	0	0	0	9	225,267
Settled during current year:										
18.1 By payment in full.....	9	202,767	0	0	0	0	0	0	9	202,767
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	9	202,767	0	0	0	0	0	0	9	202,767
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	9	202,767	0	0	0	0	0	0	9	202,767
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	22,551	0	0	0	0	1	2,449	1	25,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	596	20,567,899	0	(a).....0	3	22,500	7	2,860	606	20,593,259
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(36)	(1,601,406)	0	0	0	0	0	0	(36)	(1,601,406)
23. In force December 31 of current year.....	560	18,966,493	0	(a).....0	3	22,500	7	2,860	570	18,991,853

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

ACCIDENT AND HEALTH INSURANCE

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

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

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF SOUTH DAKOTA DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	2,691	0	0	0	2,691
2. Annuity considerations.....	60	0	0	0	60
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	2,751	0	0	0	2,751
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	45	0	0	0	45
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	45	0	0	0	45

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	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.....	15	231,360	0	(a).....0	0	0	0	0	15	231,360
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(1)	(33,972)	0	0	0	0	0	0	(1)	(33,972)
23. In force December 31 of current year.....	14	197,388	0	(a).....0	0	0	0	0	14	197,388

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	0	0
25.2 Guaranteed renewable (b).....	10	10	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	10	10	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	10	10	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.

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF TENNESSEE DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	165,248	0	555	45,784	211,587
2. Annuity considerations.....	945	0	0	0	945
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	166,193	0	555	45,784	212,532
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	1,383	0	0	0	1,383
6.2 Applied to pay renewal premiums.....	111	0	0	0	111
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	5,534	0	0	0	5,534
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	7,028	0	0	0	7,028
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	7,028	0	0	0	7,028
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	178,991	0	5,007	61,732	245,730
10. Matured endowments.....	13,080	0	0	5,143	18,223
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	102,549	0	0	19,928	122,477
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	294,620	0	5,007	86,803	386,430

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	8	19,939	0	0	0	(0)	21	13,985	29	33,924
17. Incurred during current year.....	69	182,131	0	0	1	5,007	97	63,595	167	250,733
Settled during current year:										
18.1 By payment in full.....	74	192,071	0	0	1	5,007	101	66,875	176	263,953
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	74	192,071	0	0	1	5,007	101	66,875	176	263,953
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	74	192,071	0	0	1	5,007	101	66,875	176	263,953
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	3	9,999	0	0	0	(0)	17	10,705	20	20,704
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,461	15,847,005	0	(a).....0	11	147,200	8,855	8,033,637	12,327	24,027,842
21. Issued during year.....	1	10,000	0	0	0	0	0	0	1	10,000
22. Other changes to in force (Net).....	(195)	(831,546)	0	0	(1)	(7,500)	(520)	(411,272)	(716)	(1,250,318)
23. In force December 31 of current year.....	3,267	15,025,459	0	(a).....0	10	139,700	8,335	7,622,365	11,612	22,787,524

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	0	0
25.2 Guaranteed renewable (b).....	203	203	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	203	203	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	203	203	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.

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF TEXAS DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	768,195	0	0	78,335	846,530
2. Annuity considerations.....	16,056	0	0	0	16,056
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	784,251	0	0	78,335	862,586
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	9,793	0	0	0	9,793
6.2 Applied to pay renewal premiums.....	1,639	0	0	0	1,639
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	1,578	0	0	0	1,578
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	13,010	0	0	0	13,010
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	13,010	0	0	0	13,010
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	1,413,194	0	0	151,238	1,564,432
10. Matured endowments.....	76,701	0	0	8,894	85,595
11. Annuity benefits.....	99,742	0	0	0	99,742
12. Surrender values and withdrawals for life contracts.....	523,482	0	0	50,094	573,576
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	2,113,119	0	0	210,226	2,323,345

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	38	66,030	0	0	0	0	31	158,747	69	224,777
17. Incurred during current year.....	404	1,494,404	0	0	0	0	212	145,857	616	1,640,261
Settled during current year:										
18.1 By payment in full.....	404	1,489,940	0	0	0	0	226	160,131	630	1,650,071
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	404	1,489,940	0	0	0	0	226	160,131	630	1,650,071
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	404	1,489,940	0	0	0	0	226	160,131	630	1,650,071
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	38	70,494	0	0	0	0	17	144,473	55	214,967
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	12,540	69,671,496	0	(a).....0	0	0	13,572	12,710,495	26,112	82,381,991
21. Issued during year.....	1	10,000	0	0	0	0	0	0	1	10,000
22. Other changes to in force (Net).....	(798)	(4,919,394)	0	0	0	0	(687)	(674,986)	(1,485)	(5,594,380)
23. In force December 31 of current year.....	11,743	64,762,102	0	(a).....0	0	0	12,885	12,035,509	24,628	76,797,611

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	0	0
25.2 Guaranteed renewable (b).....	(728)	(728)	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	(728)	(728)	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	(728)	(728)	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.

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF UTAH DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	5,459	0	2,008	0	7,467
2. Annuity considerations.....	470	0	0	0	470
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	5,929	0	2,008	0	7,937
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	166	0	0	0	166
6.2 Applied to pay renewal premiums.....	59	0	0	0	59
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	15	0	0	0	15
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	240	0	0	0	240
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	240	0	0	0	240
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	3,419	0	0	0	3,419
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	3,419	0	0	0	3,419

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	2	3,419	0	0	0	0	0	0	2	3,419
Settled during current year:										
18.1 By payment in full.....	2	3,419	0	0	0	0	0	0	2	3,419
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	2	3,419	0	0	0	0	0	0	2	3,419
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	2	3,419	0	0	0	0	0	0	2	3,419
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.....	39	620,662	0	(a).....0	4	35,100	0	0	43	655,762
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(4)	(58,836)	0	0	0	0	0	0	(4)	(58,836)
23. In force December 31 of current year.....	35	561,826	0	(a).....0	4	35,100	0	0	39	596,926

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

ACCIDENT AND HEALTH INSURANCE

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

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

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF VIRGINIA DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	126,725	0	1,395	13,027	141,147
2. Annuity considerations.....	3,846	0	0	0	3,846
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	130,571	0	1,395	13,027	144,993
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	2,926	0	0	0	2,926
6.2 Applied to pay renewal premiums.....	397	0	0	0	397
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	186	0	0	0	186
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	3,509	0	0	0	3,509
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	3,509	0	0	0	3,509
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	244,904	0	18,529	46,382	309,815
10. Matured endowments.....	1,000	0	0	4,314	5,314
11. Annuity benefits.....	36,331	0	0	0	36,331
12. Surrender values and withdrawals for life contracts.....	137,729	0	0	10,057	147,786
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	0	0	0	0
15. Totals.....	419,964	0	18,529	60,753	499,246

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	(3)	(18,456)	0	0	0	0	17	41,511	14	23,055
17. Incurred during current year.....	48	230,550	0	0	4	18,528	56	47,596	108	296,674
Settled during current year:										
18.1 By payment in full.....	52	245,905	0	0	4	18,529	61	50,696	117	315,130
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	52	245,905	0	0	4	18,529	61	50,696	117	315,130
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	52	245,905	0	0	4	18,529	61	50,696	117	315,130
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	(7)	(33,811)	0	0	0	(1)	12	38,411	5	4,599
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	2,552	19,135,206	0	(a).....0	83	732,150	5,481	4,893,898	8,116	24,761,254
21. Issued during year.....	1	2,500	0	0	0	0	0	0	1	2,500
22. Other changes to in force (Net).....	(133)	(1,368,428)	0	0	(6)	(83,600)	(190)	(179,935)	(329)	(1,631,963)
23. In force December 31 of current year.....	2,420	17,769,278	0	(a).....0	77	648,550	5,291	4,713,963	7,788	23,131,791

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN U.S. VIRGIN ISLANDS DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	0	0	0	0	0
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	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	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	0	0	0	0	0

DETAILS OF WRITE-INS

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF VERMONT DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	0	0	0	0	0
2. Annuity considerations.....	275	0	0	0	275
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	275	0	0	0	275
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	46	0	0	0	46
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	46	0	0	0	46
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	46	0	0	0	46
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	0	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	0	0	0	0	0

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	0	(1)	0	0	0	0	0	0	0	(1)
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	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	(1)	0	0	0	0	0	0	0	(1)
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	8	66,430	0	(a).....0	0	0	0	0	8	66,430
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year.....	8	66,430	0	(a).....0	0	0	0	0	8	66,430

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

ACCIDENT AND HEALTH INSURANCE

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

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

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF WASHINGTON DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	15,050	0	0	206	15,256
2. Annuity considerations.....	288	0	0	0	288
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	15,338	0	0	206	15,544
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	864	0	0	0	864
6.2 Applied to pay renewal premiums.....	192	0	0	0	192
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	35	0	0	0	35
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,091	0	0	0	1,091
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	1,091	0	0	0	1,091
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	16,668	0	0	1,311	17,979
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	5,488	0	0	196	5,684
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	22,156	0	0	1,507	23,663

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	0	0	0	0	0	0	0	(1)	0	(1)
17. Incurred during current year.....	2	16,668	0	0	0	0	2	1,311	4	17,979
Settled during current year:										
18.1 By payment in full.....	2	16,668	0	0	0	0	2	1,311	4	17,979
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	2	16,668	0	0	0	0	2	1,311	4	17,979
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	2	16,668	0	0	0	0	2	1,311	4	17,979
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	(1)	0	(1)
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	98	1,678,145	0	(a).....0	0	0	0	0	98	1,678,145
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(5)	(105,564)	0	0	0	0	0	0	(5)	(105,564)
23. In force December 31 of current year.....	93	1,572,581	0	(a).....0	0	0	0	0	93	1,572,581

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF WISCONSIN DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	29,945	0	0	155	30,100
2. Annuity considerations.....	2,562	0	0	0	2,562
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	32,507	0	0	155	32,662
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	1,873	0	0	0	1,873
6.2 Applied to pay renewal premiums.....	934	0	0	0	934
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	194	0	0	0	194
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	3,001	0	0	0	3,001
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	3,001	0	0	0	3,001
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	5,943	0	0	0	5,943
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	27,610	0	0	0	27,610
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	33,553	0	0	0	33,553

