



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Alabama

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	129,188					129,188
2. Annuity considerations	0					0
3. Deposit-type contract funds		XXX			XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)	129,188	0		0	0	129,188
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums	0					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other	0					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0		0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts	4,890					4,890
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0		0	0	0
14. All other benefits, except accident and health						0
15. Totals	4,890	0		0	0	4,890
DETAILS OF WRITE-INS						
1301						
1302						
1303						
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0		0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	230	38,490,264	0	(a)	0	0	0	0	230	38,490,264
21. Issued during year					0	0	0	0	0	0
22. Other changes to in force (Net) .....	.8	5,752,240							.8	.5,752,240
23. In force December 31 of current year	238	44,242,504	0	(a)	0	0	0	0	238	44,242,504

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Alaska

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		5,885		0		5,885
2. Annuity considerations		0				0
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		5,885	0	0	0	5,885
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit				0		0
6.2 Applied to pay renewal premiums		0				0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other		0		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
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts		7,300				7,300
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		7,300	0	0	0	7,300
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	.8	1,930,211	0	(a)	0	0	0	0	8	1,930,211
21. Issued during year									0	0
22. Other changes to in force (Net)	.2	667,489							2	667,489
23. In force December 31 of current year	10	2,597,700	0	(a)	0	0	0	0	10	2,597,700

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF American Samoa

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

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

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

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Arizona

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	127,761					127,761
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)	127,761	0		0	0	127,761
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	401					401
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)	401	0		0	0	401
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	401	0		0	0	401
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts	11,710					11,710
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0		0	0	0
14. All other benefits, except accident and health						0
15. Totals	11,710	0		0	0	11,710
DETAILS OF WRITE-INS						
1301						
1302						
1303						
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0		0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										0
Settled during current year:										0
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
	20. In force December 31, prior year	186	35,843,973	0	(a)	0	0	0	186	35,843,973
21. Issued during year				0		0	0	0	0	0
22. Other changes to in force (Net) .....	.6	5,165,753		0					6	5,165,753
23. In force December 31 of current year	192	41,009,726	0	(a)	0	0	0	0	192	41,009,726

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Arkansas

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		40,953				40,953
2. Annuity considerations						0
3. Deposit-type contract funds			XXX			0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		40,953	0	0	0	40,953
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		25,000				25,000
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts		2,105				2,105
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		27,105	0	0	0	27,105
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	71	14,129,244	0	(a)	0	0	0	0	71	14,129,244
21. Issued during year									0	0
22. Other changes to in force (Net)	(1)	534,996							(1)	534,996
23. In force December 31 of current year	70	14,664,240	0	(a)	0	0	0	0	70	14,664,240

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF California

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	156,546					156,546
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)	156,546		0	0	0	156,546
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	393					393
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)	393		0	0	0	393
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0		0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	393		0	0	0	393
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts	26,752					26,752
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0		0	0	0	0
14. All other benefits, except accident and health						0
15. Totals	26,752		0	0	0	26,752
DETAILS OF WRITE-INS						
1301						
1302						
1303						
1398. Summary of remaining write-ins for Line 13 from overflow page	0		0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0		0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year	185	48,054,610	0	(a)	0	0	0	0	185	48,054,610
21. Issued during year										0
22. Other changes to in force (Net)	10	7,609,878							10	7,609,878
23. In force December 31 of current year	195	55,664,488	0	(a)	0	0	0	0	195	55,664,488

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	948	948			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	948	948	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	948	948	0	0	0

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



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Canada

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	.13,194					.13,194
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)	13,194	0		0	0	13,194
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	.0	.0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	.0	.0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0		0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits	25,000					.25,000
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts	5,098					.5,098
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	.0	.0		0	0	0
14. All other benefits, except accident and health						0
15. Totals	30,098	0		0	0	30,098
DETAILS OF WRITE-INS						
1301						
1302						
1303						
1398. Summary of remaining write-ins for Line 13 from overflow page .....	.0	.0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0		0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	19	2,402,000	0	(a)	0	0	0	0	19	.2,402,000
21. Issued during year									0	0
22. Other changes to in force (Net)	(3)	(245,000)							(3)	(245,000)
23. In force December 31 of current year	16	2,157,000	0	(a)	0	0	0	0	16	2,157,000

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	.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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Colorado

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	.70,876					.70,876
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)	70,876	0		0	0	70,876
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0		0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts	134					134
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0		0	0	0
14. All other benefits, except accident and health						0
15. Totals	134	0		0	0	134
DETAILS OF WRITE-INS						
1301						
1302						
1303						
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0		0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
	20. In force December 31, prior year	108	24,372,500	0	(a)	0	0	0	108	24,372,500
21. Issued during year				0		0	0	0	0	0
22. Other changes to in force (Net) .....	.3	820,856							3	820,856
23. In force December 31 of current year	111	25,193,356	0	(a)	0	0	0	0	111	25,193,356

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Connecticut

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		17,646				17,646
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		17,646	0	0	0	17,646
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts		31,074				31,074
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		31,074	0	0	0	31,074
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
	20. In force December 31, prior year	26	6,625,000	0	(a) 0	0	0	0	26	6,625,000
21. Issued during year										0
22. Other changes to in force (Net)	1	(63,759)							1	(63,759)
23. In force December 31 of current year	27	6,561,241	0	(a) 0	0	0	0	0	27	6,561,241

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Delaware

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	11	1,315,000	0	(a)	0	0	0	0	11	1,315,000
21. Issued during year					0	0	0	0	0	0
22. Other changes to in force (Net) .....	.5	1,155,000							5	1,155,000
23. In force December 31 of current year	16	2,470,000	0	(a)	0	0	0	0	16	2,470,000

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF District of Columbia

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	12	2,235,000	0	(a)	0	0	0	0	12	2,235,000
21. Issued during year					0	0	0	0	0	0
22. Other changes to in force (Net)	(2)	(625,000)							(2)	(625,000)
23. In force December 31 of current year	10	1,610,000	0	(a)	0	0	0	0	10	1,610,000

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Florida

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	.766,438					.766,438
2. Annuity considerations	4,000					4,000
3. Deposit-type contract funds		XXX			XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)	770,438	0		0	0	770,438
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0		0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits .....	.432,000					.432,000
10. Matured endowments						0
11. Annuity benefits .....	.39,727					.39,727
12. Surrender values and withdrawals for life contracts .....	.59,058					.59,058
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0		0	0	0
14. All other benefits, except accident and health						0
15. Totals	530,785	0		0	0	530,785
DETAILS OF WRITE-INS						
1301						
1302						
1303						
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0		0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	1,035	151,589,994	0	(a)	0	0	0	0	1,035	151,589,994
21. Issued during year					0	0	0	0	0	0
22. Other changes to in force (Net) .....	.48	4,832,224							.48	4,832,224
23. In force December 31 of current year	1,083	156,422,218	0	(a)	0	0	0	0	1,083	156,422,218

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	570	.570			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	570	.570		0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	570	.570		0	0

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



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Georgia

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	8,276,658			38,944		8,315,602
2. Annuity considerations	3,620					3,620
3. Deposit-type contract funds		XXX			XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)	8,280,278	0	38,944		0	8,319,222
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits	4,116,181					4,116,181
10. Matured endowments						0
11. Annuity benefits	6,694					6,694
12. Surrender values and withdrawals for life contracts	396,831					396,831
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals	4,519,706	0	0	0	0	4,519,706
DETAILS OF WRITE-INS						
1301						
1302						
1303						
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	6	870,545	0	0	0	0	0	0	6	870,545
17. Incurred during current year	81	3,741,868							.81	3,741,868
Settled during current year:										
18.1 By payment in full	75	4,271,782							.75	4,271,782
18.2 By payment on compromised claims									0	0
18.3 Totals paid	75	4,271,782	0	0	0	0	0	0	.75	4,271,782
18.4 Reduction by compromise									0	0
18.5 Amount rejected .....	.1	50,000							.1	50,000
18.6 Total settlements	76	4,321,782	0	0	0	0	0	0	.76	4,321,782
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	11	290,631	0	0	0	0	0	0	11	290,631
POLICY EXHIBIT										
20. In force December 31, prior year	10,624	1,956,755,283	0	(a)	0	0	0	0	10,624	1,956,755,283
21. Issued during year	1,430	311,457,822							1,430	311,457,822
22. Other changes to in force (Net)	(748)	(106,987,342)							(748)	(106,987,342)
23. In force December 31 of current year	11,306	2,161,225,763	0	(a)	0	0	0	0	11,306	2,161,225,763

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	21,376	21,197		.30,223	.30,223
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	21,376	21,197	0	.30,223	.30,223
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	21,376	21,197	0	.30,223	.30,223

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



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Guam

DURING THE YEAR 2015

LIFE INSURANCE

NAIC Group Code 00267

NAIC Company Code 71218

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Hawaii

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		9,346				9,346
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		9,346	0	0	0	9,346
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
	20. In force December 31, prior year	12	3,080,000	0	(a)	0	0	0	12	3,080,000
21. Issued during year										0
22. Other changes to in force (Net) .....	.4	1,605,000							4	1,605,000
23. In force December 31 of current year	16	4,685,000	0	(a)	0	0	0	0	16	4,685,000

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Idaho

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		7,857				7,857
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		7,857	0	0	0	7,857
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		15,060				15,060
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		15,060	0	0	0	15,060
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
	20. In force December 31, prior year	19	4,882,000	0	(a)	0	0	0	19	4,882,000
21. Issued during year				0		0	0	0	0	0
22. Other changes to in force (Net)	(2)	(515,000)							(2)	(515,000)
23. In force December 31 of current year	17	4,367,000	0	(a)	0	0	0	0	17	4,367,000

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Illinois

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	2,794,535			21,404		2,815,939
2. Annuity considerations	19,900					19,900
3. Deposit-type contract funds		XXX			XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)	2,814,435	0		21,404	0	2,835,839
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	454					454
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)	454	0		0	0	454
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	454	0		0	0	454
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits	1,613,260					1,613,260
10. Matured endowments						0
11. Annuity benefits	109,357					109,357
12. Surrender values and withdrawals for life contracts	66,834					66,834
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0		0	0	0
14. All other benefits, except accident and health						0
15. Totals	1,789,451	0		0	0	1,789,451
DETAILS OF WRITE-INS						
1301						
1302						
1303						
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0		0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	2	747,189	0	0	0	0	0	0	2	747,189
17. Incurred during current year	20	1,519,110							20	1,519,110
Settled during current year:										
18.1 By payment in full	19	1,599,299							19	1,599,299
18.2 By payment on compromised claims									0	0
18.3 Totals paid	19	1,599,299	0	0	0	0	0	0	19	1,599,299
18.4 Reduction by compromise									0	0
18.5 Amount rejected .....	.1	650,000							1	650,000
18.6 Total settlements	20	2,249,299	0	0	0	0	0	0	20	2,249,299
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	2	17,000	0	0	0	0	0	0	2	17,000
POLICY EXHIBIT										
20. In force December 31, prior year	4,095	829,373,602	0	(a)	0	0	0	0	4,095	829,373,602
21. Issued during year	706	151,072,782							706	151,072,782
22. Other changes to in force (Net)	(300)	(50,854,849)							(300)	(50,854,849)
23. In force December 31 of current year	4,501	929,591,535	0	(a)	0	0	0	0	4,501	929,591,535

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	5,453	5,453			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	5,453	5,453		0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	5,453	5,453	0	0	0

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



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	6,937,660			32,048		6,969,708
2. Annuity considerations	161,250					161,250
3. Deposit-type contract funds		XXX			XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)	7,098,910	0		32,048	0	7,130,958
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	4,684					4,684
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)	4,684	0		0	0	4,684
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	4,684	0		0	0	4,684
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits	2,856,833					2,856,833
10. Matured endowments						0
11. Annuity benefits .....	.82,380					.82,380
12. Surrender values and withdrawals for life contracts .....	.777,404					.777,404
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0		0	0	0
14. All other benefits, except accident and health						0
15. Totals	3,716,617	0		0	0	3,716,617
DETAILS OF WRITE-INS						
1301						
1302						
1303						
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0		0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	.5	117,883	0	.0	0	0	0	.0	.5	117,883
17. Incurred during current year	44	2,920,372							.44	2,920,372
Settled during current year:										
18.1 By payment in full	42	2,847,657							.42	2,847,657
18.2 By payment on compromised claims									0	0
18.3 Totals paid	42	2,847,657	0	.0	0	0	0	.42	2,847,657	
18.4 Reduction by compromise									0	0
18.5 Amount rejected .....	.2	110,000						.2	110,000	
18.6 Total settlements	44	2,957,657	0	.0	0	0	0	.44	2,957,657	
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	5	80,598	0	0	0	0	0	5	80,598	
POLICY EXHIBIT										
					No. of Policies					
20. In force December 31, prior year	11,198	1,636,328,480	0	(a)	0	0	0	0	11,198	1,636,328,480
21. Issued during year	1,182	223,481,756			0	0	0	0	1,182	223,481,756
22. Other changes to in force (Net)	(766)	(111,713,226)							(766)	(111,713,226)
23. In force December 31 of current year	11,614	1,748,097,010	0	(a)	0	0	0	0	11,614	1,748,097,010

