



ANNUAL STATEMENT

For the Year Ended December 31, 2016  
of the Condition and Affairs of the

United Transportation Union Insurance Association

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

NAIC Company Code..... 56413

Employer's ID Number..... 23-7131460

Organized under the Laws of OH

State of Domicile or Port of Entry OH

Country of Domicile US

Incorporated/Organized..... November 16, 1970

Commenced Business..... March 10, 1971

Statutory Home Office

24950 Country Club Blvd Ste 340..... North Olmsted ..... OH ..... US ..... 44070-5333  
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office

24950 Country Club Blvd Ste 340..... North Olmsted ..... OH ..... US..... 44070-5333 216-228-9400  
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address

24950 Country Club Blvd Ste 340..... North Olmsted ..... OH ..... US ..... 44070-5333  
(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records

24950 Country Club Blvd Ste 340..... North Olmsted ..... OH ..... US ..... 44070-5333 216-228-9400  
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Web Site Address

utuia.org

Statutory Statement Contact

Richard A Kusnic Sr  
(Name)

216-228-9400  
(Area Code) (Telephone Number) (Extension)

Rkusnic@utuia.org  
(E-Mail Address)

216-228-0411  
(Fax Number)

OFFICERS

Name	Title	Name	Title
1. Ken Laugel	President	2. Richard A Kusnic	Secretary
3. Richard Kusnic	Treasurer	4.	

OTHER

DIRECTORS OR TRUSTEES

John Lesniewski	John Previsich	John England	Frank James Riha
Nicholas J Diccico Jr	John J Risch III	William Jennings Thompson	William B Ryan

State of.....  
County of.....

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

(Signature)  
Ken Laugel

1. (Printed Name)  
President

(Title)

(Signature)  
Richard A Kusnic

2. (Printed Name)  
Secretary

(Title)

(Signature)  
Richard Kusnic

3. (Printed Name)  
Treasurer

(Title)

Subscribed and sworn to before me

This \_\_\_\_\_ day of \_\_\_\_\_ 2017

a. Is this an original filing? Yes [ X ] No [ ]

b. If no

1. State the amendment number \_\_\_\_\_

2. Date filed \_\_\_\_\_

3. Number of pages attached \_\_\_\_\_

ASSETS

	Current Year			Prior Year
	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1. Bonds (Schedule D).....	196,038,673		196,038,673	197,850,788
2. Stocks (Schedule D):				
2.1 Preferred stocks.....			0	
2.2 Common stocks.....	18,150,205		18,150,205	17,069,699
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens.....			0	
3.2 Other than first liens.....			0	
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....			0	
4.2 Properties held for the production of income (less \$.....0 encumbrances).....	1,520,099		1,520,099	1,561,746
4.3 Properties held for sale (less \$.....0 encumbrances).....			0	
5. Cash (\$.....134,523, Schedule E-Part 1), cash equivalents (\$.....2,744,060, Schedule E-Part 2) and short-term investments (\$.....0, Schedule DA).....	2,878,586		2,878,586	2,193,942
6. Contract loans (including \$.....0 premium notes).....	5,076,585		5,076,585	5,481,887
7. Derivatives (Schedule DB).....			0	
8. Other invested assets (Schedule BA).....			0	
9. Receivables for securities.....			0	
10. Securities lending reinvested collateral assets (Schedule DL).....			0	
11. Aggregate write-ins for invested assets.....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	223,664,148	0	223,664,148	224,158,062
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	2,252,421		2,252,421	2,270,002
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	43,839		43,839	52,957
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....	90,514		90,514	171,629
15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0).....			0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....			0	
16.2 Funds held by or deposited with reinsured companies.....			0	
16.3 Other amounts receivable under reinsurance contracts.....			0	
17. Amounts receivable relating to uninsured plans.....			0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0	
18.2 Net deferred tax asset.....			0	
19. Guaranty funds receivable or on deposit.....			0	
20. Electronic data processing equipment and software.....	270,000		270,000	155,000
21. Furniture and equipment, including health care delivery assets (\$.....0).....			0	
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0	
23. Receivables from parent, subsidiaries and affiliates.....			0	
24. Health care (\$.....0) and other amounts receivable.....			0	
25. Aggregate write-ins for other-than-invested assets.....	15,594	0	15,594	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	226,336,516	0	226,336,516	226,807,650
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. TOTAL (Lines 26 and 27).....	226,336,516	0	226,336,516	226,807,650