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	3	11,943	0	0	0	0	0	0	3	11,943
Settled during current year:										
18.1 By payment in full.....	2	5,943	0	0	0	0	0	0	2	5,943
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	2	5,943	0	0	0	0	0	0	2	5,943
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	2	5,943	0	0	0	0	0	0	2	5,943
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	6,000	0	0	0	0	0	0	1	6,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	196	4,557,757	0	(a).....0	1	5,000	7	4,500	204	4,567,257
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(3)	(30,275)	0	0	0	0	0	0	(3)	(30,275)
23. In force December 31 of current year.....	193	4,527,482	0	(a).....0	1	5,000	7	4,500	201	4,536,982

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

ACCIDENT AND HEALTH INSURANCE

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

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

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF WEST VIRGINIA DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	541,724	0	14,645	543	556,912
2. Annuity considerations.....	3,183	0	0	0	3,183
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	544,907	0	14,645	543	560,095
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	897	0	0	0	897
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	232	0	0	0	232
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,129	0	0	0	1,129
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	1,129	0	0	0	1,129
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	1,190,223	0	238,290	19,716	1,448,229
10. Matured endowments.....	8,530	0	0	2,975	11,505
11. Annuity benefits.....	15,926	0	0	0	15,926
12. Surrender values and withdrawals for life contracts.....	192,502	0	0	3,235	195,737
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	1,407,181	0	238,290	25,926	1,671,397

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	(15)	(53,191)	0	0	5	32,500	53	153,888	43	133,197
17. Incurred during current year.....	343	1,208,605	0	0	52	228,290	29	18,991	424	1,455,886
Settled during current year:										
18.1 By payment in full.....	338	1,198,753	0	0	53	238,290	36	22,691	427	1,459,734
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	338	1,198,753	0	0	53	238,290	36	22,691	427	1,459,734
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	338	1,198,753	0	0	53	238,290	36	22,691	427	1,459,734
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	(10)	(43,339)	0	0	4	22,500	46	150,188	40	129,349
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	10,952	57,461,904	0	(a).....0	661	8,239,000	1,454	992,497	13,067	66,693,401
21. Issued during year.....	4	36,000	0	0	4	93,200	0	0	8	129,200
22. Other changes to in force (Net).....	(565)	(2,464,583)	0	0	(97)	(1,623,550)	(38)	(36,300)	(700)	(4,124,433)
23. In force December 31 of current year.....	10,391	55,033,321	0	(a).....0	568	6,708,650	1,416	956,197	12,375	62,698,168

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	0	0
25.2 Guaranteed renewable (b).....	7,636	7,683	0	9,307	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	7,636	7,683	0	9,307	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	7,636	7,683	0	9,307	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.

Universal Guaranty Life Insurance Company



DIRECT BUSINESS IN THE STATE OF WYOMING DURING THE YEAR
NAIC Group Code.....0 NAIC Company Code.....70130

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	4,150	0	91,732	0	95,882
2. Annuity considerations.....	180	0	0	0	180
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	4,330	0	91,732	0	96,062
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	213	0	0	0	213
6.2 Applied to pay renewal premiums.....	40	0	0	0	40
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	253	0	0	0	253
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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).....	253	0	0	0	253
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	3,290	0	0	0	3,290
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	3,290	0	0	0	3,290

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	1	3,290	0	0	0	0	0	0	1	3,290
Settled during current year:										
18.1 By payment in full.....	1	3,290	0	0	0	0	0	0	1	3,290
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	1	3,290	0	0	0	0	0	0	1	3,290
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	1	3,290	0	0	0	0	0	0	1	3,290
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.....	31	532,482	0	(a).....0	0	0	0	0	31	532,482
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(1)	(3,575)	0	0	0	0	0	0	(1)	(3,575)
23. In force December 31 of current year.....	30	528,907	0	(a).....0	0	0	0	0	30	528,907

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

Interest Maintenance Reserve

	1 Amount
1. Reserve as of December 31, prior year.....	12,497,253
2. Current year's realized pre-tax capital gains/(losses) of \$.....1,248,241 transferred into the reserve net of taxes of \$.....206,992.....	1,041,249
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).....	13,538,502
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4).....	1,072,459
6. Reserve as of December 31, current year (Line 4 minus Line 5).....	12,466,042

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.....	979,709	92,750	0	1,072,459
2. 2016.....	845,173	192,078	0	1,037,251
3. 2017.....	723,171	179,725	0	902,896
4. 2018.....	655,490	145,741	0	801,232
5. 2019.....	570,435	110,960	0	681,395
6. 2020.....	463,781	75,056	0	538,837
7. 2021.....	387,809	52,008	0	439,816
8. 2022.....	338,228	44,465	0	382,693
9. 2023.....	310,833	36,073	0	346,906
10. 2024.....	297,964	27,518	0	325,482
11. 2025.....	309,723	18,210	0	327,933
12. 2026.....	340,749	13,156	0	353,905
13. 2027.....	359,339	11,686	0	371,025
14. 2028.....	391,032	10,197	0	401,229
15. 2029.....	420,717	8,522	0	429,239
16. 2030.....	446,457	7,121	0	453,577
17. 2031.....	457,922	5,620	0	463,542
18. 2032.....	473,942	4,478	0	478,420
19. 2033.....	481,127	3,249	0	484,376
20. 2034.....	481,794	1,932	0	483,726
21. 2035.....	497,192	703	0	497,895
22. 2036.....	524,586	0	0	524,586
23. 2037.....	517,526	0	0	517,526
24. 2038.....	454,246	0	0	454,246
25. 2039.....	353,629	0	0	353,629
26. 2040.....	248,440	0	0	248,440
27. 2041.....	133,628	0	0	133,628
28. 2042.....	32,619	0	0	32,619
29. 2043.....	(8)	0	0	(8)
30. 2044.....	0	0	0	0
31. 2045 and Later.....	0	0	0	0
32. Total (Lines 1 to 31).....	12,497,252	1,041,249	0	13,538,501

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.....	2,537,013	1,498,945	4,035,958	2,409,713	3,000,000	5,409,713	9,445,670
2. Realized capital gains/(losses) net of taxes - General Account.....	1,182,532	0	1,182,532	(6,392,301)	4,483,457	(1,908,844)	(726,312)
3. Realized capital gains/(losses) net of taxes - Separate Accounts.....	0	0	0	0	0	0	0
4. Unrealized capital gains/(losses) - net of deferred taxes - General Account.....	(300,250)	0	(300,250)	1,074,250	(516,163)	558,087	257,837
5. Unrealized capital gains/(losses) - net of deferred taxes - Separate Accounts.....	0	0	0	0	0	0	0
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves.....	0	0	0	0	0	0	0
7. Basic contribution.....	594,813	73,768	668,581	0	2,198	2,198	670,779
8. Accumulated balances (Lines 1 through 5, minus 6 plus 7).....	4,014,108	1,572,713	5,586,821	(2,908,338)	6,969,492	4,061,154	9,647,975
9. Maximum reserve.....	2,804,698	651,051	3,455,749	4,212,622	4,373,091	8,585,713	12,041,462
10. Reserve objective.....	1,974,216	592,766	2,566,982	4,211,000	4,369,793	8,580,793	11,147,775
11. 20% of (Line 10 minus Line 8).....	(407,978)	(195,989)	(603,968)	1,423,868	(519,940)	903,928	299,960
12. Balance before transfers (Lines 8 + 11).....	3,606,130	1,376,723	4,982,853	(1,484,470)	6,449,552	4,965,082	9,947,935
13. Transfers.....	0	0	0	1,451,091	(1,451,091)	0	0
14. Voluntary contribution.....	0	0	0	0	0	0	0
15. Adjustment down to maximum/up to zero.....	(989,494)	(725,672)	(1,715,166)	0	0	0	(1,715,166)
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15).....	2,616,636	651,051	3,267,687	(33,379)	4,998,461	4,965,082	8,232,769

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.....	20,336,681	XXX	XXX	20,336,681	0.0000	0	0.0000	0	0.0000	0
2	1	Highest quality.....	72,780,964	XXX	XXX	72,780,964	0.0004	29,112	0.0023	167,396	0.0030	218,343
3	2	High quality.....	79,914,314	XXX	XXX	79,914,314	0.0019	151,837	0.0058	463,503	0.0090	719,229
4	3	Medium quality.....	6,203,961	XXX	XXX	6,203,961	0.0093	57,697	0.0230	142,691	0.0340	210,935
5	4	Low quality.....	3,050,943	XXX	XXX	3,050,943	0.0213	64,985	0.0530	161,700	0.0750	228,821
6	5	Lower quality.....	4,864,677	XXX	XXX	4,864,677	0.0432	210,154	0.1100	535,114	0.1700	826,995
7	6	In or near default.....	1,496,130	XXX	XXX	1,496,130	0.0000	0	0.2000	299,226	0.2000	299,226
8		Total unrated multi-class securities acquired by conversion.....	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
9		Total bonds (sum of Lines 1 through 8).....	188,647,670	XXX	XXX	188,647,670	XXX	513,786	XXX	1,769,631	XXX	2,503,548
PREFERRED STOCKS												
10	1	Highest quality.....	3,200,000	XXX	XXX	3,200,000	0.0004	1,280	0.0023	7,360	0.0030	9,600
11	2	High quality.....	0	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
12	3	Medium quality.....	8,575,000	XXX	XXX	8,575,000	0.0093	79,748	0.0230	197,225	0.0340	291,550
13	4	Low quality.....	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
14	5	Lower quality.....	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
15	6	In or near default.....	0	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
16		Affiliated life with AVR.....	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
17		Total preferred stocks (sum of Lines 10 through 16).....	11,775,000	XXX	XXX	11,775,000	XXX	81,028	XXX	204,585	XXX	301,150
SHORT-TERM BONDS												
18		Exempt obligations.....	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
19	1	Highest quality.....	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
20	2	High quality.....	0	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
21	3	Medium quality.....	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
22	4	Low quality.....	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
23	5	Lower quality.....	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
24	6	In or near default.....	0	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.....	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
27	1	Highest quality.....	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
28	2	High quality.....	0	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
29	3	Medium quality.....	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
30	4	Low quality.....	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
31	5	Lower quality.....	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
32	6	In or near default.....	0	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).....	200,422,670	XXX	XXX	200,422,670	XXX	594,813	XXX	1,974,216	XXX	2,804,698

ASSET VALUATION RESERVE (continued)