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	9,500	9,500			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	9,500	9,500		0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	9,500	9,500		0	0

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



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Iowa

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	190,616					190,616
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)	190,616	0		0	0	190,616
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0		0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits	251,753					251,753
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0		0	0	0
14. All other benefits, except accident and health						0
15. Totals	251,753	0		0	0	251,753
DETAILS OF WRITE-INS						
1301						
1302						
1303						
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0		0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	259	53,044,081	0	(a)		0	0	0	259	53,044,081
21. Issued during year	21	9,677,500	0	0		0	0	0	21	9,677,500
22. Other changes to in force (Net)	(14)	95,000							(14)	95,000
23. In force December 31 of current year	266	62,816,581	0	(a)		0	0	0	266	62,816,581

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Kansas

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		27,383				27,383
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		27,383	0	0	0	27,383
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		.50,000				.50,000
10. Matured endowments						0
11. Annuity benefits		0				0
12. Surrender values and withdrawals for life contracts		1,879				1,879
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		51,879	0	0	0	51,879
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	52	10,371,263	0	(a)	0	0	0	0	52	10,371,263
21. Issued during year									0	0
22. Other changes to in force (Net)	(4)	(691,750)							(4)	(691,750)
23. In force December 31 of current year	48	9,679,513	0	(a)	0	0	0	0	48	9,679,513

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	10,349,616			.53,823		10,403,439
2. Annuity considerations	154,749					154,749
3. Deposit-type contract funds		XXX			XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)	10,504,365	0	53,823		0	10,558,188
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	2,438					2,438
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)	2,438	0	0	0	0	2,438
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	2,438	0	0	0	0	2,438
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits	5,005,893			20,000		5,025,893
10. Matured endowments						0
11. Annuity benefits	322,471					322,471
12. Surrender values and withdrawals for life contracts	795,423					795,423
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals	6,123,787	0	20,000	0	0	6,143,787
DETAILS OF WRITE-INS						
1301						
1302						
1303						
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	15	943,738	0	0	0	0	0	0	15	943,738
17. Incurred during current year	116	6,260,708							116	6,260,708
Settled during current year:										
18.1 By payment in full	109	5,937,446							109	5,937,446
18.2 By payment on compromised claims									0	0
18.3 Totals paid	109	5,937,446	0	0	0	0	0	0	109	5,937,446
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	109	5,937,446	0	0	0	0	0	0	109	5,937,446
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	22	1,267,000	0	0	0	0	0	0	22	1,267,000
POLICY EXHIBIT										
20. In force December 31, prior year	17,935	2,394,726,642	0	(a) 0	0	0	0	0	17,935	2,394,726,642
21. Issued during year	1,629	214,317,172							1,629	214,317,172
22. Other changes to in force (Net)	(1,157)	(133,779,398)							(1,157)	(133,779,398)
23. In force December 31 of current year	18,407	2,475,264,416	0	(a) 0	0	0	0	0	18,407	2,475,264,416

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b) .....	.39,352	.39,229		(5,391)	(5,391)
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	.39,352	.39,229	0	(5,391)	(5,391)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	.39,352	.39,229	0	(5,391)	(5,391)

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



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Louisiana

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										0
Settled during current year:										0
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
	20. In force December 31, prior year	33	5,102,000	0	(a)	0	0	0	33	5,102,000
21. Issued during year				0		0	0	0	0	0
22. Other changes to in force (Net)	(1)	(575,000)							(1)	(575,000)
23. In force December 31 of current year	32	4,527,000	0	(a)	0	0	0	0	32	4,527,000

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Maine

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		4,707				4,707
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		4,707	0	0	0	4,707
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		532				532
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		532	0	0	0	532
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		532	0	0	0	532
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301						
1302						
1303						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	14	1,153,138	0	(a)	0	0	0	0	14	1,153,138
21. Issued during year					0	0	0	0	0	0
22. Other changes to in force (Net)		420,205								420,205
23. In force December 31 of current year	14	1,573,343	0	(a)	0	0	0	0	14	1,573,343

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Maryland

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		51,903				51,903
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		51,903	0	0	0	51,903
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		357				357
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		357	0	0	0	357
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		357	0	0	0	357
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		500,000				500,000
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		500,000	0	0	0	500,000
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	79	16,985,040	0	(a)	0	0	0	0	79	16,985,040
21. Issued during year									0	0
22. Other changes to in force (Net)	11	840,878							11	840,878
23. In force December 31 of current year	90	17,825,918	0	(a)	0	0	0	0	90	17,825,918

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Massachusetts

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		17,425				17,425
2. Annuity considerations						0
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		17,425	0	0	0	17,425
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		177				177
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		177	0	0	0	177
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		177	0	0	0	177
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		175,000				175,000
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		175,000	0	0	0	175,000
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	24	5,416,272	0	(a)	0	0	0	0	24	5,416,272
21. Issued during year									0	0
22. Other changes to in force (Net)	.5	656,911							5	656,911
23. In force December 31 of current year	29	6,073,183	0	(a)	0	0	0	0	29	6,073,183

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Michigan

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	4,474,182			42,283		4,516,465
2. Annuity considerations	112,562					112,562
3. Deposit-type contract funds			XXX			0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)	4,586,744		0	42,283		4,629,027
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	1,109					1,109
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)	1,109		0	0		1,109
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0		0	0		0
8. Grand Totals (Lines 6.5 + 7.4)	1,109		0	0		1,109
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits	1,396,734					1,396,734
10. Matured endowments						0
11. Annuity benefits	141,101					141,101
12. Surrender values and withdrawals for life contracts	290,523					290,523
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0		0	0		0
14. All other benefits, except accident and health						0
15. Totals	1,828,358		0	0		1,828,358
DETAILS OF WRITE-INS						
1301						
1302						
1303						
1398. Summary of remaining write-ins for Line 13 from overflow page	0		0	0		0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0		0	0		0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	1	11,143	0	0	0	0	0	0	1	11,143
17. Incurred during current year	20	2,046,569							20	2,046,569
Settled during current year:										
18.1 By payment in full	16	1,447,712							16	1,447,712
18.2 By payment on compromised claims									0	0
18.3 Totals paid	16	1,447,712	0	0	0	0	0	0	16	1,447,712
18.4 Reduction by compromise									0	0
18.5 Amount rejected .....	.1	5,000							1	5,000
18.6 Total settlements	17	1,452,712	0	0	0	0	0	0	17	1,452,712
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	4	605,000	0	0	0	0	0	0	4	605,000
POLICY EXHIBIT										
20. In force December 31, prior year	6,539	1,556,947,349	0	(a)	0	0	0	0	6,539	1,556,947,349
21. Issued during year .....	.782	215,795,973							.782	215,795,973
22. Other changes to in force (Net)	(496)	(96,495,410)							(496)	(96,495,410)
23. In force December 31 of current year	6,825	1,676,247,912	0	(a)	0	0	0	0	6,825	1,676,247,912

(a) Includes Individual Credit Life Insurance: prior year \$, current year \$

Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$, current year \$

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$, current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	2,385	2,385			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	2,385	2,385	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,385	2,385	0	0	0

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



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Minnesota

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		434,893				435,011
2. Annuity considerations		1,425				1,425
3. Deposit-type contract funds			XXX			0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		436,318	0	118	0	436,436
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		100,069				100,069
10. Matured endowments						0
11. Annuity benefits		0				0
12. Surrender values and withdrawals for life contracts		5,518				5,518
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		105,587	0	0	0	105,587
DETAILS OF WRITE-INS						
1301						
1302						
1303						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	1	100,000							1	100,000
Settled during current year:										
18.1 By payment in full	1	100,000							1	100,000
18.2 By payment on compromised claims									0	0
18.3 Totals paid	1	100,000	0	0	0	0	0	0	1	100,000
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	1	100,000	0	0	0	0	0	0	1	100,000
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	663	168,952,789	0	(a)	0	0	0	0	663	168,952,789
21. Issued during year	98	31,950,000			0	0	0	0	98	31,950,000
22. Other changes to in force (Net)	(19)	(4,919,950)							(19)	(4,919,950)
23. In force December 31 of current year	742	195,982,839	0	(a)	0	0	0	0	742	195,982,839

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Mississippi

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	133,809					133,809
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)	133,809	0		0	0	133,809
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0		0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits	3,361					3,361
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0		0	0	0
14. All other benefits, except accident and health						0
15. Totals	3,361	0		0	0	3,361
DETAILS OF WRITE-INS						
1301						
1302						
1303						
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0		0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
	20. In force December 31, prior year	166	38,105,190	0	(a)	0	0	0	166	38,105,190
21. Issued during year				0		0	0	0	0	0
22. Other changes to in force (Net)	13	5,359,144		0					13	5,359,144
23. In force December 31 of current year	179	43,464,334	0	(a)	0	0	0	0	179	43,464,334

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		179,261				179,261
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		179,261	0	0	0	179,261
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		25,000				25,000
10. Matured endowments						0
11. Annuity benefits		0				0
12. Surrender values and withdrawals for life contracts		23,443				23,443
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		48,443	0	0	0	48,443
DETAILS OF WRITE-INS						
1301						
1302						
1303						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0
17. Incurred during current year										0
Settled during current year:										0
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year	115	28,856,024	0	(a)	0	0	0	0	115	28,856,024
21. Issued during year									0	0
22. Other changes to in force (Net)		5,019,021							0	5,019,021
23. In force December 31 of current year	115	33,875,045	0	(a)	0	0	0	0	115	33,875,045

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Montana

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
	20. In force December 31, prior year	13	1,920,000	0	(a) 0	0	0	0	13	1,920,000
21. Issued during year									0	0
22. Other changes to in force (Net)	(1)	(50,000)							(1)	(50,000)
23. In force December 31 of current year	12	1,870,000	0	(a) 0	0	0	0	0	12	1,870,000

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Nebraska

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		8,951				8,951
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		8,951	0	0	0	8,951
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
	20. In force December 31, prior year	12	1,316,000	0	(a)	0	0	0	12	1,316,000
21. Issued during year				0		0	0	0	0	0
22. Other changes to in force (Net) .....	.4	2,370,000							4	2,370,000
23. In force December 31 of current year	16	3,686,000	0	(a)	0	0	0	0	16	3,686,000

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Nevada

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	.60,977					.60,977
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4) .....	.60,977	0		0	0	.60,977
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	.0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	.0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4) .....	.0	0		0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits .....	.25,020					.25,020
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts .....	.2,342					.2,342
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	.0	0		0	0	0
14. All other benefits, except accident and health						0
15. Totals .....	.27,362	0		0	0	.27,362
DETAILS OF WRITE-INS						
1301						
1302						
1303						
1398. Summary of remaining write-ins for Line 13 from overflow page .....	.0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....	.0	0		0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements .....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year	46	.6,074,300	0	(a)	0	0	0	.46	.6,074,300	0
21. Issued during year										
22. Other changes to in force (Net)	(1)	.35,000							(1)	.35,000
23. In force December 31 of current year	45	.6,109,300	0	(a)	0	0	0	0	45	.6,109,300

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	.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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New Hampshire

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		9,910				9,910
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		9,910	0	0	0	9,910
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	15	3,990,720	0	(a)	0	0	0	0	15	3,990,720
21. Issued during year										
22. Other changes to in force (Net)	1	560,000							1	560,000
23. In force December 31 of current year	16	4,550,720	0	(a)	0	0	0	0	16	4,550,720

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New Jersey

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	.36,619					.36,619
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4) .....	.36,619	0		0	0	.36,619
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	.0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	.0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4) .....	.0	0		0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	.0	.0		.0	0	0
14. All other benefits, except accident and health						0
15. Totals .....	.0	0		0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page .....	.0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above) .....	.0	0		0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....	.0	.0	0	.0	0	.0	.0	.0	0	.0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid .....	.0	.0	0	.0	0	.0	.0	.0	0	.0
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements .....	.0	.0	0	.0	0	.0	.0	.0	0	.0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	40	12,595,000	0	(a)	0	0	0	.40	12,595,000	0
21. Issued during year										
22. Other changes to in force (Net)	(1)	(498,300)							(1)	(498,300)
23. In force December 31 of current year	39	12,096,700	0	(a)	0	0	0	0	39	12,096,700

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	.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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		7,676				7,676
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		7,676	0	0	0	7,676
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
	20. In force December 31, prior year	19	3,230,000	0	(a)	0	0	0	19	3,230,000
21. Issued during year										0
22. Other changes to in force (Net)	(5)	(1,750,000)							(5)	(1,750,000)
23. In force December 31 of current year	14	1,480,000	0	(a)	0	0	0	0	14	1,480,000

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

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New York

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		34,472				34,472
2. Annuity considerations		1,000				1,000
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		35,472	0	0	0	35,472
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts		811				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
15. Totals		811	0	0	0	811
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
	20. In force December 31, prior year	86	14,342,614	0	(a)	0	0	0	86	14,342,614
21. Issued during year									0	0
22. Other changes to in force (Net)	1	(2,100,000)							1	(2,100,000)
23. In force December 31 of current year	87	12,242,614	0	(a)	0	0	0	0	87	12,242,614