DETAILS OF WRITE-INS

1101. ....			0	
1102. ....			0	
1103. ....			0	
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501. Agent benefits due.....	15,594		15,594	
2502. ....			0	
2503. ....			0	
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	15,594	0	15,594	0

United Transportation Union Insurance Association  
LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Aggregate reserve for life contracts (Exhibit 5, Line 9999999) (including \$.....0 Modco Reserve).....	158,633,585	160,793,370
2. Aggregate reserve for accident and health contracts (Exhibit 6, Line 16, Col. 1) (including \$.....0 Modco Reserve).....	4,923,310	4,891,522
3. Liability for deposit-type contracts (Exhibit 7, Line 14, Col. 1) (including \$.....0 Modco Reserve).....	4,807,434	5,349,761
4. Contract claims:		
4.1 Life (Exhibit 8, Part 1, Line 4.4, Column 1 less sum of Columns 9, 10 and 11).....	978,467	1,147,863
4.2 Accident and health (Exhibit 8, Part 1, Line 4.4, sum of Columns 9, 10 and 11).....	153,987	137,585
5. Refunds due and unpaid (Exhibit 4, Line 10).....	4,139	8,522
6. Provision for refunds payable in following calendar year-estimated amounts:		
6.1 Apportioned for payment.....		
6.2 Not yet apportioned.....		
7. Premiums and annuity considerations for life and accident and health contracts received in advance less \$.....0 discount; including \$.....164,386 accident and health premiums (Exhibit 1, Part 1, Col. 1, sum of Lines 4 and 14).....	406,264	305,630
8. Contract liabilities not included elsewhere:		
8.1 Surrender values on canceled contracts.....	77,667	84,100
8.2 Other amounts payable on reinsurance including \$.....0 assumed and \$.....0 ceded.....		
8.3 Interest Maintenance Reserve (IMR, Line 6).....	4,573,015	5,634,685
9. Commissions to fieldworkers due or accrued-life and annuity contracts \$.....19,982 ; accident and health \$.....33,151 and deposit-type contract funds \$.....0.....	53,133	55,332
10. Commissions and expense allowances payable on reinsurance assumed.....		
11. General expenses due or accrued (Exhibit 2, Line 12, Col. 7).....	439,213	254,606
12. Transfers to Separate Accounts due or accrued (net) (including \$.....0 accrued for expense allowances recognized in reserves).....		
13. Taxes, licenses and fees due or accrued (Exhibit 3, Line 8, Col. 6).....	3,134	2,846
14. Unearned investment income.....		
15. Amounts withheld or retained by Society as agent or trustee.....		
16. Amounts held for fieldworkers' account, including \$.....0 fieldworkers' credit balances.....		
17. Remittances and items not allocated.....		
18. Net adjustment in assets and liabilities due to foreign exchange rates.....		
19. Liability for benefits for employees and fieldworkers if not included above.....		
20. Borrowed money \$.....0 and interest thereon \$.....0.....		
21. Miscellaneous liabilities:		
21.1 Asset valuation reserve (AVR, Line 16, Col. 7).....	3,258,706	2,659,462
21.2 Reinsurance in unauthorized and certified (\$.....0) companies.....		
21.3 Funds held under reinsurance treaties with unauthorized and certified (\$.....0) reinsurers.....		
21.4 Payable to subsidiaries and affiliates.....	12,533	224,846
21.5 Drafts outstanding.....		
21.6 Funds held under coinsurance.....		
21.7 Derivatives.....		
21.8 Payable for securities.....		
21.9 Payable for securities lending.....		
22. Aggregate write-ins for liabilities.....	1,167,851	471,108
23. Total liabilities excluding Separate Accounts business (Lines 1 to 22).....	179,492,438	182,021,238
24. From Separate Accounts statement.....		
25. Total liabilities (Lines 23 and 24).....	179,492,438	182,021,238
26. Aggregate write-ins for other than liabilities and surplus funds.....	0	0
27. Surplus notes.....		
28. Aggregate write-ins for surplus funds.....	0	0
29. Unassigned funds.....	46,844,079	44,786,412
30. Total (Lines 26 through 29) (Page 4, Line 47) (including \$.....0 in Separate Accounts statement).....	46,844,079	44,786,412
31. Totals (Lines 25 + 30) (Page 2, Line 28, Col. 3).....	226,336,517	226,807,650