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

Line Number	NAIC Desig- nation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols. 4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
31		MORTGAGE LOANS										
		In good standing:										
		35 Farm mortgages - CM1 - highest quality.....	0	0	XXX	0	0.0010	0	0.0050	0	0.0065	0
		36 Farm mortgages - CM2 - high quality.....	0	0	XXX	0	0.0035	0	0.0100	0	0.0130	0
		37 Farm mortgages - CM3 - medium quality.....	0	0	XXX	0	0.0060	0	0.0175	0	0.0225	0
		38 Farm mortgages - CM4 - low medium quality.....	0	0	XXX	0	0.0105	0	0.0300	0	0.0375	0
		39 Farm mortgages - CM5 - low quality.....	0	0	XXX	0	0.0160	0	0.0425	0	0.0550	0
		40 Residential mortgages-insured or guaranteed.....	0	0	XXX	0	0.0003	0	0.0006	0	0.0010	0
		41 Residential mortgages-all other.....	1,110,418	0	XXX	1,110,418	0.0013	1,444	0.0030	3,331	0.0040	4,442
		42 Commercial mortgages-insured or guaranteed.....	0	0	XXX	0	0.0003	0	0.0006	0	0.0010	0
		43 Commercial mortgages-all other - CM1 - highest quality.....	149,111	0	XXX	149,111	0.0010	149	0.0050	746	0.0065	969
		44 Commercial mortgages-all other - CM2 - high quality.....	1,854,516	0	XXX	1,854,516	0.0035	6,491	0.0100	18,545	0.0130	24,109
		45 Commercial mortgages-all other - CM3 - medium quality.....	5,848,822	0	XXX	5,848,822	0.0060	35,093	0.0175	102,354	0.0225	131,598
		46 Commercial mortgages-all other - CM4 - low medium quality.....	2,830,131	0	XXX	2,830,131	0.0105	29,716	0.0300	84,904	0.0375	106,130
		47 Commercial mortgages-all other - CM5 - low quality.....	0	0	XXX	0	0.0160	0	0.0425	0	0.0550	0
		Overdue, not in process:										
		48 Farm mortgages.....	0	0	XXX	0	0.0420	0	0.0760	0	0.1200	0
		49 Residential mortgages-insured or guaranteed.....	0	0	XXX	0	0.0005	0	0.0012	0	0.0020	0
		50 Residential mortgages-all other.....	0	0	XXX	0	0.0025	0	0.0058	0	0.0090	0
		51 Commercial mortgages-insured or guaranteed.....	0	0	XXX	0	0.0005	0	0.0012	0	0.0020	0
		52 Commercial mortgages-all other.....	20,834	0	XXX	20,834	0.0420	875	0.0760	1,583	0.1200	2,500
		In process of foreclosure:										
		53 Farm mortgages.....	0	0	XXX	0	0.0000	0	0.1700	0	0.1700	0
		54 Residential mortgages-insured or guaranteed.....	0	0	XXX	0	0.0000	0	0.0040	0	0.0040	0
		55 Residential mortgages-all other.....	735,000	0	XXX	735,000	0.0000	0	0.0130	9,555	0.0130	9,555
		56 Commercial mortgages-insured or guaranteed.....	0	0	XXX	0	0.0000	0	0.0040	0	0.0040	0
		57 Commercial mortgages-all other.....	2,186,750	0	XXX	2,186,750	0.0000	0	0.1700	371,748	0.1700	371,748
		58 Total Schedule B mortgages (sum of Lines 35 through 57).....	14,735,582	0	XXX	14,735,582	XXX	73,768	XXX	592,766	XXX	651,051
		59 Schedule DA mortgages.....	0	0	XXX	0	0.0030	0	0.0100	0	0.0130	0
		60 Total mortgage loans on real estate (Lines 58 + 59).....	14,735,582	0	XXX	14,735,582	XXX	73,768	XXX	592,766	XXX	651,051

ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Equity and Other Invested Asset Component

Line Number	NAIC Design- ation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols. 4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
		COMMON STOCK										
1		Unaffiliated public.....	17,846,148	XXX	XXX	17,846,148	0.0000	0	(a).....0.1000	1,784,615	(a).....0.1000	1,784,615
2		Unaffiliated private.....	10,527,308	XXX	XXX	10,527,308	0.0000	0	0.1600	1,684,369	0.1600	1,684,369
3		Federal Home Loan Bank.....	540,900	XXX	XXX	540,900	0.0000	0	0.0050	2,705	0.0080	4,327
4		Affiliated life with AVR.....	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
		Affiliated Investment Subsidiary:										
5		Fixed income exempt obligations.....	0	0	0	0	XXX	0	XXX	0	XXX	0
6		Fixed income highest quality.....	0	0	0	0	XXX	0	XXX	0	XXX	0
7		Fixed income high quality.....	0	0	0	0	XXX	0	XXX	0	XXX	0
8		Fixed income medium quality.....	0	0	0	0	XXX	0	XXX	0	XXX	0
9		Fixed income low quality.....	0	0	0	0	XXX	0	XXX	0	XXX	0
10		Fixed income lower quality.....	0	0	0	0	XXX	0	XXX	0	XXX	0
11		Fixed income in or near default.....	0	0	0	0	XXX	0	XXX	0	XXX	0
12		Unaffiliated common stock public.....	0	0	0	0	0.0000	0	(a).....0.0000	0	(a).....0.0000	0
13		Unaffiliated common stock private.....	0	0	0	0	0.0000	0	0.1600	0	0.1600	0
14		Real estate.....	0	0	0	0	(b).....0.0000	0	(b).....0.0000	0	(b).....0.0000	0
15		Affiliated - certain other (see SVO Purposes and Procedures manual).....	5,687,009	XXX	XXX	5,687,009	0.0000	0	0.1300	739,311	0.1300	739,311
16		Affiliated - all other.....	0	XXX	XXX	0	0.0000	0	0.1600	0	0.1600	0
17		Total common stock (sum of Lines 1 through 16).....	34,601,365	0	0	34,601,365	XXX	0	XXX	4,211,000	XXX	4,212,622
		REAL ESTATE										
18		Home office property (General Account only).....	896,610	0	0	896,610	0.0000	0	0.0750	67,246	0.0750	67,246
19		Investment properties.....	14,979,414	0	0	14,979,414	0.0000	0	0.0750	1,123,456	0.0750	1,123,456
20		Properties acquired in satisfaction of debt.....	7,957,113	0	0	7,957,113	0.0000	0	0.1100	875,282	0.1100	875,282
21		Total real estate (sum of Lines 18 through 20).....	23,833,137	0	0	23,833,137	XXX	0	XXX	2,065,984	XXX	2,065,984
		OTHER INVESTED ASSETS										
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS										
22		Exempt obligations.....	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
23	1	Highest quality.....	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
24	2	High quality.....	0	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
25	3	Medium quality.....	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
26	4	Low quality.....	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
27	5	Lower quality.....	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
28	6	In or near default.....	0	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 Design- nation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols. 4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS										
30	1	Highest quality.....	.0	XXX.....	XXX.....	.0	.0004	.0	.0023	0	.0030	.0
31	2	High quality.....	.0	XXX.....	XXX.....	.0	.0019	.0	.0058	0	.0090	.0
32	3	Medium quality.....	.0	XXX.....	XXX.....	.0	.0093	.0	.0230	0	.0340	.0
33	4	Low quality.....	.0	XXX.....	XXX.....	.0	.0213	.0	.0530	0	.0750	.0
34	5	Lower quality.....	.0	XXX.....	XXX.....	.0	.0432	.0	.1100	0	.1700	.0
35	6	In or near default.....	.0	XXX.....	XXX.....	.0	.0000	.0	.2000	0	.2000	.0
36		Affiliated life with AVR.....	.0	XXX.....	XXX.....	.0	.0000	.0	.0000	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.....	2,198,486	.0	XXX.....	2,198,486	.0010	2,198	.0050	10,992	.0065	14,290
39		Mortgages - CM2 - high quality.....	.0	.0	XXX.....	.0	.0035	.0	.0100	0	.0130	.0
40		Mortgages - CM3 - medium quality.....	.0	.0	XXX.....	.0	.0060	.0	.0175	0	.0225	.0
41		Mortgages - CM4 - low medium quality.....	.0	.0	XXX.....	.0	.0105	.0	.0300	0	.0375	.0
42		Mortgages - CM5 - low quality.....	.0	.0	XXX.....	.0	.0160	.0	.0425	0	.0550	.0
43		Residential mortgages-insured or guaranteed.....	.0	.0	XXX.....	.0	.0003	.0	.0006	0	.0010	.0
44		Residential mortgages-all other.....	.0	XXX.....	XXX.....	.0	.0013	.0	.0030	0	.0040	.0
45		Commercial mortgages-insured or guaranteed.....	.0	.0	XXX.....	.0	.0003	.0	.0006	0	.0010	.0
		Overdue, Not in Process Affiliated:										
46		Farm mortgages.....	.0	.0	XXX.....	.0	.0420	.0	.0760	0	.1200	.0
47		Residential mortgages-insured or guaranteed.....	.0	.0	XXX.....	.0	.0005	.0	.0012	0	.0020	.0
48		Residential mortgages-all other.....	.0	.0	XXX.....	.0	.0025	.0	.0058	0	.0090	.0
49		Commercial mortgages-insured or guaranteed.....	.0	.0	XXX.....	.0	.0005	.0	.0012	0	.0020	.0
50		Commercial mortgages-all other.....	.0	.0	XXX.....	.0	.0420	.0	.0760	0	.1200	.0
		In Process of foreclosure Affiliated:										
51		Farm mortgages.....	.0	.0	XXX.....	.0	.0000	.0	.1700	0	.1700	.0
52		Residential mortgages-insured or guaranteed.....	.0	.0	XXX.....	.0	.0000	.0	.0040	0	.0040	.0
53		Residential mortgages-all other.....	.0	.0	XXX.....	.0	.0000	.0	.0130	0	.0130	.0
54		Commercial mortgages-insured or guaranteed.....	.0	.0	XXX.....	.0	.0000	.0	.0040	0	.0040	.0
55		Commercial mortgages-all other.....	.0	.0	XXX.....	.0	.0000	.0	.1700	0	.1700	.0
56		Total Affiliated (Sum of Lines 38 through 55).....	2,198,486	.0	XXX.....	2,198,486	XXX.....	2,198	XXX.....	10,992	XXX.....	14,290
57		Unaffiliated - In Good Standing with Covenants.....	.0	.0	XXX.....	.0	(c).....0.0000	.0	(c).....0.0000	0	(c).....0.0000	.0
58		Unaffiliated - In Good Standing Defeased with Government Securities.....	.0	.0	XXX.....	.0	.0010	.0	.0050	0	.0065	.0
59		Unaffiliated - In Good Standing Primarily Senior.....	.0	.0	XXX.....	.0	.0035	.0	.0100	0	.0130	.0
60		Unaffiliated - In Good Standing All Other.....	.0	.0	XXX.....	.0	.0060	.0	.0175	0	.0225	.0
61		Unaffiliated - Overdue, Not in Process.....	.0	.0	XXX.....	.0	.0420	.0	.0760	0	.1200	.0
62		Unaffiliated - In Process of Foreclosure.....	.0	.0	XXX.....	.0	.0000	.0	.1700	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).....	2,198,486	.0	XXX.....	2,198,486	XXX.....	2,198	XXX.....	10,992	XXX.....	14,290