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF North Carolina

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	195,926					195,926
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)	195,926	0		0	0	195,926
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0		0	0	0
DIRECT CLAIMS AND BENEFITS PAID		25,000				.25,000
9. Death benefits	25,000					
10. Matured endowments						0
11. Annuity benefits	0					0
12. Surrender values and withdrawals for life contracts	17,743					17,743
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0		0	0	0
14. All other benefits, except accident and health						0
15. Totals	42,743	0		0	0	42,743
DETAILS OF WRITE-INS						
1301						
1302						
1303						
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0		0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										0
Settled during current year:										0
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
	20. In force December 31, prior year	345	66,219,011	0	(a)	0	0	0	345	66,219,011
21. Issued during year				0		0	0	0	0	0
22. Other changes to in force (Net) .....	.7	7,283,039							.7	.7,283,039
23. In force December 31 of current year	352	73,502,050	0	(a)	0	0	0	0	352	73,502,050

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	1,148	1,192			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	1,148	1,192	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,148	1,192	0	0	0

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



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		6,844				6,844
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		6,844	0	0	0	6,844
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	10	2,300,000	0	(a)	0	0	0	0	10	2,300,000
21. Issued during year										
22. Other changes to in force (Net)	2	350,000							2	350,000
23. In force December 31 of current year	12	2,650,000	0	(a)	0	0	0	0	12	2,650,000

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Northern Mariana Islands

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

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

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

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

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	41,113,119			2,030,987		43,144,106
2. Annuity considerations	511,187					511,187
3. Deposit-type contract funds		XXX			XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)	41,624,306		0	2,030,987	0	43,655,293
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums				294,720		294,720
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	45,272					45,272
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)	45,272		0	294,720	0	339,992
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0		0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	45,272		0	294,720	0	339,992
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits	18,814,069			432,000		19,246,069
10. Matured endowments						0
11. Annuity benefits	2,843,523					2,843,523
12. Surrender values and withdrawals for life contracts	4,191,811					4,191,811
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
15. Totals	25,849,403		0	432,000	0	26,281,403
DETAILS OF WRITE-INS						
1301						
1302						
1303						
1398. Summary of remaining write-ins for Line 13 from overflow page	0		0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0		0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	32	1,176,920	0	0	0	0	0	0	32	1,176,920
17. Incurred during current year	343	20,392,210			19	458,000			362	20,850,210
Settled during current year:										
18.1 By payment in full	329	19,426,724			18	452,000			347	19,878,724
18.2 By payment on compromised claims									0	0
18.3 Totals paid	329	19,426,724	0	0	18	452,000	0	0	347	19,878,724
18.4 Reduction by compromise									0	0
18.5 Amount rejected	8	485,000			1	6,000			9	491,000
18.6 Total settlements	337	19,911,724	0	0	19	458,000	0	0	356	20,369,724
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	38	1,657,406	0	0	0	0	0	0	38	1,657,406
POLICY EXHIBIT										
20. In force December 31, prior year	55,349	8,806,211,640	0	(a)	0	290,922,400	0	0	55,351	9,097,134,040
21. Issued during year	4,153	898,169,553				36,110,000			4,153	934,279,553
22. Other changes to in force (Net)	(3,275)	(483,052,055)				(32,790,000)			(3,275)	(515,842,055)
23. In force December 31 of current year	56,227	9,221,329,138	0	(a)	0	294,242,400	0	0	56,229	9,515,571,538

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employees Health Benefits Plan premium (b).....					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancelable (b).....					
25.2 Guaranteed renewable (b).....	103,463	102,994		108,781	108,781
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only					
25.5 All other (b).....					
25.6 Totals (sum of Lines 25.1 to 25.5)	103,463	102,994	0	108,781	108,781
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	103,463	102,994	0	108,781	108,781

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



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Oklahoma

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		33,074				33,074
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		33,074	0	0	0	33,074
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	51	9,703,752	0	(a)	0	0	0	0	51	9,703,752
21. Issued during year									0	0
22. Other changes to in force (Net)	(10)	(747,252)							(10)	(747,252)
23. In force December 31 of current year	41	8,956,500	0	(a)	0	0	0	0	41	8,956,500

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Oregon

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		9,579				9,579
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		9,579	0	0	0	9,579
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits		10,000				10,000
12. Surrender values and withdrawals for life contracts		2,871				2,871
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		12,871	0	0	0	12,871
DETAILS OF WRITE-INS						
1301						
1302						
1303						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	17	2,530,000	0	(a)		0	0	0	17	2,530,000
21. Issued during year						0	0	0	0	0
22. Other changes to in force (Net) .....	.9	3,630,000							.9	3,630,000
23. In force December 31 of current year	26	6,160,000	0	(a)		0	0	0	26	6,160,000

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Pennsylvania

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	2,593,499			13,820		2,607,319
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)	2,593,499	0		13,820	0	2,607,319
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	463					463
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)	463	0		0	0	463
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	463	0		0	0	463
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits	268,617					268,617
10. Matured endowments						0
11. Annuity benefits	0					0
12. Surrender values and withdrawals for life contracts	46,008					46,008
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0		0	0	0
14. All other benefits, except accident and health						0
15. Totals	314,625	0		0	0	314,625
DETAILS OF WRITE-INS						
1301						
1302						
1303						
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0		0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	7	1,191,128							7	1,191,128
Settled during current year:										
18.1 By payment in full	3	268,628							3	268,628
18.2 By payment on compromised claims									0	0
18.3 Totals paid	3	268,628	0	0	0	0	0	0	3	268,628
18.4 Reduction by compromise									0	0
18.5 Amount rejected	2	507,500							2	507,500
18.6 Total settlements	5	776,128	0	0	0	0	0	0	5	776,128
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	2	415,000	0	0	0	0	0	0	2	415,000
POLICY EXHIBIT										
					No. of Policies					
20. In force December 31, prior year	1,679	418,003,070	0	(a)	0	0	0	0	1,679	418,003,070
21. Issued during year	808	110,493,488	0		0	0	0	0	808	110,493,488
22. Other changes to in force (Net)	(109)	(13,170,997)							(109)	(13,170,997)
23. In force December 31 of current year	2,378	515,325,561	0	(a)	0	0	0	0	2,378	515,325,561

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Puerto Rico

DURING THE YEAR 2015

LIFE INSURANCE

NAIC Group Code 00267

NAIC Company Code 71218

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Rhode Island

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

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

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

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF South Carolina

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	1,551,616			12,503		1,564,119
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)	1,551,616	0		12,503	0	1,564,119
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0		0	0	0
DIRECT CLAIMS AND BENEFITS PAID		226,957				226,957
9. Death benefits	226,957					
10. Matured endowments						0
11. Annuity benefits	10,719					10,719
12. Surrender values and withdrawals for life contracts	10,945					10,945
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0		0	0	0
14. All other benefits, except accident and health						0
15. Totals	248,621	0		0	0	248,621
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0		0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	2	24,814	0	0	0	0	0	0	2	24,814
17. Incurred during current year	11	212,385							11	212,385
Settled during current year:										
18.1 By payment in full	10	143,499							10	143,499
18.2 By payment on compromised claims									0	0
18.3 Totals paid	10	143,499	0	0	0	0	0	0	10	143,499
18.4 Reduction by compromise									0	0
18.5 Amount rejected	2	90,000							2	90,000
18.6 Total settlements	12	233,499	0	0	0	0	0	0	12	233,499
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	1	3,700	0	0	0	0	0	0	1	3,700
POLICY EXHIBIT										
20. In force December 31, prior year	1,933	282,666,616	0	(a)	0	0	0	0	1,933	282,666,616
21. Issued during year	550	107,691,790							550	107,691,790
22. Other changes to in force (Net)	(133)	(7,621,552)							(133)	(7,621,552)
23. In force December 31 of current year	2,350	382,736,854	0	(a)	0	0	0	0	2,350	382,736,854

(a) Includes Individual Credit Life Insurance: prior year \$ _____, current year \$ _____

Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ _____, current year \$ _____

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$ _____, current year \$ _____

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	309	309		0	0
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	309	309	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	309	309	0	0	0

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



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		7,952				7,952
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		7,952	0	0	0	7,952
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts		2,380				2,380
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		2,380	0	0	0	2,380
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
	20. In force December 31, prior year	19	3,213,000	0	(a)	0	0	0	19	3,213,000
21. Issued during year										0
22. Other changes to in force (Net)		710,000								710,000
23. In force December 31 of current year	19	3,923,000	0	(a)	0	0	0	0	19	3,923,000

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	10,028,987			28,529		10,057,516
2. Annuity considerations	57,524					57,524
3. Deposit-type contract funds		XXX			XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)	10,086,511	0		28,529	0	10,115,040
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	302					302
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)	302	0		0	0	302
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	302	0		0	0	302
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits	10,401,509					10,401,509
10. Matured endowments						0
11. Annuity benefits	352,188					352,188
12. Surrender values and withdrawals for life contracts	449,994					449,994
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0		0	0	0
14. All other benefits, except accident and health						0
15. Totals	11,203,691	0		0	0	11,203,691
DETAILS OF WRITE-INS						
1301						
1302						
1303						
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0		0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	12	574,970	0	0	0	0	0	0	12	574,970
17. Incurred during current year	106	10,404,496							106	10,404,496
Settled during current year:										
18.1 By payment in full	109	9,964,777							109	9,964,777
18.2 By payment on compromised claims									0	0
18.3 Totals paid	109	9,964,777	0	0	0	0	0	0	109	9,964,777
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	109	9,964,777	0	0	0	0	0	0	109	9,964,777
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	9	1,014,689	0	0	0	0	0	0	9	1,014,689
POLICY EXHIBIT										
20. In force December 31, prior year	14,433	2,276,780,225	0	(a)	0	0	0	0	14,433	2,276,780,225
21. Issued during year	1,069	236,022,120							1,069	236,022,120
22. Other changes to in force (Net)	(1,925)	(137,919,260)							(1,925)	(137,919,260)
23. In force December 31 of current year	13,577	2,374,883,085	0	(a)	0	0	0	0	13,577	2,374,883,085

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	26,874	26,887		16,167	16,167
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	26,874	26,887	0	16,167	16,167
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	26,874	26,887	0	16,167	16,167

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



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		215,697				215,697
2. Annuity considerations		50				50
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		215,747	0	0	0	215,747
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		51,014				51,014
10. Matured endowments						0
11. Annuity benefits		0				0
12. Surrender values and withdrawals for life contracts		5,811				5,811
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
15. Totals		56,825	0	0	0	56,825
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	356	66,201,948	0	(a)	0	0	0	0	356	66,201,948
21. Issued during year									0	0
22. Other changes to in force (Net)	25	10,013,725							25	10,013,725
23. In force December 31 of current year	381	76,215,673	0	(a)	0	0	0	0	381	76,215,673

(a) Includes Individual Credit Life Insurance: prior year \$ _____, current year \$ _____

Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ _____, current year \$ _____

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$ _____, current year \$ _____

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF U.S. Virgin Islands

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		335				335
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		335	0	0	0	335
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

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

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Utah

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		20,111				20,111
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		20,111	0	0	0	20,111
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year	25	7,046,700	0	(a)	0	0	0	0	25	7,046,700
21. Issued during year										
22. Other changes to in force (Net)	(3)	(661,100)							(3)	(661,100)
23. In force December 31 of current year	22	6,385,600	0	(a)	0	0	0	0	22	6,385,600

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Vermont

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		2,506				2,506
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		2,506	0	0	0	2,506
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid		0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements		0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	11	685,475	0	(a)	0	0	0	0	11	685,475
21. Issued during year									0	0
22. Other changes to in force (Net)	(2)	(215,000)							(2)	(215,000)
23. In force December 31 of current year	9	470,475	0	(a)	0	0	0	0	9	470,475

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Virginia

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		841,020		8,875		849,895
2. Annuity considerations		7,200				7,200
3. Deposit-type contract funds			XXX			0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		848,220	0	8,875	0	857,095
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		622				622
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		622	0	0	0	622
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		622	0	0	0	622
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits .....		.55,121				.55,121
10. Matured endowments						0
11. Annuity benefits		0				0
12. Surrender values and withdrawals for life contracts .....		.56,215				.56,215
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		111,336	0	0	0	111,336
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	.3	.55,000							.3	.55,000
Settled during current year:										
18.1 By payment in full .....	.3	.55,000							.3	.55,000
18.2 By payment on compromised claims									0	0
18.3 Totals paid .....	.3	.55,000	0	0	0	0	0	0	.3	.55,000
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements .....	.3	.55,000	0	0	0	0	0	0	.3	.55,000
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year	796	.152,623,880	0	(a)	0	0	0	0	.796	.152,623,880
21. Issued during year .....	.280	.49,555,126							.280	.49,555,126
22. Other changes to in force (Net)	(44)	(6,314,043)							(44)	(6,314,043)
23. In force December 31 of current year	1,032	195,864,963	0	(a)	0	0	0	0	1,032	195,864,963