DETAILS OF WRITE-INS		
2201. Liability for uncashed checks.....	69,775	30,275
2202. Experience Refund Due.....	219,766	440,833
2203. Scholarship Payable.....	48,367	
2298. Summary of remaining write-ins for Line 22 from overflow page.....	829,943	0
2299. Totals (Lines 2201 through 2203 plus 2298) (Line 22 above).....	1,167,851	471,108
2601. ....		
2602. ....		
2603. ....		
2698. Summary of remaining write-ins for Line 26 from overflow page.....	0	0
2699. Totals (Lines 2601 through 2603 plus 2698) (Line 26 above).....	0	0
2801. ....		
2802. ....		
2803. ....		
2898. Summary of remaining write-ins for Line 28 from overflow page.....	0	0
2899. Totals (Lines 2801 through 2803 plus 2898) (Line 28 above).....	0	0

United Transportation Union Insurance Association  
SUMMARY OF OPERATIONS

	1 Current Year	2 Prior Year
1. Premiums and annuity considerations for life and accident and health contracts (Exhibit 1, Part 1, Line 20.4, Col. 1).....	12,939,423	13,759,109
2. Considerations for supplementary contracts with life contingencies.....		
3. Net investment income (Exhibit of Net Investment Income, Line 17).....	8,947,836	8,914,020
4. Amortization of Interest Maintenance Reserve (IMR, Line 5).....	954,661	1,106,912
5. Separate Accounts net gain from operations excluding unrealized gains or losses.....		
6. Commissions and expense allowances on reinsurance ceded (Exhibit 1, Part 2, Line 26.1, Col. 1).....		
7. Reserve adjustments on reinsurance ceded.....		
8. Miscellaneous Income:		
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts.....		
8.2 Charges and fees for deposit-type contracts.....		
8.3 Aggregate write-ins for miscellaneous income.....	246,054	64,678
9. Totals (Lines 1 to 8.3).....	23,087,974	23,844,719
10. Death benefits.....	3,512,481	4,041,420
11. Matured endowments (excluding guaranteed annual pure endowments).....	137,920	151,994
12. Annuity benefits.....	8,757,940	7,969,717
13. Disability benefits and benefits under accident and health contracts, including premiums waived \$.....0.....	1,309,228	1,330,914
14. Surrender benefits and withdrawals for life contracts.....	2,861,472	2,516,281
15. Interest and adjustments on contract or deposit-type contracts funds.....	4,967	5,215
16. Payments on supplementary contracts with life contingencies.....		
17. Increase in aggregate reserve for life and accident and health contracts.....	(2,402,555)	(1,627,587)
18. Totals (Lines 10 to 17).....	14,181,453	14,387,954
19. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) (Exhibit 1, Part 2, Line 31, Col. 1 less Col. 5).....	682,879	729,181
20. Commissions and expense allowances on reinsurance assumed (Exhibit 1, Part 2, Line 26.2, Col. 1 less Col. 5).....		
21. General insurance expenses and fraternal expenses (Exhibit 2, Line 10, Cols. 1, 2, 3, 4 and 6).....	6,463,771	5,511,479
22. Insurance taxes, licenses and fees (Exhibit 3, Line 6, Cols. 1, 2, 3 and 5).....	202,876	369,775
23. Increase in loading on deferred and uncollected premiums.....		
24. Net transfers to or (from) Separate Accounts net of reinsurance.....		
25. Aggregate write-ins for deductions.....	0	0
26. Totals (Lines 18 to 25).....	21,530,979	20,998,389
27. Net gain from operations before refunds to members (Line 9 minus Line 26).....	1,556,995	2,846,330
28. Refunds to members (Exhibit 4, Line 17, Cols. 1 + 2).....	(3,935)	(3,040)
29. Net gain from operations after refunds to members and before realized capital gains (losses) (Line 27 minus Line 28).....	1,560,930	2,849,370
30. Net realized capital gains (losses) less capital gains tax of \$.....0 (excluding \$.....(107,009) transferred to the IMR).....	120,009	66,446
31. Net income (Lines 29 + 30).....	1,680,939	2,915,816
SURPLUS ACCOUNT		
32. Surplus, December 31, previous year (Page 3, Line 30, Col. 2).....	44,786,412	42,443,460
33. Net income from operations (Line 31).....	1,680,939	2,915,816
34. Change in net unrealized capital gains (losses) less capital gains tax of \$.....0.....	975,971	(788,075)
35. Change in net unrealized foreign exchange capital gain (loss).....		
36. Change in nonadmitted assets.....		
37. Change in liability for reinsurance in unauthorized and certified companies.....		
38. Change in reserve on account of change in valuation basis (increase) or decrease.....		
39. Change in asset valuation reserve.....	(599,244)	215,211
40. Surplus (contributed to) withdrawn from Separate Accounts during period.....		
41. Other changes in surplus in Separate Accounts statement.....		
42. Change in surplus notes.....		
43. Cumulative effect of changes in accounting principles.....		
44. Change in surplus as a result of reinsurance.....		
45. Aggregate write-ins for gains and losses in surplus.....	0	0
46. Net change in surplus for the year (Lines 33 through 45).....	2,057,666	2,342,952
47. Surplus December 31, current year (Lines 32 + 46) (Page 3, Line 30).....	46,844,078	44,786,412
DETAILS OF WRITE-INS		
08.301. Miscellaneous Income.....	3,574	54,695
08.302. Penalty on Early Withdrawal.....	5,297	9,983
08.303. Administrative Fees Paid (Prior Period).....	128,655	
08.398. Summary of remaining write-ins for Line 8.3 from overflow page.....	108,528	0
08.399. Totals (Lines 08.301 through 08.303 plus 08.398) (Line 8.3 above).....	246,054	64,678
2501. ....		
2502. ....		
2503. ....		
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	0	0
4501. ....		
4502. ....		
4503. ....		
4598. Summary of remaining write-ins for Line 45 from overflow page.....	0	0
4599. Totals (Lines 4501 through 4503 plus 4598) (Line 45 above).....	0	0