ASSET VALUATION RESERVE (continued)

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Equity and Other Invested Asset Component

Line Number	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (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)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK										
65		Unaffiliated public.....	0	XXX.....	XXX.....	0	0.0000	0	(a).....0.0000	0	(a).....0.0000	0
66		Unaffiliated private.....	0	XXX.....	XXX.....	0	0.0000	0	0.1600	0	0.1600	0
67		Affiliated life with AVR.....	0	XXX.....	XXX.....	0	0.0000	0	0.0000	0	0.0000	0
68		Affiliated certain other (see SVO Purposes and Procedures manual).....	0	XXX.....	XXX.....	0	0.0000	0	0.1300	0	0.1300	0
69		Affiliated other - all other.....	0	XXX.....	XXX.....	0	0.0000	0	0.1600	0	0.1600	0
70		Total with Common Stock Characteristics (Sum of Lines 65 through 69).....	0	XXX.....	XXX.....	0	XXX.....	0	XXX.....	0	XXX.....	0
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE										
71		Home office property (general account only).....	0	0	0	0	0.0000	0	0.0750	0	0.0750	0
72		Investment properties.....	10,081,213	0	0	10,081,213	0.0000	0	0.0750	756,091	0.0750	756,091
73		Properties acquired in satisfaction of debt.....	0	0	0	0	0.0000	0	0.1100	0	0.1100	0
74		Total with Real Estate Characteristics (Sum of Lines 71 through 73).....	10,081,213	0	0	10,081,213	XXX.....	0	XXX.....	756,091	XXX.....	756,091
		LOW INCOME HOUSING TAX CREDIT INVESTMENTS										
75		Guaranteed federal low income housing tax credit.....	0	0	0	0	0.0003	0	0.0006	0	0.0010	0
76		Non-guaranteed federal low income housing tax credit.....	0	0	0	0	0.0063	0	0.0120	0	0.0190	0
77		Guaranteed state low income housing tax credit.....	0	0	0	0	0.0003	0	0.0006	0	0.0010	0
78		Non-guaranteed state low income housing tax credit.....	0	0	0	0	0.0063	0	0.0120	0	0.0190	0
79		All other low income housing tax credit.....	0	0	0	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.....	0	XXX.....	0	0	0.0000	0	0.0037	0	0.0037	0
82		NAIC 2 working capital finance investments.....	0	XXX.....	0	0	0.0000	0	0.0120	0	0.0120	0
83		Other invested assets - Schedule BA.....	11,820,966	XXX.....	0	11,820,966	0.0000	0	0.1300	1,536,726	0.1300	1,536,726
84		Other short-term invested assets - Schedule DA.....	0	XXX.....	0	0	0.0000	0	0.1300	0	0.1300	0
85		Total All Other (sum of Lines 81, 82, 83 and 84).....	11,820,966	XXX.....	0	11,820,966	XXX.....	0	XXX.....	1,536,726	XXX.....	1,536,726
86		Total Other Invested Assets - Schedule BA & DA (Sum of Lines 29, 37, 64, 70, 74, 80 and 85).....	24,100,665	0	0	24,100,665	XXX.....	2,198	XXX.....	2,303,809	XXX.....	2,307,107

(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 - Replications (Synthetic) Assets
NONE

Sch. F - Claims
NONE

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

		Total		Group Accident and Health		Credit Accident and Health (Group and Individual)		Collectively Renewable		Other Individual Contracts									
										Non-Cancelable		Guaranteed Renewable		Non-Renewable for Stated Reasons Only		Other Accident Only		All Other	
		1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %	15 Amount	16 %	17 Amount	18 %
PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS																			
1.	Premiums written.....	10,661	XXX	0	XXX	799	XXX	0	XXX	0	XXX	9,862	XXX	0	XXX	0	XXX	0	XXX
2.	Premiums earned.....	10,952	XXX	0	XXX	968	XXX	0	XXX	0	XXX	9,984	XXX	0	XXX	0	XXX	0	XXX
3.	Incurred claims.....	70,967	648.0	6,151	0.0	177	18.3	0	0.0	0	0.0	64,639	647.4	0	0.0	0	0.0	0	0.0
4.	Cost containment expenses.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
5.	Incurred claims and cost containment expenses (Lines 3 and 4).....	70,967	648.0	6,151	0.0	177	18.3	0	0.0	0	0.0	64,639	647.4	0	0.0	0	0.0	0	0.0
6.	Increase in contract reserves.....	(37,038)	(338.2)	0	0.0	0	0.0	0	0.0	0	0.0	(37,038)	(371.0)	0	0.0	0	0.0	0	0.0
7.	Commissions (a).....	(639)	(5.8)	0	0.0	148	15.3	0	0.0	0	0.0	(787)	(7.9)	0	0.0	0	0.0	0	0.0
8.	Other general insurance expenses.....	89,438	816.6	0	0.0	6,703	692.5	0	0.0	0	0.0	82,735	828.7	0	0.0	0	0.0	0	0.0
9.	Taxes, licenses and fees.....	1,710	15.6	0	0.0	128	13.2	0	0.0	0	0.0	1,582	15.8	0	0.0	0	0.0	0	0.0
10.	Total other expenses incurred.....	90,509	826.4	0	0.0	6,979	721.0	0	0.0	0	0.0	83,530	836.6	0	0.0	0	0.0	0	0.0
11.	Aggregate write-ins for deductions.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
12.	Gain from underwriting before dividends or refunds.....	(113,486)	(1,036.2)	(6,151)	0.0	(6,188)	(639.3)	0	0.0	0	0.0	(101,147)	(1,013.1)	0	0.0	0	0.0	0	0.0
13.	Dividends or refunds.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
14.	Gain from underwriting after dividends or refunds.....	(113,486)	(1,036.2)	(6,151)	0.0	(6,188)	(639.3)	0	0.0	0	0.0	(101,147)	(1,013.1)	0	0.0	0	0.0	0	0.0
DETAILS OF WRITE-INS																			
1101.	.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1102.	.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	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	0.0	0	0.0	0	0.0
1198.	Summary of remaining write-ins for Line 11 from overflow page.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1199.	Total (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0

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

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (continued)

	1	2	3	4	Other Individual Contracts				
					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.....	3,215	0	1,011	0	0	2,204	0	0	0
2. Advance premiums.....	121	0	0	0	0	121	0	0	0
3. Reserve for rate credits.....	0	0	0	0	0	0	0	0	0
4. Total premium reserves, current year.....	3,336	0	1,011	0	0	2,325	0	0	0
5. Total premium reserves, prior year.....	3,897	0	1,180	0	0	2,717	0	0	0
6. Increase in total premium reserves.....	(561)	0	(169)	0	0	(392)	0	0	0
B. Contract Reserves:									
1. Additional reserves (a).....	49,971	0	0	0	0	49,971	0	0	0
2. Reserve for future contingent benefits.....	0	0	0	0	0	0	0	0	0
3. Total contract reserves, current year.....	49,971	0	0	0	0	49,971	0	0	0
4. Total contract reserves, prior year.....	87,009	0	0	0	0	87,009	0	0	0
5. Increase in contract reserves.....	(37,038)	0	0	0	0	(37,038)	0	0	0
C. Claim Reserves and Liabilities:									
1. Total current year.....	162,333	60,411	0	0	0	101,922	0	0	0
2. Total prior year.....	175,362	70,460	0	0	0	104,902	0	0	0
3. Increase.....	(13,029)	(10,049)	0	0	0	(2,980)	0	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.....	73,872	16,200	0	0	0	57,672	0	0	0
1.2 On claims incurred during current year.....	10,124	0	177	0	0	9,947	0	0	0
2. Claim Reserves and Liabilities, December 31, Current Year:									
2.1 On claims incurred prior to current year.....	124,333	60,411	0	0	0	63,922	0	0	0
2.2 On claims incurred during current year.....	38,000	0	0	0	0	38,000	0	0	0
3. Test:									
3.1 Lines 1.1 and 2.1.....	198,205	76,611	0	0	0	121,594	0	0	0
3.2 Claim reserves and liabilities, December 31, prior year.....	175,362	70,460	0	0	0	104,902	0	0	0
3.3 Line 3.1 minus Line 3.2.....	22,843	6,151	0	0	0	16,692	0	0	0

PART 4 - REINSURANCE

A. Reinsurance Assumed:									
1. Premiums written.....	799	0	799	0	0	0	0	0	0
2. Premiums earned.....	799	0	799	0	0	0	0	0	0
3. Incurred claims.....	177	0	177	0	0	0	0	0	0
4. Commissions.....	148	0	148	0	0	0	0	0	0
B. Reinsurance Ceded:									
1. Premiums written.....	8,215	0	0	0	0	8,215	0	0	0
2. Premiums earned.....	8,215	0	0	0	0	8,215	0	0	0
3. Incurred claims.....	44,712	34,856	0	0	0	9,856	0	0	0
4. Commissions.....	821	0	0	0	0	821	0	0	0