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	1,008	1,008			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	1,008	1,008	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,008	1,008	0	0	0

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



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Washington

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		20,138				20,138
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		20,138	0	0	0	20,138
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	40	9,637,500	0	(a)	0	0	0	0	40	9,637,500
21. Issued during year					0	0	0	0	0	0
22. Other changes to in force (Net) .....	.7	3,407,809							.7	3,407,809
23. In force December 31 of current year	47	13,045,309	0	(a)	0	0	0	0	47	13,045,309

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF West Virginia

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		149,827				149,827
2. Annuity considerations		1,517				1,517
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		151,344	0	0	0	151,344
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		243				243
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		243	0	0	0	243
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		243	0	0	0	243
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		128,015				128,015
10. Matured endowments						0
11. Annuity benefits		2,500				2,500
12. Surrender values and withdrawals for life contracts		6,509				6,509
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		137,024	0	0	0	137,024
DETAILS OF WRITE-INS						
1301						
1302						
1303						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										0
Settled during current year:										0
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
	20. In force December 31, prior year	168	27,002,350	0	(a)	0	0	0	168	27,002,350
21. Issued during year									0	0
22. Other changes to in force (Net)	10	1,814,802							10	1,814,802
23. In force December 31 of current year	178	28,817,152	0	(a)	0	0	0	0	178	28,817,152

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)	957	957			
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	957	957	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	957	957	0	0	0

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



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Wisconsin

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	1,153,002			1,271		1,154,273
2. Annuity considerations	(3,200)					(3,200)
3. Deposit-type contract funds		XXX			XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)	1,149,802	0		1,271	0	1,151,073
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0		0	0	0
DIRECT CLAIMS AND BENEFITS PAID		.515,946				.515,946
9. Death benefits .....	.515,946					
10. Matured endowments						0
11. Annuity benefits	22,424					22,424
12. Surrender values and withdrawals for life contracts	30,292					30,292
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0		0	0	0
14. All other benefits, except accident and health						0
15. Totals	568,662	0		0	0	568,662
DETAILS OF WRITE-INS						
1301						
1302						
1303						
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0		0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	.3	2,015,000							.3	2,015,000
Settled during current year:										
18.1 By payment in full .....	.2	.515,000							.2	.515,000
18.2 By payment on compromised claims									0	0
18.3 Totals paid .....	.2	.515,000	0	0	0	0	0	0	.2	.515,000
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements .....	.2	.515,000	0	0	0	0	0	0	.2	.515,000
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	1	1,500,000	0	0	0	0	0	0	1	1,500,000
POLICY EXHIBIT										
20. In force December 31, prior year	2,177	424,374,258	0	(a)	0	0	0	0	2,177	424,374,258
21. Issued during year .....	.208	.66,167,786							.208	.66,167,786
22. Other changes to in force (Net)	(313)	(25,447,500)							(313)	(25,447,500)
23. In force December 31 of current year	2,072	465,094,544	0	(a)	0	0	0	0	2,072	465,094,544

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Wyoming

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		3,391				3,391
2. Annuity considerations			XXX		XXX	0
3. Deposit-type contract funds						0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		3,391	0	0	0	3,391
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit						0
6.2 Applied to pay renewal premiums						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4 Other						0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit						0
7.2 Applied to provide paid-up annuities						0
7.3 Other						0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										0
18.2 By payment on compromised claims										0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise										0
18.5 Amount rejected										0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	7	1,345,000	0	(a)	0	0	0	0	7	1,345,000
21. Issued during year					0	0	0	0	0	0
22. Other changes to in force (Net)	(1)	(100,000)							(1)	(100,000)
23. In force December 31 of current year	6	1,245,000	0	(a)	0	0	0	0	6	1,245,000

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	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 care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Grand Aliens

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		3,276	0	0	0	3,276
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)		3,276	0	0	0	3,276
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.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		.0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	16. Unpaid December 31, prior year	.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 (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year	.4	420,000	0	(a)	0	0	0	0	4	420,000
21. Issued during year	.0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(2)	(225,000)	0	0	0	0	0	0	(2)	(225,000)
23. In force December 31 of current year	2	195,000	0	(a)	0	0	0	0	2	195,000

(a) Includes Individual Credit Life Insurance: prior year \$ 0, current year \$ 0

Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ 0, current year \$ 0

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS prior year \$ 0, current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	.0	0	0	0	0
24.1 Federal Employees 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 care products 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Consolidated

DURING THE YEAR 2015

NAIC Group Code 00267

LIFE INSURANCE

NAIC Company Code 71218

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1	2	3	4	5
		Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	93,366,656		0	2,284,605	0	95,651,261
2. Annuity considerations	1,032,784		0	0	0	1,032,784
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)	94,399,440		0	2,284,605	0	96,684,045
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	294,720	0	294,720
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	57,447		0	0	0	57,447
6.4 Other	0		0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	57,447		0	294,720	0	352,167
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)	57,447		0	294,720	0	352,167
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits	46,847,298		0	452,000	0	47,299,298
10. Matured endowments	0		0	0	0	0
11. Annuity benefits	4,198,198		0	0	0	4,198,198
12. Surrender values and withdrawals for life contracts	7,329,708		0	0	0	7,329,708
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	58,375,204		0	452,000	0	58,827,204
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page	0		0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0		0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	75	4,467,202	0	0	0	0	0	0	75	4,467,202
17. Incurred during current year	755	50,858,846	0	0	19	458,000	0	0	774	51,316,846
Settled during current year:										
18.1 By payment in full	718	46,577,524	0	0	18	452,000	0	0	736	47,029,524
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	718	46,577,524	0	0	18	452,000	0	0	736	47,029,524
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	17	1,897,500	0	0	1	6,000	0	0	18	1,903,500
18.6 Total settlements	735	48,475,024	0	0	19	458,000	0	0	754	48,933,024
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	95	6,851,024	0	0	0	0	0	0	95	6,851,024
POLICY EXHIBIT										
20. In force December 31, prior year	131,372	21,637,805,008	0	(a)	0	290,922,400	0	0	131,374	21,928,727,408
21. Issued during year	12,916	2,625,852,868	0		0	36,110,000	0	0	12,916	2,661,962,868
22. Other changes to in force (Net)	(9,154)	(1,114,628,773)	0		0	(32,790,000)	0	0	(9,154)	(1,147,418,773)
23. In force December 31 of current year	135,134	23,149,029,103	0	(a)	2	294,242,400	0	0	135,136	23,443,271,503

(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	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 Employees 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)	213,343	212,629	0	149,780	149,780
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)	213,343	212,629	0	149,780	149,780
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	213,343	212,629	0	149,780	149,780

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

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

Interest Maintenance Reserve

	1 Amount
1. Reserve as of December 31, prior year	1,828,210
2. Current year's realized pre-tax capital gains/(losses) of \$ (189,033) transferred into the reserve net of taxes of \$	(189,033)
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)	1,639,177
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)	563,988
6. Reserve as of December 31, current year (Line 4 minus Line 5)	1,075,189

Amortization

Year of Amortization	1 Reserve as of December 31, Prior Year	2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3 Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	4 Balance Before Reduction for Current Year's Amortization (Cols. 1+2+3)
1. 2015	584,910	(20,922)	0	563,988
2. 2016	443,102	(32,185)	0	410,918
3. 2017	332,050	(20,702)	0	311,348
4. 2018	215,537	(20,588)	0	194,950
5. 2019	141,066	(20,608)	0	120,458
6. 2020	109,089	(20,752)	0	88,336
7. 2021	72,561	(18,639)	0	53,922
8. 2022	32,864	(14,911)	0	17,953
9. 2023	(11,783)	(10,873)	0	(22,656)
10. 2024	(35,735)	(6,679)	0	(42,414)
11. 2025	(34,363)	(2,175)	0	(36,538)
12. 2026	(27,912)	0	0	(27,912)
13. 2027	(18,486)	0	0	(18,486)
14. 2028	(3,359)	0	0	(3,359)
15. 2029	2,234	0	0	2,234
16. 2030	(3,285)	0	0	(3,285)
17. 2031	(5,679)	0	0	(5,679)
18. 2032	(3,388)	0	0	(3,388)
19. 2033	(822)	0	0	(822)
20. 2034	2,561	0	0	2,561
21. 2035	6,852	0	0	6,852
22. 2036	7,420	0	0	7,420
23. 2037	4,107	0	0	4,107
24. 2038	1,293	0	0	1,293
25. 2039	66	0	0	66
26. 2040	0	0	0	0
27. 2041	0	0	0	0
28. 2042	0	0	0	0
29. 2043	0	0	0	0
30. 2044	0	0	0	0
31. 2045 and Later	0	0	0	0
32. Total (Lines 1 to 31)	1,810,902	(189,033)	0	1,621,869

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

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	1,991,801	0	1,991,801	638,316	0	638,316	2,630,117
2. Realized capital gains/(losses) net of taxes-General Account			0			0	0
3. Realized capital gains/(losses) net of taxes-Separate Accounts			0			0	0
4. Unrealized capital gains/(losses) net of deferred taxes-General Account			0			0	0
5. Unrealized capital gains/(losses) net of deferred taxes-Separate Accounts			0			0	0
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves			0			0	0
7. Basic contribution	405,311	0	405,311	0	0	0	405,311
8. Accumulated balances (Lines 1 through 5 - 6 + 7)	2,397,113	0	2,397,113	638,316	0	638,316	3,035,429
9. Maximum reserve	1,876,182	0	1,876,182	0	0	0	1,876,182
10. Reserve objective	1,325,151	0	1,325,151	0	0	0	1,325,151
11. 20% of (Line 10 - Line 8)	(214,392)	0	(214,392)	(127,663)	0	(127,663)	(342,056)
12. Balance before transfers (Lines 8 + 11)	2,182,721	0	2,182,721	510,653	0	510,653	2,693,373
13. Transfers			0			0	0
14. Voluntary contribution			0			0	0
15. Adjustment down to maximum/up to zero			0			0	0
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	2,182,721	0	2,182,721	510,653	0	510,653	2,693,373

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1+2+3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4x5)	7 Factor	8 Amount (Cols. 4x7)	9 Factor	10 Amount (Cols. 4x9)
LONG-TERM BONDS												
1	1	Exempt Obligations	32,920,976	XXX	XXX	32,920,976	0.0000	0	0.0000	0	0.0000	0
2		Highest Quality	204,707,709	XXX	XXX	204,707,709	0.0004	81,883	0.0023	470,828	0.0030	614,123
3		High Quality	46,433,359	XXX	XXX	46,433,359	0.0019	88,223	0.0058	269,313	0.0090	417,900
4		Medium Quality	7,837,302	XXX	XXX	7,837,302	0.0093	72,887	0.0230	180,258	0.0340	266,468
5		Low Quality	6,923,473	XXX	XXX	6,923,473	0.0213	147,470	0.0530	366,944	0.0750	519,260
6		Lower Quality	343,707	XXX	XXX	343,707	0.0432	14,848	0.1100	37,808	0.1700	58,430
7		In or Near Default	XXX	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
8		Total Unrated Multi-class Securities Acquired by Conversion	XXX	XXX	XXX	0	XXX	XXX	XXX	XXX	XXX	XXX
9		Total Bonds (Sum of Lines 1 through 8)	299,166,526	XXX	XXX	299,166,526	XXX	405,311	XXX	1,325,151	XXX	1,876,182
PREFERRED STOCK												
10	1	Highest Quality	XXX	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
11		High Quality	XXX	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
12		Medium Quality	XXX	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
13		Low Quality	XXX	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
14		Lower Quality	XXX	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
15		In or Near Default	XXX	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
16		Affiliated Life with AVR	XXX	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
17	Total Preferred Stocks (Sum of Lines 10 through 16)		0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
SHORT-TERM BONDS												
18	1	Exempt Obligations	XXX	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
19		Highest Quality	XXX	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
20		High Quality	XXX	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
21		Medium Quality	XXX	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
22		Low Quality	XXX	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
23		Lower Quality	XXX	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
24		In or Near Default	XXX	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
25	Total Short-Term Bonds (Sum of Lines 18 through 24)		0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
DERIVATIVE INSTRUMENTS												
26	1	Exchange Traded	XXX	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
27		Highest Quality	XXX	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
28		High Quality	XXX	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
29		Medium Quality	XXX	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
30		Low Quality	XXX	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
31		Lower Quality	XXX	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
32		In or Near Default	XXX	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)		299,166,526	XXX	XXX	299,166,526	XXX	405,311	XXX	1,325,151	XXX	1,876,182