CASH FLOW

	1 Current Year	2 Prior Year
CASH FROM OPERATIONS		
1. Premiums collected net of reinsurance.....	13,130,290	13,591,430
2. Net investment income.....	9,382,415	9,377,035
3. Miscellaneous income.....	246,054	64,678
4. Total (Lines 1 through 3).....	22,758,759	23,033,143
5. Benefit and loss related payments.....	16,743,435	16,194,183
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....		
7. Commissions, expenses paid and aggregate write-ins for deductions.....	6,470,087	6,518,204
8. Dividends paid to policyholders.....	448	(5,263)
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....		
10. Total (Lines 5 through 9).....	23,213,970	22,707,124
11. Net cash from operations (Line 4 minus Line 10).....	(455,211)	326,019
CASH FROM INVESTMENTS		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds.....	10,767,411	27,780,540
12.2 Stocks.....	1,984,336	98,966
12.3 Mortgage loans.....		
12.4 Real estate.....		
12.5 Other invested assets.....		
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....		
12.7 Miscellaneous proceeds.....		
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	12,751,747	27,879,506
13. Cost of investments acquired (long-term only):		
13.1 Bonds.....	9,427,659	29,386,879
13.2 Stocks.....	1,978,643	458,191
13.3 Mortgage loans.....		
13.4 Real estate.....		
13.5 Other invested assets.....		
13.6 Miscellaneous applications.....		
13.7 Total investments acquired (Lines 13.1 to 13.6).....	11,406,302	29,845,070
14. Net increase (decrease) in contract loans and premium notes.....	(405,302)	(585,090)
15. Net cash from investments (Line 12.8 minus Lines 13.7 minus Line 14).....	1,750,747	(1,380,474)
CASH FROM FINANCING AND MISCELLANEOUS SOURCES		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes.....		
16.2 Capital and paid in surplus, less treasury stock.....		
16.3 Borrowed funds.....		
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....	(547,356)	(563,178)
16.5 Dividends to stockholders.....		
16.6 Other cash provided (applied).....	(63,537)	(176,246)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6).....	(610,893)	(739,424)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17).....	684,644	(1,793,879)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year.....	2,193,944	3,987,822
19.2 End of year (Line 18 plus Line 19.1).....	2,878,587	2,193,944