(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.....	9,947	0	105,556	115,503
2. Beginning claim reserves and liabilities.....	0	0	632,635	632,635
3. Ending claim reserves and liabilities.....	0	0	559,718	559,718
4. Claims paid.....	9,947	0	178,473	188,420
B. Assumed Reinsurance:				
5. Incurred claims.....	0	0	177	177
6. Beginning claim reserves and liabilities.....	0	0	0	0
7. Ending claim reserves and liabilities.....	0	0	0	0
8. Claims paid.....	0	0	177	177
C. Ceded Reinsurance:				
9. Incurred claims.....	0	0	44,712	44,712
10. Beginning claim reserves and liabilities.....	1,059	0	472,573	473,632
11. Ending claim reserves and liabilities.....	1,059	0	412,684	413,743
12. Claims paid.....	0	0	104,601	104,601
D. Net:				
13. Incurred claims.....	9,947	0	61,021	70,968
14. Beginning claim reserves and liabilities.....	(1,059)	0	160,062	159,003
15. Ending claim reserves and liabilities.....	(1,059)	0	147,034	145,975
16. Claims paid.....	9,947	0	74,049	83,996
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred claims and cost containment expenses.....	9,947	0	61,021	70,968
18. Beginning reserves and liabilities.....	(1,059)	0	160,062	159,003
19. Ending reserves and liabilities.....	(1,059)	0	147,034	145,975
20. Paid claims and cost containment expenses.....	9,947	0	74,049	83,996

SCHEDULE S - PART 1 - SECTION 1

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

1	2	3	4	5	6	7	8	9	10	11	12
NAIC Company Code	ID Number	Effective Date	Name of Reinsured	Domiciliary Jurisdiction	Type of Reinsurance Assumed	Amount of In Force at End of Year	Reserve	Premiums	Reinsurance Payable on Paid and Unpaid Losses	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
General Account - Non-Affiliates - U.S. Non-Affiliates											
57509.....	36-1260620....	09/30/1998	INDEPENDENT ORDER OF VIKINGS.....	IL.....	CO/I.....	1,451,366	349,675	21,266	2,103	0	0
64904.....	61-0574893....	06/07/2000	INVESTORS HERITAGE LIFE INSURANCE CO.....	KY.....	CO/I.....	318,417	3,384	2,525	139	0	0
0899999.	Total - General Account - Non-Affiliates - U.S. Non-Affiliates.....					1,769,783	353,059	23,791	2,242	0	0
1099999.	Total - General Account - Non-Affiliates.....					1,769,783	353,059	23,791	2,242	0	0
1199999.	Total - General Account.....					1,769,783	353,059	23,791	2,242	0	0
2399999.	Total U.S.....					1,769,783	353,059	23,791	2,242	0	0
9999999.	Total.....					1,769,783	353,059	23,791	2,242	0	0

SCHEDULE S - PART 1 - SECTION 2

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

1	2	3	4	5	6	7	8	9	10	11	12
NAIC Company Code	ID Number	Effective Date	Name of Reinsured	Domiciliary Jurisdiction	Type of Reinsurance Assumed	Premiums	Unearned Premiums	Reserve Liability Other Than for Unearned Premiums	Reinsurance Payable on Paid and Unpaid Losses	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
Non-Affiliates - U.S. Non-Affiliates											
64904.....	61-0574893....	06/07/2000	INVESTORS HERITAGE LIFE INSURANCE CO.....	KY.....	CO/I.....	799	0	1,011	0	0	0
0899999.	Total - Non-Affiliates - U.S. Non-Affiliates.....					799	0	1,011	0	0	0
1099999.	Total - Non-Affiliates.....					799	0	1,011	0	0	0
1199999.	Total - U.S.....					799	0	1,011	0	0	0
9999999.	Total.....					799	0	1,011	0	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 - Non-Affiliates - U.S. Non-Affiliates						
86258.....	13-2572994....	05/01/1975	GENERAL RE LIFE CORP.....	CT.....	0	0
65676.....	35-0472300....	02/01/1971	LINCOLN NATIONAL LIFE INSURANCE COMPANY.....	IN.....	6,042	19,485
66346.....	58-0828824....	11/01/1968	MUNICH AMERICAN REASSURANCE COMPANY.....	GA.....	0	0
88099.....	75-1608507....	08/01/1991	OPTIMUM RE INSURANCE COMPANY.....	TX.....	110,860	18,277
60003.....	04-2350154....	09/30/1996	PARK AVENUE LIFE INSURANCE COMPANY.....	DE.....	0	64,290
68446.....	75-1222043....	01/10/1991	SCOR LIFE INSURANCE COMPANY.....	TX.....	0	5,749
82627.....	06-0839705....	11/15/1976	SWISS RE LIFE & HEALTH AMERICA, INC.....	CT.....	0	8,680
86231.....	39-0989781....	10/01/1988	TRANSAMERICA LIFE INSURANCE CO.....	IA.....	0	0
0899999.	Total - Life and Annuity Non-Affiliates - U.S. Non-Affiliates.....				116,902	116,481
1099999.	Total - Life and Annuity Non-Affiliates.....				116,902	116,481
1199999.	Total - Life and Annuity.....				116,902	116,481
Accident and Health - Non-Affiliates - U.S. Non-Affiliates						
19194.....	48-0214040....	11/01/1969	FARMERS ALLIANCE MUTUAL INSURANCE CO.....	KS.....	0	27,556
65676.....	35-0472300....	09/01/1969	LINCOLN NATIONAL LIFE INSURANCE CO.....	IN.....	1,059	0
62235.....	01-0278678....	09/19/1989	UNUM LIFE INSURANCE COMPANY OF AMERICA.....	ME.....	15,300	0
1999999.	Total - Accident and Health Non-Affiliates - U.S. Non-Affiliates.....				16,359	27,556
2199999.	Total - Accident and Health Non-Affiliates.....				16,359	27,556
2299999.	Total - Accident and Health.....				16,359	27,556
2399999.	Total U.S.....				133,261	144,037
9999999.	Total.....				133,261	144,037

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 - Non-Affiliates - U.S. Non-Affiliates														
86258.....	13-2572994....	05/01/1975	GENERAL RE LIFE CORP	CT.....	YRT/I.....	OL.....	608,559	12,772	15,050	20,435	0	0	0	0
65676.....	35-0472300....	02/01/1971	LINCOLN NATIONAL LIFE INSURANCE COMPANY.....	IN.....	CO/I.....	OL.....	2,859,297	707,800	746,889	56,947	0	0	0	0
65676.....	35-0472300....	02/01/1971	LINCOLN NATIONAL LIFE INSURANCE COMPANY.....	IN.....	DIS/I.....	OL.....	0	6,434	6,612	0	0	0	0	0
65676.....	35-0472300....	02/01/1971	LINCOLN NATIONAL LIFE INSURANCE COMPANY.....	IN.....	YRT/I.....	OL.....	204,321	1,520	1,390	0	0	0	0	0
85472.....	13-2740556....	01/02/1981	NATIONAL SECURITY LIFE & ANN CO.....	NY.....	YRT/I.....	OL.....	25,000	459	386	10,010	0	0	0	0
66346.....	58-0828824....	06/01/1980	MUNICH AMERICAN REASSURANCE CO.....	GA.....	CO/I.....	OL.....	0	0	6,745	1,102	0	0	0	0
66346.....	58-0828824....	11/01/1968	MUNICH AMERICAN REASSURANCE CO.....	GA.....	YRT/I.....	OL.....	0	0	3,527	2,205	0	0	0	0
88099.....	75-1608507....	08/01/1991	OPTIMUM RE INSURANCE COMPANY.....	TX.....	CO/I.....	OL.....	4,946,504	411,873	424,840	55,697	0	0	0	0
88099.....	75-1608507....	08/01/1991	OPTIMUM RE INSURANCE COMPANY.....	TX.....	ADB/I.....	OL.....	0	0	0	18,256	0	0	0	0
88099.....	75-1608507....	08/01/1991	OPTIMUM RE INSURANCE COMPANY.....	TX.....	YRT/I.....	OL.....	98,723,779	745,364	775,583	1,474,809	0	0	0	0
60003.....	04-2350154....	09/30/1996	PARK AVENUE LIFE INSURANCE COMPANY.....	DE.....	CO/I.....	OL.....	30,794,639	15,626,168	15,898,269	2,871	0	0	0	0
60003.....	04-2350154....	09/30/1996	PARK AVENUE LIFE INSURANCE COMPANY.....	DE.....	ACO/I.....	OL.....	0	318,188	314,342	0	0	0	0	0
60003.....	04-2350154....	09/30/1996	PARK AVENUE LIFE INSURANCE COMPANY.....	DE.....	OTH/I.....	OL.....	0	3,276,680	3,243,887	0	0	0	0	0
68446.....	75-1222043....	01/10/1991	SCOR LIFE INSURANCE COMPANY.....	TX.....	CO/I.....	OL.....	47,764,575	6,320,467	6,408,501	345,374	0	0	0	0
68446.....	75-1222043....	01/10/1991	SCOR LIFE INSURANCE COMPANY.....	TX.....	YRT/I.....	OL.....	504,410	668	626	620	0	0	0	0
82627.....	06-0839705....	11/15/1976	SWISS RE LIFE & HEALTH AMERICA INC.....	CT.....	CO/I.....	OL.....	29,681,873	2,947,856	2,912,565	190,951	0	0	0	0
82627.....	06-0839705....	11/15/1976	SWISS RE LIFE & HEALTH AMERICA INC.....	CT.....	YRT/I.....	OL.....	47,950,436	111,589	139,680	603,725	0	0	0	0
86231.....	39-0989781....	10/01/1988	TRANSAMERICA LIFE INSURANCE CO.....	IA.....	CO/I.....	OL.....	0	0	0	3,109	0	0	0	0
86231.....	39-0989781....	10/01/1988	TRANSAMERICA LIFE INSURANCE CO.....	IA.....	YRT/I.....	OL.....	7,609,347	107,323	108,813	138,723	0	0	0	0
0899999.	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates.....						271,672,740	30,595,161	31,007,705	2,924,834	0	0	0	0
1099999.	Total - General Account - Authorized - Non-Affiliates.....						271,672,740	30,595,161	31,007,705	2,924,834	0	0	0	0
1199999.	Total - General Account - Authorized.....						271,672,740	30,595,161	31,007,705	2,924,834	0	0	0	0
3499999.	Total - General Account - Authorized, Unauthorized and Certified.....						271,672,740	30,595,161	31,007,705	2,924,834	0	0	0	0
6999999.	Total U.S.....						271,672,740	30,595,161	31,007,705	2,924,834	0	0	0	0
9999999.	Total.....						271,672,740	30,595,161	31,007,705	2,924,834	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 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Premiums	9 Unearned Premiums (estimated)	10 Reserve Credit Taken Other Than for Unearned Premiums	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
										11 Current Year	12 Prior Year		
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates													
19194.....	48-0214040....	..11/01/1969	FARMERS ALLIANCE MUTUAL INSURANCE CO.....	KS.....	CO/I.....	OL.....	394	0	0	0	0	0	0
65676.....	35-0472300....	..09/01/1969	LINCOLN NATIONAL LIFE INSURANCE CO.....	IN.....	CO/I.....	OL.....	784	32	59,697	0	0	0	0
82627.....	06-0839705....	..11/15/1976	SWISS RE LIFE & HEALTH AMERICA INC.....	CT.....	CO/I.....	OL.....	194	0	0	0	0	0	0
62235.....	01-0278678....	..09/19/1989	UNUM LIFE INSURANCE CO OF AMERICA.....	ME.....	CO/I.....	OL.....	0	0	311,160	0	0	0	0
70408.....	81-0170040....	..11/15/1976	UNION SECURITY INSURANCE CO.....	KS.....	CO/I.....	OL.....	6,846	0	9,813	0	0	0	0
0899999.	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates.....						8,218	32	380,670	0	0	0	0
1099999.	Total - General Account - Authorized - Non-Affiliates.....						8,218	32	380,670	0	0	0	0
1199999.	Total - General Account - Authorized.....						8,218	32	380,670	0	0	0	0
3499999.	Total - General Account - Authorized, Unauthorized and Certified.....						8,218	32	380,670	0	0	0	0
6999999.	Total - U.S.....						8,218	32	380,670	0	0	0	0
9999999.	Total.....						8,218	32	380,670	0	0	0	0