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1+2+3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4x5)	7 Factor	8 Amount (Cols. 4x7)	9 Factor	10 Amount (Cols. 4x9)
		MORTGAGE LOANS										
		In Good Standing:										
35		Farm Mortgages - CM1 - Highest Quality			XXX	0	0.0010	.0	0.0050	.0	0.0065	.0
36		Farm Mortgages - CM2 - High Quality			XXX	0	0.0035	.0	0.0100	.0	0.0130	.0
37		Farm Mortgages - CM3 - Medium Quality			XXX	0	0.0060	.0	0.0175	.0	0.0225	.0
38		Farm Mortgages - CM4 - Low Medium Quality			XXX	0	0.0105	.0	0.0300	.0	0.0375	.0
39		Farm Mortgages - CM5 - Low Quality			XXX	0	0.0160	.0	0.0425	.0	0.0550	.0
40		Residential Mortgages - Insured or Guaranteed			XXX	0	0.0003	.0	0.0006	.0	0.0010	.0
41		Residential Mortgages - All Other			XXX	0	0.0013	.0	0.0030	.0	0.0040	.0
42		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0003	.0	0.0006	.0	0.0010	.0
43		Commercial Mortgages - All Other - CM1 - Highest Quality			XXX	0	0.0010	.0	0.0050	.0	0.0065	.0
44		Commercial Mortgages - All Other - CM2 - High Quality			XXX	0	0.0035	.0	0.0100	.0	0.0130	.0
45		Commercial Mortgages - All Other - CM3 - Medium Quality			XXX	0	0.0060	.0	0.0175	.0	0.0225	.0
46		Commercial Mortgages - All Other - CM4 - Low Medium Quality			XXX	0	0.0105	.0	0.0300	.0	0.0375	.0
47		Commercial Mortgages - All Other - CM5 - Low Quality			XXX	0	0.0160	.0	0.0425	.0	0.0550	.0
		Overdue, Not in Process:										
48		Farm Mortgages			XXX	0	0.0420	.0	0.0760	.0	0.1200	.0
49		Residential Mortgages - Insured or Guaranteed			XXX	0	0.0005	.0	0.0012	.0	0.0020	.0
50		Residential Mortgages - All Other			XXX	0	0.0025	.0	0.0058	.0	0.0090	.0
51		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0005	.0	0.0012	.0	0.0020	.0
52		Commercial Mortgages - All Other			XXX	0	0.0420	.0	0.0760	.0	0.1200	.0
		In Process of Foreclosure:										
53		Farm Mortgages			XXX	0	0.0000	.0	0.1700	.0	0.1700	.0
54		Residential Mortgages - Insured or Guaranteed			XXX	0	0.0000	.0	0.0040	.0	0.0040	.0
55		Residential Mortgages - All Other			XXX	0	0.0000	.0	0.0130	.0	0.0130	.0
56		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0000	.0	0.0040	.0	0.0040	.0
57		Commercial Mortgages - All Other			XXX	0	0.0000	.0	0.1700	.0	0.1700	.0
58		Total Schedule B Mortgages (Sum of Lines 35 through 57)	0	0	XXX	0	XXX	0	XXX	0	XXX	0
59		Schedule DA Mortgages			XXX	0	0.0030	0	0.0100	0	0.0130	0
60		Total Mortgage Loans on Real Estate (Lines 58 + 59)	0	0	XXX	0	XXX	0	XXX	0	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Col. 1 + 2 + 3)	BASIC CONTRIBUTION		RESERVE OBJECTIVE		MAXIMUM RESERVE	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
1		COMMON STOCK										
2		Unaffiliated Public		XXX	XXX	0	0.0000	0	0.1300 ^(a)	0	0.1300 ^(a)	
3		Unaffiliated Private		XXX	XXX	0	0.0000	0	0.1600	0	0.1600	
4		Federal Home Loan Bank		XXX	XXX	0	0.0000	0	0.0050	0	0.0080	
5		Affiliated Life with AVR	9,965,251	XXX	XXX	9,965,251	0.0000	0	0.0000	0	0.0000	
6		Affiliated Investment Subsidiary:										
7		Fixed Income Exempt Obligations	0	0	0	0	XXX	0	XXX	0	XXX	
8		Fixed Income Highest Quality	0	0	0	0	XXX	0	XXX	0	XXX	
9		Fixed Income High Quality	0	0	0	0	XXX	0	XXX	0	XXX	
10		Fixed Income Medium Quality	0	0	0	0	XXX	0	XXX	0	XXX	
11		Fixed Income Low Quality	0	0	0	0	XXX	0	XXX	0	XXX	
12		Fixed Income Lower Quality	0	0	0	0	XXX	0	XXX	0	XXX	
13		Fixed Income In or Near Default	0	0	0	0	XXX	0	XXX	0	XXX	
14		Unaffiliated Common Stock Public					0.0000	0	0.1300 ^(a)	0	0.1300 ^(a)	
15		Unaffiliated Common Stock Private					0.0000	0	0.1600	0	0.1600	
16		Real Estate					0	0	0	0	0	
17		Affiliated-Certain Other (See SVO Purposes & Procedures Manual)	0	XXX	XXX	0	0.0000	0	0.1300	0	0.1300	
18		Affiliated - All Other	0	XXX	XXX	0	0.0000	0	0.1600	0	0.1600	
19		Total Common Stock (Sum of Lines 1 through 16)	9,965,251	0	0	9,965,251	XXX	0	XXX	0	XXX	
20		REAL ESTATE										
21		Home Office Property (General Account only)					0	0.0000	0	0.0750	0	
22		Investment Properties					0	0.0000	0	0.0750	0	
23		Properties Acquired in Satisfaction of Debt					0	0.0000	0	0.1100	0	
24		Total Real Estate (Sum of Lines 18 through 20)	0	0	0	0	XXX	0	XXX	0	XXX	
25		OTHER INVESTED ASSETS										
26		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS										
27		Exempt Obligations		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	
28		Highest Quality		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	
29		High Quality		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	
30		Medium Quality		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	
31		Low Quality		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	
32		Lower Quality		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	
33		In or Near Default		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	
34		Total with Bond Characteristics (Sum of Lines 22 through 28)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Col. 1 + 2 + 3)	BASIC CONTRIBUTION		RESERVE OBJECTIVE		MAXIMUM RESERVE	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
30	1	INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS										
		Highest Quality		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	
		High Quality		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	
		Medium Quality		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	
		Low Quality		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	
		Lower Quality		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	
		In or Near Default		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	
35	6	Affiliated Life with AVR		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	
		Total with Preferred Stock Characteristics (Sum of Lines 30 through 36)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	
38		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS										
		In Good Standing Affiliated:										
		Mortgages - CM1 - Highest Quality			XXX	0	0.0010	0	0.0050	0	0.0065	
		Mortgages - CM2 - High Quality			XXX	0	0.0035	0	0.0100	0	0.0130	
		Mortgages - CM3 - Medium Quality			XXX	0	0.0060	0	0.0175	0	0.0225	
		Mortgages - CM4 - Low Medium Quality			XXX	0	0.0105	0	0.0300	0	0.0375	
		Mortgages - CM5 - Low Quality			XXX	0	0.0160	0	0.0425	0	0.0550	
43		Residential Mortgages - Insured or Guaranteed			XXX	0	0.0003	0	0.0006	0	0.0010	
		Residential Mortgages - All Other			XXX	0	0.0013	0	0.0030	0	0.0040	
		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0003	0	0.0006	0	0.0010	
		Overdue, Not in Process Affiliated:										
		Farm Mortgages			XXX	0	0.0420	0	0.0760	0	0.1200	
		Residential Mortgages - Insured or Guaranteed			XXX	0	0.0005	0	0.0012	0	0.0020	
		Residential Mortgages - All Other			XXX	0	0.0025	0	0.0058	0	0.0090	
51		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0005	0	0.0012	0	0.0020	
		Commercial Mortgages - All Other			XXX	0	0.0420	0	0.0760	0	0.1200	
		In Process of Foreclosure Affiliated:										
		Farm Mortgages			XXX	0	0.0000	0	0.1700	0	0.1700	
		Residential Mortgages - Insured or Guaranteed			XXX	0	0.0000	0	0.0040	0	0.0040	
		Residential Mortgages - All Other			XXX	0	0.0000	0	0.0130	0	0.0130	
		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0000	0	0.0040	0	0.0040	
56		Commercial Mortgages - All Other			XXX	0	0.0000	0	0.1700	0	0.1700	
		Total Affiliated (Sum of Lines 38 through 55)	0	0	XXX	0	XXX	0	XXX	0	XXX	
		Unaffiliated - In Good Standing With Covenants			XXX	0	0.0000 (c)	0	0.0000 (c)	0	0.0000 (c)	
		Unaffiliated - In Good Standing Defeased With Government Securities			XXX	0	0.0010	0	0.0050	0	0.0065	
		Unaffiliated - In Good Standing - Primarily Senior			XXX	0	0.0035	0	0.0100	0	0.0130	
		Unaffiliated - In Good Standing All Other			XXX	0	0.0060	0	0.0175	0	0.0225	
		Unaffiliated - Overdue, Not in Process			XXX	0	0.0420	0	0.0760	0	0.1200	
63		Unaffiliated - In Process of Foreclosure			XXX	0	0.0000	0	0.1700	0	0.1700	
		Total Unaffiliated (Sum of Lines 57 through 62)	0	0	XXX	0	XXX	0	XXX	0	XXX	
64		Total with Mortgage Loan Characteristics (Lines 56 + 63)	0	0	XXX	0	XXX	0	XXX	0	XXX	

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Col. 1 + 2 + 3)	BASIC CONTRIBUTION		RESERVE OBJECTIVE		MAXIMUM RESERVE	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
65		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK										
66		Unaffiliated Public	XXX	XXX		0	0.0000	0	0.1300 (a)	0	0.1300 (a)	
67		Unaffiliated Private	XXX	XXX		0	0.0000	0	0.1600	0	0.1600	
68		Affiliated Life with AVR	XXX	XXX		0	0.0000	0	0.0000	0	0.0000	
69		Affiliated Certain Other (See SVO Purposes & Procedures Manual)	XXX	XXX		0	0.0000	0	0.1300	0	0.1300	
70		Affiliated Other - All Other	XXX	XXX		0	0.0000	0	0.1600	0	0.1600	
		Total with Common Stock Characteristics (Sum of Lines 65 through 69)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	
71		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE										
72		Home Office Property (General Account only)				0	0.0000	0	0.0750	0	0.0750	
73		Investment Properties				0	0.0000	0	0.0750	0	0.0750	
74		Properties Acquired in Satisfaction of Debt				0	0.0000	0	0.1100	0	0.1100	
		Total with Real Estate Characteristics (Sum of Lines 71 through 73)	0	0	0	0	XXX	0	XXX	0	XXX	
75		LOW INCOME HOUSING TAX CREDIT INVESTMENTS										
76		Guaranteed Federal Low Income Housing Tax Credit	0			0	0.0003	0	0.0006	0	0.0010	
77		Non-guaranteed Federal Low Income Housing Tax Credit	0			0	0.0063	0	0.0120	0	0.0190	
78		Guaranteed State Low Income Housing Tax Credit	0			0	0.0003	0	0.0006	0	0.0010	
79		Non-guaranteed State Low Income Housing Tax Credit	0			0	0.0063	0	0.0120	0	0.0190	
80		All Other Low Income Housing Tax Credit	0			0	0.0273	0	0.0600	0	0.0975	
		Total LIHTC (Sum of Lines 75 through 79)	0	0	0	0	XXX	0	XXX	0	XXX	
81		ALL OTHER INVESTMENTS										
82		NAIC 1 Working Capital Finance Investments		XXX		0	0.0000	0	0.0037	0	0.0037	
83		NAIC 2 Working Capital Finance Investments		XXX		0	0.0000	0	0.0120	0	0.0120	
84		Other Invested Assets - Schedule BA		XXX		0	0.0000	0	0.1300	0	0.1300	
85		Other Short-Term Invested Assets - Schedule DA		XXX		0	0.0000	0	0.1300	0	0.1300	
86		Total All Other (Sum of Lines 81, 82, 83 and 84)	0	XXX	0	0	XXX	0	XXX	0	XXX	
		Total Other Invested Assets - Schedules BA & DA (Sum of Lines 29, 37, 64, 70, 74, 80 and 85)	0	0	0	0	XXX	0	XXX	0	XXX	

(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.

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

Asset Valuation Reserve (Continued)

Basic Contribution, Reserve Objective and Maximum Reserve Calculations Replications (Synthetic) Assets

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

SCHEDULE F

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

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

	Total		Group Accident and Health		Credit Accident and Health (Group and Individual)		Collectively Renewable		Non-Cancelable		Guaranteed Renewable		Other Individual Contracts					
													13 Amount	14 %	15 Amount	16 %	17 Amount	18 %
	1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %						
PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS																		
1. Premiums written	105,076	XXX		XXX	XXX		XXX		XXX		105,076	XXX		XXX		XXX		XXX
2. Premiums earned	100,424	XXX		XXX	XXX		XXX		XXX		100,424	XXX		XXX		XXX		XXX
3. Incurred claims	88,001	87.6		0.0	0.0		0.0		0.0		88,001	87.6		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
5. Incurred claims and cost containment expenses (Lines 3 and 4)	88,001	87.6	0	0.0	0	0.0	0	0.0	0	0.0	88,001	87.6	0	0.0	0	0.0	0	0.0
6. Increase in contract reserves	(110,209)	(109.7)	0	0.0	0	0.0	0	0.0	0	0.0	(110,209)	(109.7)	0	0.0	0	0.0	0	0.0
7. Commissions (a)	(9,383)	(9.3)		0.0	0.0		0.0		0.0		(9,383)	(9.3)		0.0		0.0		0.0
8. Other general insurance expenses	27,118	27.0		0.0	0.0		0.0		0.0		27,118	27.0		0.0		0.0		0.0
9. Taxes, licenses and fees	0	0.0		0.0	0.0		0.0		0.0		0.0	0.0		0.0		0.0		0.0
10. Total other expenses incurred	17,735	17.7	0	0.0	0	0.0	0	0.0	0	0.0	17,735	17.7	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	104,897	104.5	0	0.0	0	0.0	0	0.0	0	0.0	104,897	104.5	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
14. Gain from underwriting after dividends or refunds	104,897	104.5	0	0.0	0	0.0	0	0.0	0	0.0	104,897	104.5	0	0.0	0	0.0	0	0.0
DETAILS OF WRITE-INS																		
1101.																		
1102.																		
1103.																		
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. Totals (Lines 1101 through 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 \$ reported as "Contract, membership and other fees retained by agents."

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)

	1 Total	2 Group Accident and Health	3 Credit A&H (Group and Individual)	4 Collectively Renewable	Other Individual Contracts				
					5 Non-Cancelable	6 Guaranteed Renewable	7 Non-Renewable for Stated Reasons Only	8 Other Accident Only	9 All Other
PART 2 - RESERVES AND LIABILITIES									
A. Premium Reserves:									
1. Unearned premiums	25,576					25,576			
2. Advance premiums	0								
3. Reserve for rate credits	0								
4. Total premium reserves, current year	25,576	0	0	0	0	25,576	0	0	0
5. Total premium reserves, prior year	30,228	0	0	0	0	30,228	0	0	0
6. Increase in total premium reserves	(4,652)	0	0	0	0	(4,652)	0	0	0
B. Contract Reserves:									
1. Additional reserves (a)	514,964					514,964			
2. Reserve for future contingent benefits	0								
3. Total contract reserves, current year	514,964	0	0	0	0	514,964	0	0	0
4. Total contract reserves, prior year	625,173	0	0	0	0	625,173	0	0	0
5. Increase in contract reserves	(110,209)	0	0	0	0	(110,209)	0	0	0
C. Claim Reserves and Liabilities:									
1. Total current year	130,870					130,870			
2. Total prior year	118,573	0	0	0	0	118,573	0	0	0
3. Increase	12,297	0	0	0	0	12,297	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	52,991					52,991			
1.2 On claims incurred during current year	22,710					22,710			
2. Claim reserves and liabilities, December 31, current year:									
2.1 On claims incurred prior to current year	91,609					91,609			
2.2 On claims incurred during current year	39,261					39,261			
3. Test:									
3.1 Lines 1.1 and 2.1	144,600	0	0	0	0	144,600	0	0	0
3.2 Claim reserves and liabilities, December 31 prior year	118,570	0	0	0	0	118,570	0	0	0
3.3 Line 3.1 minus Line 3.2	26,030	0	0	0	0	26,030	0	0	0

PART 4 - REINSURANCE									
A. Reinsurance Assumed:									
1. Premiums written	0								
2. Premiums earned	0								
3. Incurred claims	0								
4. Commissions	0								
B. Reinsurance Ceded:									
1. Premiums written	107,553					107,553			
2. Premiums earned	107,553					107,553			
3. Incurred claims	226,202					226,202			
4. Commissions	9,383					9,383			

(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.....			314,203	314,203
2. Beginning Claim Reserves and Liabilities.....	.0	0	329,895	329,895
3. Ending Claim Reserves and Liabilities.....			449,318	449,318
4. Claims Paid.....	.0	0	194,780	194,780
B. Assumed Reinsurance:				
5. Incurred Claims.....			0	0
6. Beginning Claim Reserves and Liabilities.....	.0	0	0	0
7. Ending Claim Reserves and Liabilities.....			0	0
8. Claims Paid.....	.0	0	0	0
C. Ceded Reinsurance:				
9. Incurred Claims.....			226,202	226,202
10. Beginning Claim Reserves and Liabilities.....	.0	0	211,325	211,325
11. Ending Claim Reserves and Liabilities.....			318,448	318,448
12. Claims Paid.....	.0	0	119,079	119,079
D. Net:				
13. Incurred Claims.....	.0	0	88,001	88,001
14. Beginning Claim Reserves and Liabilities.....	.0	0	118,570	118,570
15. Ending Claim Reserves and Liabilities.....	.0	0	130,870	130,870
16. Claims Paid.....	.0	0	75,701	75,701
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred Claims and Cost Containment Expenses.....			88,001	88,001
18. Beginning Reserves and Liabilities.....	.0	0	118,570	118,570
19. Ending Reserves and Liabilities.....			130,870	130,870
20. Paid Claims and Cost Containment Expenses	0	0	75,701	75,701

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

SCHEDULE S - PART 1 - SECTION 1

Reinsurance Assumed Life Insurance, Annuities, Deposit Funds and Other Liabilities

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Amount of In Force at End of Year	8 Reserve	9 Premiums	10 Reinsurance Payable on Paid and Unpaid Losses	11 Modified Coinsurance Reserve	12 Funds Withheld Under Coinsurance
General Account - Non-Affiliates - Non-U.S. Non-Affiliates											
00000.....AA-319073.....05/21/2003.....TRANSAMERICA INTL RE (BERMUDA) LTD.....				BMU.....	YRT/I.....	1,887,090,600	4,911,756	3,128,719	462,018		
099999 - General Account - Non-U.S. Non-Affiliates						1,887,090,600	4,911,756	3,128,719	462,018	0	0
109999 - General Account - Non-Affiliates - Total Non-Affiliates						1,887,090,600	4,911,756	3,128,719	462,018	0	0
119999 - General Account - Total General Account						1,887,090,600	4,911,756	3,128,719	462,018	0	0
249999 - Total Non-U.S. (Sum of 0699999, 0999999, 1799999 and 2099999)						1,887,090,600	4,911,756	3,128,719	462,018	0	0
9999999 Total (Sum of 1199999 and 2299999)						1,887,090,600	4,911,756	3,128,719	462,018	0	0

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

SCHEDULE S - PART 1 - SECTION 2

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

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

SCHEDULE S - PART 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 Unpaid Losses
Life and Annuity - Affiliates - U.S. - Captive						
14917	46-1454886	01/01/2012	GRANGE LIFE REINS CO.	VT		1,400,000
0199999	- Life and Annuity - Affiliates - U.S. - Captive					0
0399999	- Life and Annuity - Affiliates - U.S. - Total					0
0799999	- Life and Annuity - Affiliates - Total Affiliates					1,400,000
Life and Annuity - Non-Affiliates - U.S. Non-Affiliates						
65676	35-0472300	07/01/1996	LINCOLN NATL LIFE INS CO.	IN	50,000	50,000
60895	35-0145825	03/01/1999	AMERICAN UNITED LIFE INS CO.	IN	697,618	450,000
88099	75-1608507	01/01/1992	OPTIMUM RE INS CO	TX	450,000	
86258	13-2572994	01/01/2012	GENERAL RE LIFE CORP	CT	179,898	495,000
80659	38-0397420	01/01/2012	US BUSINESS OF CANADA LIFE ASSUR CO	MI	534,160	925,000
88340	59-2859797	01/01/2012	HANNOVER LIFE REASSUR CO OF AMER	FL	276,152	430,000
82627	.06-0839705	01/01/1992	SWISS RE LIFE & HLTH AMER INC	MO	50,000	
68276	48-1024691	01/01/2002	EMPLOYERS REASSUR CORP	KS	75,000	
97071	13-3126819	05/21/2003	SCOR GLOBAL LIFE USA REINS CO	DE	1,400,000	574,666
0899999	- Life and Annuity - Non-Affiliates - U.S. Non-Affiliates					3,712,828
1099999	- Life and Annuity - Non-Affiliates - Total Non-Affiliates					3,712,828
1199999	- Life and Annuity - Total Life and Annuity					3,712,828
2399999	- Total U.S. (Sum of 0399999, 0899999, 1499999 and 1999999)					4,324,666
9999999	Totals—Life, Annuity and Accident and Health (Sum of 1199999 and 2299999)					3,712,828
						4,324,666

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

SCHEDULE S - PART 3 - SECTION 1

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount in Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9 Current Year	10 Prior Year		12 Current Year	13 Prior Year		
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates														
82627	06-0839705	07/01/1996	SWISS RE LIFE & HLTH AMER INC.	MO	YRT/G	OL	251,930,000			.867,835				
60895	35-0145825	01/01/2000	AMERICAN UNITED LIFE INS CO	IN	CO/I	OL	39,110,009			.746,331				
60895	35-0145825	03/01/1999	AMERICAN UNITED LIFE INS CO	IN	CO/I	OL	27,343,731			.151,109				
60895	35-0145825	01/01/2000	AMERICAN UNITED LIFE INS CO	IN	YRT/I	OL	839,848,977	4,729,504	4,805,489	1,624,258				
60895	35-0145825	09/01/1977	AMERICAN UNITED LIFE INS CO	IN	YRT/I	OL	63,095,218	394,212	391,067	.573,184				
88099	75-1608507	01/01/1992	OPTIMUM RE INS CO	TX	YRT/I	OL	154,934,307	729,113	723,596	.814,232				
82627	06-0839705	01/01/1992	SWISS RE LIFE & HLTH AMER INC	MO	YRT/I	OL	44,582,000	196,914	195,132	.89,210				
82627	06-0839705	01/01/1992	SWISS RE LIFE & HLTH AMER INC	MO	YRT/I	OL	2,656,883			.18,389				
82627	06-0839705	07/01/1996	SWISS RE LIFE & HLTH AMER INC	MO	YRT/I	OL	2,873,814	16,708	18,186	.24,673				
82627	06-0839705	04/01/1981	SWISS RE LIFE & HLTH AMER INC	MO	ADB/I	OL	253,176,002	164,095	159,697	.164,383				
97071	13-3126819	03/01/1999	SCOR GLOBAL LIFE USA REINS CO	DE	YRT/I	OL	68,284,125	908,745	1,017,151	.104,833				
97071	13-3126819	03/01/1999	SCOR GLOBAL LIFE USA REINS CO	DE	YRT/I	OL	0			0				
65676	35-0472300	07/01/1996	LINCOLN NATL LIFE INS CO	IN	YRT/I	OL	439,328,145	1,936,579	1,859,303	.891,786				
68276	48-1024691	01/01/2002	EMPLOYERS REASSUR CORP	KS	CO/I	OL	34,515,583			.292,450				
97071	13-3126819	05/21/2003	SCOR GLOBAL LIFE USA REINS CO	DE	CO/I	OL	4,504,568,324	141,156,956	136,207,982	.8,549,108				
97071	13-3126819	05/21/2003	SCOR GLOBAL LIFE USA REINS CO	DE	YRT/I	OL	243,336,190	768,558	829,537	.411,317				
97071	13-3126819	09/01/2007	SCOR GLOBAL LIFE USA REINS CO	DE	CO/I	OL	2,808,347,485	42,605,760	39,539,856	.5,551,323				
97071	13-3126819	09/01/2007	SCOR GLOBAL LIFE USA REINS CO	DE	YRT/I	OL	189,261,655	327,550	312,790	.227,125				
97071	13-3126819	09/01/2007	SCOR GLOBAL LIFE USA REINS CO	DE	CO/I	OL	235,110,999	3,428,844	3,131,796	.318,324				
97071	13-3126819	09/01/2007	SCOR GLOBAL LIFE USA REINS CO	DE	YRT/I	OL	14,076,500	14,121	13,867	.9,136				
97071	13-3126819	03/01/2004	SCOR GLOBAL LIFE USA REINS CO	DE	YRT/I	OL	144,082,188			.626,744				
97071	13-3126819	05/01/2004	SCOR GLOBAL LIFE USA REINS CO	DE	YRT/I	OL	207,547,513	.509,144	.514,398	.398,719				
97071	13-3126819	08/01/2010	SCOR GLOBAL LIFE USA REINS CO	DE	YRT/I	OL	47,633,576	.255	.182	.235,636				
97071	13-3126819	01/01/2009	SCOR GLOBAL LIFE USA REINS CO	DE	YRT/I	OL	85,970,786			.308,136				
97071	13-3126819	08/01/2010	SCOR GLOBAL LIFE USA REINS CO	DE	YRT/I	OL	58,546,201	.32,487	.29,264	.90,567				
97071	13-3126819	11/01/2010	SCOR GLOBAL LIFE USA REINS CO	DE	YRT/I	OL	57,039,508	130,513	123,446	.114,587				
97071	13-3126819	11/01/2010	SCOR GLOBAL LIFE USA REINS CO	DE	YRT/I	OL	2,090,094	6,505		.17,263				
97071	13-3126819	11/01/2010	SCOR GLOBAL LIFE USA REINS CO	DE	CO/I	OL	519,573,541	5,803,942	4,810,642	.935,505				
97071	13-3126819	11/01/2010	SCOR GLOBAL LIFE USA REINS CO	DE	YRT/I	OL	9,311,982	80,398	71,423	.29,479				
88340	59-2859797	01/01/2012	HANNOVER LIFE REASSUR CO OF AMER	FL	YRT/I	OL	61,612,287			.84,623				
88340	59-2859797	01/01/2012	HANNOVER LIFE REASSUR CO OF AMER	FL	YRT/I	AXXX	29,665,181			.61,521				
80659	38-0397420	01/01/2012	US BUSINESS OF CANADA LIFE ASSUR CO	MI	YRT/I	OL	36,350,836			.32,486				
80659	38-0397420	01/01/2012	US BUSINESS OF CANADA LIFE ASSUR CO	MI	YRT/I	AXXX	.78,332,473			.80,425				
88340	59-2859797	01/01/2012	HANNOVER LIFE REASSUR CO OF AMER	FL	YRT/I	XXXL	1,059,242,729	1,032,447	.720,732	.495,422				
80659	38-0397420	01/01/2012	US BUSINESS OF CANADA LIFE ASSUR CO	MI	YRT/I	XXXL	2,000,542,481	1,892,556	1,342,456	.538,722				
86258	13-2572994	01/01/2012	GENERAL RE LIFE CORP	CT	YRT/I	XXXL	1,089,405,033	1,055,443	.744,483	.297,680				
0899999	General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates						15,703,326,357	207,921,350	197,562,475	25,776,523	0	0	0	0
1099999	General Account - Authorized - Non-Affiliates - Total Authorized Non-Affiliates						15,703,326,357	207,921,350	197,562,475	25,776,523	0	0	0	0
1199999	General Account - Authorized - Total General Account Authorized						15,703,326,357	207,921,350	197,562,475	25,776,523	0	0	0	0
General Account - Unauthorized - Affiliates - U.S. - Captive														
14917	46-1454886	01/01/2012	GRANGE LIFE REINS CO	VT	YRT/I	AXXX	184,241,828	19,470,257	12,628,897	6,167,420				
14917	46-1454886	01/01/2012	GRANGE LIFE REINS CO	VT	YRT/I	XXXL	3,389,295,014	.41,048,567	.27,234,802	.13,409,284				
1299999	General Account - Unauthorized - Affiliates - U.S. - Captive						3,573,536,842	60,518,824	39,863,699	19,576,704	0	0	0	0
1499999	General Account - Unauthorized - Affiliates - U.S. - Total						3,573,536,842	60,518,824	39,863,699	19,576,704	0	0	0	0
1899999	General Account - Unauthorized - Affiliates - Total Unauthorized Affiliates						3,573,536,842	60,518,824	39,863,699	19,576,704	0	0	0	0
2299999	General Account - Unauthorized - Total General Account Unauthorized						3,573,536,842	60,518,824	39,863,699	19,576,704	0	0	0	0
3499999	General Account - Total General Account Authorized, Unauthorized and Certified						19,276,863,199	268,440,174	237,426,174	45,353,227	0	0	0	0
6999999	Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3799999, 4299999, 4899999, 5399999, 5999999 and 6499999)						19,276,863,199	268,440,174	237,426,174	45,353,227	0	0	0	0
9999999	9999999 Total (Sum of 3499999 and 6899999)						19,276,863,199	268,440,174	237,426,174	45,353,227	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