Sch. S - Pt. 4
NONE

Sch. S - Pt. 5
NONE

SCHEDULE S - PART 6

Five-Year Exhibit of Reinsurance Ceded Business
(000 Omitted)

	1 2015	2 2014	3 2013	4 2012	5 2011
A. OPERATIONS ITEMS					
1. Premiums and annuity considerations for life and accident and health contracts.....	2,933	2,975	3,062	3,145	3,767
2. Commissions and reinsurance expense allowances.....	200	(3,175)	133	33,791	1,059
3. Contract claims.....	2,578	2,936	2,863	5,137	4,673
4. Surrender benefits and withdrawals for life contracts.....	608	648	568	1,170	1,354
5. Dividends to policyholders.....	52	52	54	63	140
6. Reserve adjustments on reinsurance ceded.....	0	0	0	0	0
7. Increase in aggregate reserves for life and accident and health contracts.....	(448)	(808)	(543)	(35,363)	1,151
B. BALANCE SHEET ITEMS					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected.....	161	171	163	161	437
9. Aggregate reserves for life and accident and health contracts.....	27,699	28,147	32,211	32,771	68,150
10. Liability for deposit-type contracts.....	3,279	3,244	3,256	3,273	3,337
11. Contract claims unpaid.....	144	232	369	233	343
12. Amounts recoverable on reinsurance.....	133	312	301	987	50
13. Experience rating refunds due or unpaid.....	0	0	0	0	0
14. Policyholders' dividends (not included in Line 10).....	0	0	0	0	0
15. Commissions and reinsurance expense allowances due.....	0	0	0	0	0
16. Unauthorized reinsurance offset.....	0	0	0	0	0
17. Offset for reinsurance with certified reinsurers.....	0	0	0	0	XXX
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
18. Funds deposited by and withheld from (F).....	0	0	0	0	0
19. Letters of credit (L).....	0	0	0	0	0
20. Trust agreements (T).....	0	0	0	0	0
21. Other (O).....	0	0	0	0	0
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
22. Multiple beneficiary trust.....	0	0	0	0	XXX
23. Funds deposited by and withheld from (F).....	0	0	0	0	XXX
24. Letters of credit (L).....	0	0	0	0	XXX
25. Trust agreements (T).....	0	0	0	0	XXX
26. Other (O).....	0	0	0	0	XXX

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1	2	3
	As Reported (Net of Ceded)	Restatement Adjustments	Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12).....	328,324,901	0	328,324,901
2. Reinsurance (Line 16).....	283,218	0	283,218
3. Premiums and considerations (Line 15).....	700,621	161,287	861,908
4. Net credit for ceded reinsurance.....	XXX	27,681,933	27,681,933
5. All other admitted assets (balance).....	5,513,033	0	5,513,033
6. Total assets excluding Separate Accounts (Line 26).....	334,821,773	27,843,220	362,664,993
7. Separate Account Assets (Line 27).....	0	0	0
8. Total assets (Line 28).....	334,821,773	27,843,220	362,664,993
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9. Contract reserves (Lines 1 and 2).....	249,882,062	27,699,183	277,581,245
10. Liability for deposit-type contracts (Line 3).....	11,368,599	0	11,368,599
11. Claim reserves (Line 4).....	3,615,528	144,037	3,759,565
12. Policyholder dividends/reserves (Lines 5 through 7).....	446,136	0	446,136
13. Premium & annuity considerations received in advance (Line 8).....	46,139	0	46,139
14. Other contract liabilities (Line 9).....	12,481,406	0	12,481,406
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount).....	0	0	0
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount).....	0	0	0
17. Reinsurance with certified reinsurers (Line 24.02 inset amount).....	0	0	0
18. Funds held under reinsurance treaties with certified reinsurers (Line 24.03 inset amount).....	0	0	0
19. All other liabilities (balance).....	17,229,472	0	17,229,472
20. Total liabilities excluding Separate Accounts (Line 26).....	295,069,342	27,843,220	322,912,562
21. Separate Account liabilities (Line 27).....	0	0	0
22. Total liabilities (Line 28).....	295,069,342	27,843,220	322,912,562
23. Capital & surplus (Line 38).....	39,752,432	XXX	39,752,432
24. Total liabilities, capital & surplus (Line 39).....	334,821,774	27,843,220	362,664,994
NET CREDIT FOR CEDED REINSURANCE			
25. Contract reserves.....	27,699,183		
26. Claim reserves.....	144,037		
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.....	27,843,220		
34. Premiums and considerations.....	161,287		
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.....	161,287		
41. Total net credit for ceded reinsurance.....	27,681,933		

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

			Direct Business Only				6
			1	2	3	4	
States, Etc.			Life (Group and Individual)	Annuities (Group and Individual)	Disability Income (Group and Individual)	Long-Term Care (Group and Individual)	Deposit-Type Contracts
							Totals
1.	Alabama.....	AL	51,348	506	0	0	51,854
2.	Alaska.....	AK	761	80	0	0	841
3.	Arizona.....	AZ	29,349	423	0	0	29,772
4.	Arkansas.....	AR	127,994	187	0	0	128,181
5.	California.....	CA	34,690	1,077	0	0	35,767
6.	Colorado.....	CO	67,027	1,375	0	0	68,402
7.	Connecticut.....	CT	3,420	0	0	0	3,420
8.	Delaware.....	DE	2,085	0	0	0	2,085
9.	District of Columbia.....	DC	4,109	0	0	0	4,109
10.	Florida.....	FL	321,682	3,758	0	0	325,440
11.	Georgia.....	GA	128,896	427	0	0	129,323
12.	Hawaii.....	HI	1,291	117	0	0	1,408
13.	Idaho.....	ID	4,328	0	0	0	4,328
14.	Illinois.....	IL	1,260,530	61,609	0	0	1,322,139
15.	Indiana.....	IN	251,957	19,951	0	0	271,908
16.	Iowa.....	IA	189,254	39,585	0	0	228,839
17.	Kansas.....	KS	486,021	4,560	0	0	490,581
18.	Kentucky.....	KY	51,352	1,136	0	0	52,488
19.	Louisiana.....	LA	310,027	1,680	0	0	311,707
20.	Maine.....	ME	12,906	0	0	0	12,906
21.	Maryland.....	MD	8,473	1,410	0	0	9,883
22.	Massachusetts.....	MA	4,729	160	0	0	4,889
23.	Michigan.....	MI	177,451	2,145	0	0	179,596
24.	Minnesota.....	MN	12,278	260	0	0	12,538
25.	Mississippi.....	MS	237,151	1,164	0	0	238,315
26.	Missouri.....	MO	279,602	14,714	0	0	294,316
27.	Montana.....	MT	32,624	660	0	0	33,284
28.	Nebraska.....	NE	88,964	2,652	0	0	91,616
29.	Nevada.....	NV	6,034	0	0	0	6,034
30.	New Hampshire.....	NH	227	0	0	0	227
31.	New Jersey.....	NJ	6,704	962	0	0	7,666
32.	New Mexico.....	NM	30,575	1,475	0	0	32,050
33.	New York.....	NY	10,099	486	0	0	10,585
34.	North Carolina.....	NC	149,425	2,913	0	0	152,338
35.	North Dakota.....	ND	2,446	0	0	0	2,446
36.	Ohio.....	OH	2,388,923	18,997	0	0	2,407,920
37.	Oklahoma.....	OK	238,782	4,679	0	0	243,461
38.	Oregon.....	OR	24,382	0	0	0	24,382
39.	Pennsylvania.....	PA	210,896	34,357	0	0	245,253
40.	Rhode Island.....	RI	485	0	0	0	485
41.	South Carolina.....	SC	164,312	420	0	0	164,732
42.	South Dakota.....	SD	2,691	60	0	0	2,751
43.	Tennessee.....	TN	211,587	945	0	0	212,532
44.	Texas.....	TX	846,530	16,056	0	0	862,586
45.	Utah.....	UT	7,467	470	0	0	7,937
46.	Vermont.....	VT	0	275	0	0	275
47.	Virginia.....	VA	141,147	3,846	0	0	144,993
48.	Washington.....	WA	15,256	288	0	0	15,544
49.	West Virginia.....	WV	556,912	3,183	0	0	560,095
50.	Wisconsin.....	WI	30,100	2,562	0	0	32,662
51.	Wyoming.....	WY	95,882	180	0	0	96,062
52.	American Samoa.....	AS	0	0	0	0	0
53.	Guam.....	GU	411	0	0	0	411
54.	Puerto Rico.....	PR	642	0	0	0	642
55.	US Virgin Islands.....	VI	0	0	0	0	0
56.	Northern Mariana Islands.....	MP	0	0	0	0	0
57.	Canada.....	CAN	0	0	0	0	0
58.	Aggregate Other Alien.....	OT	0	0	0	0	0
59.	Totals.....		9,322,214	251,790	0	0	9,574,004