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													
60895.....35-0145825.....09/01/1977	AMERICAN UNITED LIFE INS CO.	.IN.	OTH/G.	CMM.	1,167								
97071.....13-3126819.....01/01/2001	SCOR GLOBAL LIFE USA REINS CO.	DE	YRT/I.	LTDI	90,913				.910,436				
82627.....06-0839705.....10/01/2010	SWISS RE LIFE & HLTH AMER INC.	MO	YRT/I.	LTDI	2,567				3,709				
82627.....06-0839705.....01/01/1992	SWISS RE LIFE & HLTH AMER INC.	MO	YRT/I.	A	12,906								
0899999 - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates							107,553	0	914,145	0	0	0	0
1099999 - General Account - Authorized - Non-Affiliates - Total Authorized Non-Affiliates							107,553	0	914,145	0	0	0	0
1199999 - General Account - Authorized - Total General Account Authorized							107,553	0	914,145	0	0	0	0
3499999 - General Account - Total General Account Authorized, Unauthorized and Certified							107,553	0	914,145	0	0	0	0
6999999 - Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3799999, 4299999, 4899999, 5399999, 5999999 and 6499999)							107,553	0	914,145	0	0	0	0
9999999 Totals							107,553	0	914,145	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

SCHEDULE S - PART 4

Reinsurance Ceded To Unauthorized Companies

Issuing or Confirming Bank Reference Number (a)	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
0000001 0001	2	075000022	U.S. Bank National Association	44,131.976
.....
.....
.....

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

SCHEDULE S - PART 5

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

NONE

(a)	Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount

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	45,466	40,659	37,519	36,656	28,979
2. Commissions and reinsurance expense allowances	14,625	14,420	12,910	11,858	5,286
3. Contract claims	27,815	23,329	21,912	21,827	24,107
4. Surrender benefits and withdrawals for life contracts		0	0	0	0
5. Dividends to policyholders		0	0	0	0
6. Reserve adjustments on reinsurance ceded	0	0	0	0	0
7. Increase in aggregate reserves for life and accident and health contracts		0	0	0	0
B. BALANCE SHEET ITEMS					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected	2,145	2,499	2,457	2,504	2,589
9. Aggregate reserves for life and accident and health contracts	269,354	238,232	209,853	169,794	135,724
10. Liability for deposit-type contracts		0	0	0	0
11. Contract claims unpaid	4,331	2,952	1,495	2,780	5,267
12. Amounts recoverable on reinsurance	3,713	2,250	5,597	5,427	6,884
13. Experience rating refunds due or unpaid		0	0	0	0
14. Policyholders' dividends (not included in Line 10)		0	0	0	0
15. Commissions and reinsurance expense allowances due		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)	17,743	1,142	0	1,662	0
19. Letters of credit (L)	44,132	38,820	24,500	14,500	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

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	342,837,221		342,837,221
2. Reinsurance (Line 16)	4,947,813	(4,947,813)	0
3. Premiums and considerations (Line 15)	37,748,479	2,145,429	39,893,908
4. Net credit for ceded reinsurance	XXX	271,576,117	271,576,117
5. All other admitted assets (balance)	7,692,384		7,692,384
6. Total assets excluding Separate Accounts (Line 26)	393,225,897	268,773,733	661,999,630
7. Separate Account assets (Line 27)	0		0
8. Total assets (Line 28)	393,225,897	268,773,733	661,999,630
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9. Contract reserves (Lines 1 and 2)	300,314,141	264,443,089	564,757,230
10. Liability for deposit-type contracts (Line 3)	362,073		362,073
11. Claim reserves (Line 4)	3,527,398	4,330,644	7,858,042
12. Policyholder dividends/reserves (Lines 5 through 7)	331,401		331,401
13. Premium & annuity considerations received in advance (Line 8)	259,094		259,094
14. Other contract liabilities (Line 9)	3,010,311		3,010,311
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
18. Funds held under reinsurance treaties with Certified Reinsurers (Line 24.03 inset amount)	0		0
19. All other liabilities (balance)	42,966,404		42,966,404
20. Total liabilities excluding Separate Accounts (Line 26)	350,770,822	268,773,733	619,544,555
21. Separate Account liabilities (Line 27)	0		0
22. Total liabilities (Line 28)	350,770,822	268,773,733	619,544,555
23. Capital & surplus (Line 38)	42,455,075	XXX	42,455,075
24. Total liabilities, capital & surplus (Line 39)	393,225,897	268,773,733	661,999,630
NET CREDIT FOR CEDED REINSURANCE			
25. Contract reserves	264,443,089		
26. Claim reserves	4,330,644		
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	4,947,813		
32. Other ceded reinsurance recoverables	0		
33. Total ceded reinsurance recoverables	273,721,546		
34. Premiums and considerations	2,145,429		
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 payable/offsets	2,145,429		
41. Total net credit for ceded reinsurance	271,576,117		

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

SCHEDULE T – PART 2
INTERSTATE COMPACT – EXHIBIT OF PREMIUMS WRITTEN

Allocated By States and Territories

States, Etc.	Direct Business Only					
	1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1. Alabama	AL	129,188	.0		.0	129,188
2. Alaska	AK	5,885	.0		.0	5,885
3. Arizona	AZ	127,761	.0		.0	127,761
4. Arkansas	AR	40,953	.0		.0	40,953
5. California	CA	156,546	.0		.0	156,546
6. Colorado	CO	70,876	.0		.0	70,876
7. Connecticut	CT	17,646	.0		.0	17,646
8. Delaware	DE	9,431	.0		.0	9,431
9. District of Columbia	DC	3,436	.0		.0	3,436
10. Florida	FL	766,438	4,000		.0	770,438
11. Georgia	GA	8,315,602	3,620		.0	8,319,222
12. Hawaii	HI	9,346	.0		.0	9,346
13. Idaho	ID	7,857	.0		.0	7,857
14. Illinois	IL	2,815,939	19,900		.0	2,835,839
15. Indiana	JN	6,969,708	161,250		.0	7,130,958
16. Iowa	JA	190,616	.0		.0	190,616
17. Kansas	KS	27,383	.0		.0	27,383
18. Kentucky	KY	10,403,439	154,749		.0	10,558,188
19. Louisiana	LA	15,166	.0		.0	15,166
20. Maine	ME	4,707	.0		.0	4,707
21. Maryland	MD	51,903	.0		.0	51,903
22. Massachusetts	MA	17,425	.0		.0	17,425
23. Michigan	MI	4,516,465	112,562		.0	4,629,027
24. Minnesota	MN	435,011	1,425		.0	436,436
25. Mississippi	MS	133,809	.0		.0	133,809
26. Missouri	MO	179,261	.0		.0	179,261
27. Montana	MT	9,079	.0		.0	9,079
28. Nebraska	NE	8,951	.0		.0	8,951
29. Nevada	NV	60,977	.0		.0	60,977
30. New Hampshire	NH	9,910	.0		.0	9,910
31. New Jersey	NJ	36,619	.0		.0	36,619
32. New Mexico	NM	7,676	.0		.0	7,676
33. New York	NY	34,472	1,000		.0	35,472
34. North Carolina	NC	195,926	.0		.0	195,926
35. North Dakota	ND	6,844	.0		.0	6,844
36. Ohio	OH	43,144,106	511,187		.0	43,655,293
37. Oklahoma	OK	33,074	.0		.0	33,074
38. Oregon	OR	9,579	.0		.0	9,579
39. Pennsylvania	PA	2,607,319	.0		.0	2,607,319
40. Rhode Island	RI	2,702	.0		.0	2,702
41. South Carolina	SC	1,564,119	.0		.0	1,564,119
42. South Dakota	SD	7,952	.0		.0	7,952
43. Tennessee	TN	10,057,516	.57,524		.0	10,115,040
44. Texas	TX	215,697	.50		.0	215,747
45. Utah	UT	20,111	.0		.0	20,111
46. Vermont	VT	2,506	.0		.0	2,506
47. Virginia	VA	849,895	7,200		.0	857,095
48. Washington	WA	20,138	.0		.0	20,138
49. West Virginia	WV	149,827	1,517		.0	151,344
50. Wisconsin	WI	1,154,273	(3,200)		.0	1,151,073
51. Wyoming	WY	3,391	.0		.0	3,391
52. American Samoa	AS	0	.0		.0	0
53. Guam	GU	0	.0		.0	0
54. Puerto Rico	PR	0	.0		.0	0
55. US Virgin Islands	VI	335	.0		.0	335
56. Northern Mariana Islands	MP	0	.0		.0	0
57. Canada	CAN	13,194	.0		.0	13,194
58. Aggregate Other Alien	OT	3,276	.0		.0	3,276
59. Totals		95,651,261	1,032,784	0	0	96,684,045

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

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

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/ Person(s)	15 *
00267	GRANGE MUTUAL CASUALTY GROUP	14060	31-4192970				GRANGE MUTUAL CASUALTY COMPANY	OH	UDP	GRANGE MUTUAL CASUALTY COMPANY	BOARD	0.0	GRANGE MUTUAL CASUALTY COMPANY	0
00267	GRANGE MUTUAL CASUALTY GROUP	71218	31-0739286				GRANGE LIFE INSURANCE COMPANY	OH	RE	GRANGE MUTUAL CASUALTY COMPANY	OWNERSHIP	79.2	GRANGE MUTUAL CASUALTY COMPANY	0
00267	GRANGE MUTUAL CASUALTY GROUP	71218	31-0739286				GRANGE LIFE INSURANCE COMPANY	OH	RE	INTEGRITY MUTUAL INSURANCE COMPANY	OWNERSHIP	20.8	GRANGE MUTUAL CASUALTY COMPANY	0
00267	GRANGE MUTUAL CASUALTY GROUP	40118	41-1405571				TRUSTGARD INSURANCE COMPANY	OH	IA	GRANGE MUTUAL CASUALTY COMPANY	OWNERSHIP	100.0	GRANGE MUTUAL CASUALTY COMPANY	0
00267	GRANGE MUTUAL CASUALTY GROUP	10322	31-1432675				GRANGE INDEMNITY INSURANCE COMPANY	OH	IA	GRANGE MUTUAL CASUALTY COMPANY	OWNERSHIP	100.0	GRANGE MUTUAL CASUALTY COMPANY	0
00267	GRANGE MUTUAL CASUALTY GROUP	11136	31-1769414				GRANGE INSURANCE COMPANY OF MICHIGAN	OH	IA	GRANGE MUTUAL CASUALTY COMPANY	OWNERSHIP	100.0	GRANGE MUTUAL CASUALTY COMPANY	0
00267	GRANGE MUTUAL CASUALTY GROUP	14303	39-0367560				INTEGRITY MUTUAL INSURANCE COMPANY	WI	UDP	GRANGE MUTUAL CASUALTY COMPANY	BOARD	0.0	GRANGE MUTUAL CASUALTY COMPANY	0
00267	GRANGE MUTUAL CASUALTY GROUP	11982	42-1610213				GRANGE PROPERTY & CASUALTY INSURANCE COMPANY	OH	IA	GRANGE MUTUAL CASUALTY COMPANY	OWNERSHIP	100.0	GRANGE MUTUAL CASUALTY COMPANY	0
00267	GRANGE MUTUAL CASUALTY GROUP	12986	41-2236417				INTEGRITY PROPERTY & CASUALTY INSURANCE COMPANY	WI	IA	INTEGRITY MUTUAL INSURANCE COMPANY	OWNERSHIP	100.0	GRANGE MUTUAL CASUALTY COMPANY	0
00267	GRANGE MUTUAL CASUALTY GROUP	14917	46-1454886				GRANGE LIFE REINSURANCE COMPANY	VT	DS	GRANGE LIFE INSURANCE COMPANY	OWNERSHIP	100.0	GRANGE MUTUAL CASUALTY COMPANY	0
		00000	31-1145043				GRANGEAMERICA	OH	NIA	GRANGE MUTUAL CASUALTY COMPANY	OWNERSHIP	100.0	GRANGE MUTUAL CASUALTY COMPANY	0
		00000	31-1193707				NORTHVIEW INSURANCE AGENCY	OH	DS	GRANGE LIFE INSURANCE COMPANY	OWNERSHIP	100.0	GRANGE MUTUAL CASUALTY COMPANY	0
												0.0		0
												0.0		0
												0.0		0

Asterisk	Explanation

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

SCHEDULE Y

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

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

Responses

MARCH FILING

1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1? **WAIVED**
2. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1? **YES**
3. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1? **YES**
4. Will an actuarial opinion be filed by March 1? **YES**

APRIL FILING

5. Will Management's Discussion and Analysis be filed by April 1? **YES**
6. Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1? **YES**
7. Will the Adjustment Form (if required) be filed with the state of domicile and the NAIC by April 1? **YES**
8. Will the Supplemental Investment Risks Interrogatories be filed by April 1? **YES**

JUNE FILING

9. Will an audited financial report be filed by June 1? **YES**
10. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1? **YES**

AUGUST FILING

11. Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1? **YES**

The following supplemental reports are required to be filed as part of your annual statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of **NO** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but 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? **YES**
18. Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1? **NO**
19. Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1? **NO**
20. Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1? **NO**

21. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1? **NO**
22. Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1? **NO**
23. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1? **NO**
24. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1? **NO**
25. Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1? **SEE EXPLANATION**
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**

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

28. Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1?NO.....

29. Will the Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?NO.....

30. Will the Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?NO.....

31. Will the Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?NO.....

32. Will the Actuarial Certification Related to the Reserves required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?NO.....

33. Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1?YES.....

34. Will the Workers' Compensation Carve-Out Supplement be filed by March 1?NO.....

35. Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1?YES.....

36. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?NO.....

37. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?NO.....

38. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?NO.....

39. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?NO.....

40. Will the confidential Regulatory Asset Adequacy Issues Summary (RAAIS) required by Actuarial Opinion and Memorandum Regulation (Model 822), Section 7A(5), be filed with the state of domicile by March 15?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 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 and the NAIC by April 30?NO.....

50. Will the Supplemental XXX/AXXX Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1?YES.....

AUGUST FILING

51. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?YES.....

Explanation:

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SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

SCHEDULE O SUPPLEMENT

FOR THE YEAR ENDED DECEMBER 31, 2015

(To Be Filed By March 1)

Of The GRANGE LIFE INSURANCE COMPANY

Address (City, State and Zip Code)

NAIC Group Code NAIC Company Code Employer's ID Number

SUPPLEMENTAL SCHEDULE O – PART 1

**Development of Incurred Losses
(\$000 OMITTED)**

Section A-Group Accident and Health

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid Policyholders				
	1 2011	2 2012	3 2013	4 2014	5 2015(a)
1. Prior					
2. 2011	.0				
3. 2012	XX	.0			
4. 2013	XXX	XXX			
5. 2014	XXX	XXX	.XXX		
6. 2015	XXX	XXX	XXX	XXX	

Section B-Other Accident and Health

Section B—Other Accident and Health					
1. Prior					2,839
2. 2011	.68	25,330	33,133	.8,667	5,637
3. 2012	XXX	0	(8,655)	3,710	9,600
4. 2013	XXX	XXX	29,843	8,908	767
5. 2014	XXX	XXX	XXX	13,277	10,385
6. 2015	XXX	XXX	XXX	XXX	

Section C—Credit Accident and Health

Section 3: Current Accounts and Health					
1. Prior				0	0
2. 2011				0	0
3. 2012				0	0
4. 2013				0	0
5. 2014				0	0
6. 2015				0	0

Section D -

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

Section E -

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

Section F-

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

Section G-

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

(a) See Paragraph 9 of the Annual Audited Financial Reports in the General section of the annual statement instructions.

SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

SCHEDULE O SUPPLEMENT
SUPPLEMENTAL SCHEDULE O – PART 2

Development of Incurred Losses

(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Net Amounts Paid for Cost Containment Expenses				
	1 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.....	0	0	0	0	0
4. 2013.....	0	0	0	0	0
5. 2014.....	0	0	0	0	0
6. 2015.....	0	0	0	0	0

Section B - Other Accident and Health

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

Section C - Credit Accident and Health

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

Section D-

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

Section E-

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

Section F-

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

Section G-

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

SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

SCHEDULE O SUPPLEMENT
SUPPLEMENTAL SCHEDULE O – PART 3

**Development of Incurred Losses
(\$000 OMITTED)**

Section A - Group Accident and Health

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

Section B - Other Accident and Health

1. 2011	213	44,219	(14,703)	XXX	XXX
2. 2012	XXX	159,060	78,206	41,800	XXX
3. 2013	XXX	XXX	428,944	(4,945)	18,508
4. 2014	XXX	XXX	XXX	170,597	14,043
5. 2015	XXX	XXX	XXX	XXX	342,877

Section C - Credit Accident and Health

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

Section D-

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

Section E-

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

Section F-

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

Section G-

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

SUPPLEMENT FOR THE YEAR ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY

SCHEDULE O SUPPLEMENT
SUPPLEMENTAL SCHEDULE O – PART 4

Development of Incurred Losses

(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at the 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	XXX

Section B – Other Accident and Health

1. 2011.....	213	46,173	(14,703)	41,800	8,667
2. 2012.....	XXX	163,620	78,206	(4,945)	9,348
3. 2013.....	XXX	XXX	428,944	38,751	18,508
4. 2014.....	XXX	XXX	XXX	13,277	14,044
5. 2015.....	XXX	XXX	XXX	XXX	342,877

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	XXX

Section D-

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	XXX

Section E-

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	XXX

Section F-

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	XXX

Section G-

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	XXX

SUPPLEMENTAL SCHEDULE O - PART 5

(\$000 OMITTED)

Reserve and Liability Methodology - Exhibits 6 and 8

Line of Business	1 Methodology	2 Amount
1. Industrial life.....	OTHER.....	3,533
2. Ordinary life.....		
3. Individual annuity.....		
4. Supplementary contracts.....		
5. Credit life.....		
6. Group life.....	OTHER.....	0
7. Group annuities.....		
8. Group accident and health.....		
9. Credit accident and health.....		
10. Other accident and health.....	DEVELOPMENT.....	307
11. Total.....		3,840

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK

Analysis of Increase in Reserves During the Year	7
Analysis of Operations by Lines of Business	6
Asset Valuation Reserve Default Component	30
Asset Valuation Reserve Equity	32
Asset Valuation Reserve Replications (Synthetic) Assets	35
Asset Valuation Reserve	29
Assets	2
Cash Flow	5
Exhibit 1 – Part 1 – Premiums and Annuity Considerations for Life and Accident and Health Contracts	9
Exhibit 1 – Part 2 – Dividends and Coupons Applied, Reinsurance Commissions and Expense	10
Exhibit 2 – General Expenses	11
Exhibit 3 – Taxes, Licenses and Fees (Excluding Federal Income Taxes)	11
Exhibit 4 – Dividends or Refunds	11
Exhibit 5 – Aggregate Reserve for Life Contracts	12
Exhibit 5 – Interrogatories	13
Exhibit 5A – Changes in Bases of Valuation During The Year	13
Exhibit 6 – Aggregate Reserves for Accident and Health Contracts	14
Exhibit 7 – Deposit-Type Contracts	15
Exhibit 8 – Claims for Life and Accident and Health Contracts – Part 1	16
Exhibit 8 – Claims for Life and Accident and Health Contracts – Part 2	17
Exhibit of Capital Gains (Losses)	8
Exhibit of Life Insurance	25
Exhibit of Net Investment Income	8
Exhibit of Nonadmitted Assets	18
Exhibit of Number of Policies, Contracts, Certificates, Income Payable and Account Values	27
Five-Year Historical Data	22
Form for Calculating the Interest Maintenance Reserve (IMR)	28
General Interrogatories	20
Jurat Page	1
Liabilities, Surplus and Other Funds	3
Life Insurance (State Page)	24
Notes to Financial Statements	19
Overflow Page for Write-Ins	55
Schedule A – Part 1	E01
Schedule A – Part 2	E02

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK (Continued)

Schedule A – Part 3	E03
Schedule A – Verification Between Years	SI02
Schedule B – Part 1	E04
Schedule B – Part 2	E05
Schedule B – Part 3	E06
Schedule B – Verification Between Years	SI02
Schedule BA – Part 1	E07
Schedule BA – Part 2	E08
Schedule BA – Part 3	E09
Schedule BA – Verification Between Years	SI03
Schedule D – Part 1	E10
Schedule D – Part 1A – Section 1	SI05
Schedule D – Part 1A – Section 2	SI08
Schedule D – Part 2 – Section 1	E11
Schedule D – Part 2 – Section 2	E12
Schedule D – Part 3	E13
Schedule D – Part 4	E14
Schedule D – Part 5	E15
Schedule D – Part 6 – Section 1	E16
Schedule D – Part 6 – Section 2	E16
Schedule D – Summary By Country	SI04
Schedule D – Verification Between Years	SI03
Schedule DA – Part 1	E17
Schedule DA – Verification Between Years	SI10
Schedule DB – Part A – Section 1	E18
Schedule DB – Part A – Section 2	E19
Schedule DB – Part A – Verification Between Years	SI11
Schedule DB – Part B – Section 1	E20
Schedule DB – Part B – Section 2	E21
Schedule DB – Part B – Verification Between Years	SI11
Schedule DB – Part C – Section 1	E12
Schedule DB – Part C – Section 2	E13
Schedule DB – Part D – Section 1	E22
Schedule DB – Part D – Section 2	E23
Schedule DB – Verification	SI14
Schedule DL – Part 1	E24
Schedule DL – Part 2	E25
Schedule E – Part 1 – Cash	E26
Schedule E – Part 2 – Cash Equivalents	E27
Schedule E – Part 3 – Special Deposits	E28

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK (Continued)

Schedule E – Verification Between Years	SI15
Schedule F	36
Schedule H – Accident and Health Exhibit – Part 1	37
Schedule H – Part 2, Part 3 and Part 4	38
Schedule H – Part 5 – Health Claims	39
Schedule S – Part 1 – Section 1	40
Schedule S – Part 1 – Section 2	41
Schedule S – Part 2	42
Schedule S – Part 3 – Section 1	43
Schedule S – Part 3 – Section 2	44
Schedule S – Part 4	45
Schedule S – Part 5	46
Schedule S – Part 6	47
Schedule S – Part 7	48
Schedule T – Part 2 Interstate Compact	50
Schedule T – Premiums and Annuity Considerations	49
Schedule Y – Information Concerning Activities of Insurer Members of a Holding Company Group	51
Schedule Y – Part 1A – Detail of Insurance for Holding Company System	52
Schedule Y – Part 2 – Summary of Insurer's Transactions With Any Affiliates	53
Summary Investment Schedule	SI01
Summary of Operations	4
Supplemental Exhibits and Schedules Interrogatories	54

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE GRANGE LIFE INSURANCE COMPANY