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
Members														
0.....		0.....	61-1129777..	0.....	0.....		First Southern Bancorp, Inc.....	KY.....	UIP.....	Jesse T. Correll.....	Ownership.....	64.000	Jesse T. Correll.....	0.....
0.....		0.....	61-1233349..	0.....	0.....		First Southern Funding, LLC.....	KY.....	NIA.....	Jesse T. Correll.....	Ownership.....	77.000	Jesse T. Correll.....	0.....
0.....		0.....	61-1396135..	0.....	0.....		First Southern Holdings, LLC.....	KY.....	UIP.....	First Southern Bancorp, Inc.....	Ownership.....	99.000	Jesse T. Correll.....	0.....
0.....		0.....	61-0290000..	702612	0.....		First Southern National Bank.....	KY.....	NIA.....	First Southern Bancorp, Inc.....	Ownership.....	...100.000	Jesse T. Correll.....	0.....
0.....		0.....	20-2907892..	0.....	0000832480	Over the counter	UTG, Inc.....	DE.....	DS.....	First Southern Holdings, LLC.....	Ownership.....	31.850	Jesse T. Correll.....	0.....
0.....		70130..	31-0727974..	0.....	0.....		Universal Guaranty Life Insurance Co.....	OH.....	RE.....	UTG, Inc.....	Ownership.....	...100.000	Jesse T. Correll.....	0.....
0.....		0.....	76-0293391..	0.....	0.....		Imperial Plan, Inc.....	TX.....	DS.....	Universal Guaranty Life Insurance Co.....	Ownership.....	...100.000	Jesse T. Correll.....	0.....
0.....		0.....	46-2793973..	0.....	0.....		BCG Land, LLC.....	KY.....	DS.....	Universal Guaranty Life Insurance Co.....	Ownership.....	...100.000	Jesse T. Correll.....	0.....
0.....		0.....	45-2035659..	0.....	0.....		Collier Beach, LLC.....	SC.....	DS.....	Universal Guaranty Life Insurance Co.....	Ownership.....	...100.000	Jesse T. Correll.....	0.....
0.....		0.....	26-1700910..	0.....	0.....		Cumberland Woodlands, LLC.....	KY.....	DS.....	Universal Guaranty Life Insurance Co.....	Ownership.....	...100.000	Jesse T. Correll.....	0.....
0.....		0.....	61-1697704..	0.....	0.....		Red River Gorge Properties, LLC.....	KY.....	DS.....	Cumberland Woodlands, LLC.....	Ownership.....	...100.000	Jesse T. Correll.....	0.....
0.....		0.....	20-5638300..	0.....	0.....		HPG Acquisitions, LLC.....	TX.....	DS.....	Universal Guaranty Life Insurance Co.....	Ownership.....	74.120	Jesse T. Correll.....	0.....
0.....		0.....	46-1230141..	0.....	0.....		LS Clarkston Investco, LLC.....	DE.....	DS.....	Universal Guaranty Life Insurance Co.....	Ownership.....	50.000	Jesse T. Correll.....	0.....
0.....		0.....	46-5378135..	0.....	0.....		Midland Superblock Partners, LLC.....	TX.....	DS.....	Universal Guaranty Life Insurance Co.....	Ownership.....	74.120	Jesse T. Correll.....	0.....
0.....		0.....	46-1245292..	0.....	0.....		Northwest Florida of Okaloosa Holding, LLC.....	FL.....	DS.....	Universal Guaranty Life Insurance Co.....	Ownership.....	...100.000	Jesse T. Correll.....	0.....
0.....		0.....	36-4800767..	0.....	0.....		NV Holding Group, LLC.....	NV.....	DS.....	Universal Guaranty Life Insurance Co.....	Ownership.....	70.000	Jesse T. Correll.....	0.....
0.....		0.....	20-4148401..	0.....	0.....		Sand Lake, LLC.....	FL.....	DS.....	Universal Guaranty Life Insurance Co.....	Ownership.....	...100.000	Jesse T. Correll.....	0.....
0.....		0.....	20-3705703..	0.....	0.....		Stanford Wilderness Road, LLC.....	KY.....	DS.....	Universal Guaranty Life Insurance Co.....	Ownership.....	...100.000	Jesse T. Correll.....	0.....
0.....		0.....	45-3274236..	0.....	0.....		UG Acquisitions, LLC.....	DE.....	DS.....	Universal Guaranty Life Insurance Co.....	Ownership.....	...100.000	Jesse T. Correll.....	0.....
0.....		0.....	47-1221269..	0.....	0.....		UGL Titusville Marina, LLC.....	FL.....	DS.....	Universal Guaranty Life Insurance Co.....	Ownership.....	...100.000	Jesse T. Correll.....	0.....
0.....		0.....	47-1376544..	0.....	0.....		UGLIC, LLC.....	TX.....	DS.....	Universal Guaranty Life Insurance Co.....	Ownership.....	...100.000	Jesse T. Correll.....	0.....
0.....		0.....	45-4146206..	0.....	0.....		UTG Avalon, LLC.....	FL.....	DS.....	Universal Guaranty Life Insurance Co.....	Ownership.....	...100.000	Jesse T. Correll.....	0.....
0.....		0.....	45-5506139..	0.....	0.....		VMA Mobile, LLC.....	DE.....	DS.....	Universal Guaranty Life Insurance Co.....	Ownership.....	50.000	Jesse T. Correll.....	0.....

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
Affiliated Transactions												
00000.....	46-2793973.....	BCG Land, LLC.....	0	(182,000)	0	0	0	0	.....	.....0	(182,000)	0
00000.....	26-1700910.....	Cumberland Woodlands, LLC.....	(22,492)	(261,508)	0	0	0	0	.....	.....0	(284,000)	0
00000.....	61-0290000.....	First Southern National Bank.....	0	0	0	0	36,622	0	.....	.....0	36,622	0
00000.....	61-1129777.....	First Southern Bancorp, Inc.....	(264,219)	0	0	0	0	0	.....	.....0	(264,219)	0
00000.....	61-1233349.....	First Southern Funding, LLC.....	0	0	2,680,000	0	0	0	.....	.....0	2,680,000	0
00000.....	46-1230141.....	LS Clarkston Investco, LLC.....	(44,829)	(378,333)	0	0	0	0	.....	.....0	(423,162)	0
00000.....	46-5378135.....	Midland Superblock Partners, LLC.....	(887,610)	(891,150)	0	0	0	0	.....	.....0	(1,778,760)	0
00000.....	36-4800767.....	NV Holding Group, LLC.....	(61,021)	(140,000)	2,264,043	0	0	0	.....	.....0	2,063,022	0
00000.....	20-3705703.....	Stanford Wilderness Road, LLC.....	0	800,000	0	0	0	0	.....	.....0	800,000	0
00000.....	47-1376544.....	UGLIC, LLC.....	(56,575)	680,000	0	0	0	0	.....	.....0	623,425	0
00000.....	45-3274236.....	UG Acquisitions, LLC.....	0	(436)	0	0	0	0	.....	.....0	(436)	0
00000.....	UGL - Titusville Marina, LLC.....	.....	.....(104,491)	0	0	0	0	0	.....	.....0	(104,491)	0
00000.....	20-2907892.....	UTG, Inc.....	4,000,000	0	0	0	6,867,882	0	.....	.....1,016,372	11,884,254	0
00000.....	45-4146206.....	UTG Avalon, LLC.....	0	(8,162)	0	0	0	0	.....	.....(1,016,372)	(1,024,534)	0
70130.....	31-0727974.....	Universal Guaranty Life Insurance Company.....	(2,558,763)	381,589	(4,944,043)	0	(6,904,504)	0	.....	.....0	(14,025,721)	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.

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

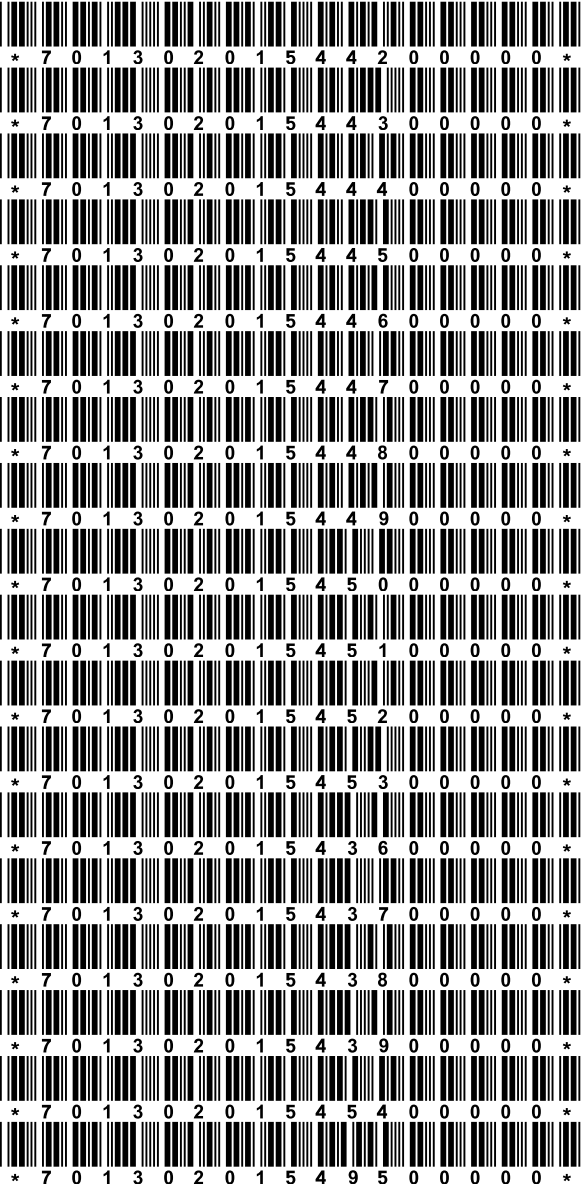
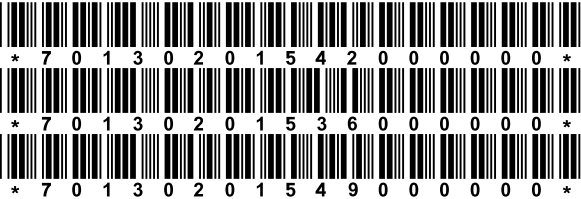
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

EXPLANATIONS:

BAR CODE:

1.
2.
3.
4.
5.
6.
7.
8.
9.
10.
11.
12. The data for this supplement is not required to be filed.
13. The data for this supplement is not required to be filed.
14. The data for this supplement is not required to be filed.
15.
16.
17. The data for this supplement is not required to be filed.
18. The data for this supplement is not required to be filed.
19. The data for this supplement is not required to be filed.
20. The data for this supplement is not required to be filed.
21. The data for this supplement is not required to be filed.
22. The data for this supplement is not required to be filed.
23. The data for this supplement is not required to be filed.
24. The data for this supplement is not required to be filed.
25. The data for this supplement is not required to be filed.
26. The data for this supplement is not required to be filed.
27. The data for this supplement is not required to be filed.
28. The data for this supplement is not required to be filed.
29. The data for this supplement is not required to be filed.
30. The data for this supplement is not required to be filed.
31. The data for this supplement is not required to be filed.
32. The data for this supplement is not required to be filed.
33. The data for this supplement is not required to be filed.
34. The data for this supplement is not required to be filed.



SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

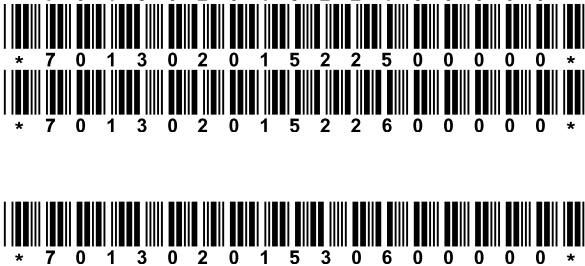
The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in 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.

35.

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



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



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

40.

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



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

45.

46.

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



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

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

51.

**Overflow Page
NONE**

**Overflow Page
NONE**

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 2011	2 2012	3 2013	4 2014	5 2015
1. Prior.....	0	0	0	0	0
2. 2011.....	0	0	0	0	0
3. 2012.....	XXX	0	0	0	0
4. 2013.....	XXX	XXX	0	0	0
5. 2014.....	XXX	XXX	XXX	0	0
6. 2015.....	XXX	XXX	XXX	XXX	0

Section B - Other Accident and Health

1. Prior.....	0	0	0	0	0
2. 2011.....	0	0	0	0	0
3. 2012.....	XXX	0	0	0	0
4. 2013.....	XXX	XXX	0	0	0
5. 2014.....	XXX	XXX	XXX	0	0
6. 2015.....	XXX	XXX	XXX	XXX	0

Section C - Credit Accident and Health

1. Prior.....	0	0	0	0	0
2. 2011.....	0	0	0	0	0
3. 2012.....	XXX	0	0	0	0
4. 2013.....	XXX	XXX	0	0	0
5. 2014.....	XXX	XXX	XXX	0	0
6. 2015.....	XXX	XXX	XXX	XXX	0

SCHEDULE O SUPPLEMENT
SUPPLEMENTAL SCHEDULE O - PART 3

Development of Incurred Losses
(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders and Claim Liability and Reserve Outstanding at End of Year				
	1 2011	2 2012	3 2013	4 2014	5 2015
1. 2011.....	0	0	96	XXX	XXX
2. 2012.....	XXX	0	0	87	XXX
3. 2013.....	XXX	XXX	0	0	77
4. 2014.....	XXX	XXX	XXX	0	0
5. 2015.....	XXX	XXX	XXX	XXX	0

Section B - Other Accident and Health

1. 2011.....	60	2	93	XXX	XXX
2. 2012.....	XXX	84	0	109	XXX
3. 2013.....	XXX	XXX	84	0	122
4. 2014.....	XXX	XXX	XXX	68	0
5. 2015.....	XXX	XXX	XXX	XXX	48

Section C - Credit Accident and Health

1. 2011.....	0	0	0	XXX	XXX
2. 2012.....	XXX	5	0	0	XXX
3. 2013.....	XXX	XXX	0	0	0
4. 2014.....	XXX	XXX	XXX	0	0
5. 2015.....	XXX	XXX	XXX	XXX	0

SCHEDULE O SUPPLEMENT
SUPPLEMENTAL SCHEDULE O - PART 4

Development of Incurred Losses
(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at End of Year				
	1 2011	2 2012	3 2013	4 2014	5 2015
1. 2011.....	0	0	0	0	0
2. 2012.....	XXX	0	0	0	0
3. 2013.....	XXX	XXX	0	0	0
4. 2014.....	XXX	XXX	XXX	0	0
5. 2015.....	XXX	XXX	XXX	XXX	0

Section B - Other Accident and Health

1. 2011.....	0	0	0	0	0
2. 2012.....	XXX	0	0	0	0
3. 2013.....	XXX	XXX	0	0	0
4. 2014.....	XXX	XXX	XXX	0	0
5. 2015.....	XXX	XXX	XXX	XXX	0

Section C - Credit Accident and Health

1. 2011.....	0	0	0	0	0
2. 2012.....	XXX	0	0	0	0
3. 2013.....	XXX	XXX	0	0	0
4. 2014.....	XXX	XXX	XXX	0	0
5. 2015.....	XXX	XXX	XXX	XXX	0

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.....	Other.....	159
2. Ordinary life.....	Other.....	3,255
3. Individual annuity.....	Other.....	87
4. Supplementary contracts.....		0
5. Credit life.....	Other.....	0
6. Group life.....	Other.....	55
7. Group annuities.....		0
8. Group accident and health.....	Standard Valuation.....	60
9. Credit accident and health.....		0
10. Other accident and health.....	Standard Valuation.....	102
11. Total.....		3,718

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

2015 ALPHABETICAL INDEX

LIFE ANNUAL STATEMENT BLANK

Analysis of Increase in Reserves During The Year	7	Schedule D – Part 2 – Section 1	E11
Analysis of Operations By Lines of Business	6	Schedule D – Part 2 – Section 2	E12
Asset Valuation Reserve Default Component	30	Schedule D – Part 3	E13
Asset Valuation Reserve Equity	32	Schedule D – Part 4	E14
Asset Valuation Reserve Replications (Synthetic) Assets	35	Schedule D – Part 5	E15
Asset Valuation Reserve	29	Schedule D – Part 6 – Section 1	E16
Assets	2	Schedule D – Part 6 – Section 2	E16
Cash Flow	5	Schedule D – Summary By Country	SI04
Exhibit 1 – Part 1 – Premiums and Annuity Considerations for Life and Accident and Health Contracts	9	Schedule D – Verification Between Years	SI03
Exhibit 1 – Part 2 – Dividends and Coupons Applied, Reinsurance Commissions and Expense	10	Schedule DA – Part 1	E17
Exhibit 2 – General Expenses	11	Schedule DA – Verification Between Years	SI10
Exhibit 3 – Taxes, Licenses and Fees (Excluding Federal Income Taxes)	11	Schedule DB – Part A – Section 1	E18
Exhibit 4 – Dividends or Refunds	11	Schedule DB – Part A – Section 2	E19
Exhibit 5 – Aggregate Reserve for Life Contracts	12	Schedule DB – Part A – Verification Between Years	SI11
Exhibit 5 – Interrogatories	13	Schedule DB – Part B – Section 1	E20
Exhibit 5A – Changes in Bases of Valuation During The Year	13	Schedule DB – Part B – Section 2	E21
Exhibit 6 – Aggregate Reserves for Accident and Health Contracts	14	Schedule DB – Part B – Verification Between Years	SI11
Exhibit 7 – Deposit-Type Contracts	15	Schedule DB – Part C – Section 1	SI12
Exhibit 8 – Claims for Life and Accident and Health Contracts – Part 1	16	Schedule DB – Part C – Section 2	SI13
Exhibit 8 – Claims for Life and Accident and Health Contracts – Part 2	17	Schedule DB – Part D – Section 1	E22
Exhibit of Capital Gains (Losses)	8	Schedule DB – Part D – Section 2	E23
Exhibit of Life Insurance	25	Schedule DB – Verification	SI14
Exhibit of Net Investment Income	8	Schedule DL – Part 1	E24
Exhibit of Nonadmitted Assets	18	Schedule DL – Part 2	E25
Exhibit of Number of Policies, Contracts, Certificates, Income Payable and Account Values	27	Schedule E – Part 1 – Cash	E26
Five-Year Historical Data	22	Schedule E – Part 2 – Cash Equivalents	E27
Form for Calculating the Interest Maintenance Reserve (IMR)	28	Schedule E – Part 3 – Special Deposits	E28
General Interrogatories	20	Schedule E – Verification Between Years	SI15
Jurat Page	1	Schedule F	36
Liabilities, Surplus and Other Funds	3	Schedule H – Accident and Health Exhibit – Part 1	37
Life Insurance (State Page)	24	Schedule H – Part 2, Part 3 and Part 4	38
Notes To Financial Statements	19	Schedule H – Part 5 – Health Claims	39
Overflow Page For Write-ins	55	Schedule S – Part 1 – Section 1	40
Schedule A – Part 1	E01	Schedule S – Part 1 – Section 2	41
Schedule A – Part 2	E02	Schedule S – Part 2	42
Schedule A – Part 3	E03	Schedule S – Part 3 – Section 1	43
Schedule A – Verification Between Years	SI02	Schedule S – Part 3 – Section 2	44
Schedule B – Part 1	E04	Schedule S – Part 4	45
Schedule B – Part 2	E05	Schedule S – Part 5	46
Schedule B – Part 3	E06	Schedule S – Part 6	47
Schedule B – Verification Between Years	SI02	Schedule S – Part 7	48
Schedule BA – Part 1	E07	Schedule T – Part 2 Interstate Compact	50
Schedule BA – Part 2	E08	Schedule T – Premiums and Annuity Considerations	49
Schedule BA – Part 3	E09	Schedule Y – Information Concerning Activities of Insurer Members of a Holding Company Group	51
Schedule BA – Verification Between Years	SI03	Schedule Y – Part 1A – Detail of Insurance Holding Company System	52
Schedule D – Part 1	E10	Schedule Y – Part 2 – Summary of Insurer’s Transactions With Any Affiliates	53
Schedule D – Part 1A – Section 1	SI05	Summary Investment Schedule	SI01
Schedule D – Part 1A – Section 2	SI08	Summary of Operations	4
		Supplemental Exhibits and Schedules Interrogatories	54