Note: Supplemental disclosures of cash flow information for non-cash transactions:

20.0001 .....		
---------------	--	--



ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR

	1	2	3	4
	Total	Life Insurance	Annuities	Supplementary Contracts
Involving Life or Disability Contingencies (Reserves)				
(Net of Reinsurance Ceded)				
1. Reserve December 31, prior year.....	161,234,203	79,436,983	81,157,522	639,698
2. Tabular net premiums or considerations.....	7,971,916	4,232,179	3,739,737	
3. Present value of disability claims incurred.....	9,966	9,966		.XXX.
4. Tabular interest.....	6,041,358	3,133,345	2,886,000	22,013
5. Tabular less actual reserve released.....	67,525	51,468	39,106	(23,049)
6. Increase in reserve on account of change in valuation basis.....	0			
7. Other increases (net).....	1,312,549	1,312,549		
8. Totals (Lines 1 to 7).....	176,637,517	88,176,490	87,822,365	638,662
9. Tabular cost.....	6,317,516	6,317,516		.XXX.
10. Reserves released by death.....	1,218,849	1,218,849	.XXX.	.XXX.
11. Reserves released by other terminations (net).....	9,969,936	2,680,171	7,289,765	
12. Annuity, supplementary contract and disability payments involving life contingencies.....	246,756	225,235		21,521
13. Net transfers to or (from) Separate Accounts.....	0			
14. Total deductions (Lines 9 to 13).....	17,753,057	10,441,771	7,289,765	21,521
15. Reserve December 31, current year.....	158,884,460	77,734,719	80,532,600	617,141

EXHIBIT OF NET INVESTMENT INCOME

		1	2
		Collected During Year	Earned During Year
1.	U.S. government bonds.....	(a).....879,880	.....763,778
1.1	Bonds exempt from U.S. tax.....	(a).....8,296,544	.....7,992,392
1.2	Other bonds (unaffiliated).....	(a).....	.....
1.3	Bonds of affiliates.....	(a).....	.....
2.1	Preferred stocks (unaffiliated).....	(b).....	.....
2.11	Preferred stocks of affiliates.....	(b).....	.....
2.2	Common stocks (unaffiliated).....	.....301,398	.....301,397
2.21	Common stocks of affiliates.....	.....	.....
3.	Mortgage loans.....	(c).....	.....
4.	Real estate.....	(d).....207,273	.....207,273
5.	Contract loans.....	.....357,415	.....357,415
6.	Cash, cash equivalents and short-term investments.....	(e).....566	.....566
7.	Derivative instruments.....	(f).....	.....
8.	Other invested assets.....	.....	.....
9.	Aggregate write-ins for investment income.....	.....0	.....0
10.	Total gross investment income.....	.....10,043,076	.....9,622,821
11.	Investment expenses.....	.....	(g).....633,341
12.	Investment taxes, licenses and fees, excluding federal income taxes.....	.....	(g).....
13.	Interest expense.....	.....	(h).....
14.	Depreciation on real estate and other invested assets.....	.....	(i).....41,646
15.	Aggregate write-ins for deductions from investment income.....	.....	.....0
16.	Total deductions (Lines 11 through 15).....	.....	.....674,987
17.	Net investment income (Line 10 minus Line 16).....	.....	.....8,947,834

DETAILS OF WRITE-INS

0901.	.....	.....	.....
0902.	.....	.....	.....
0903.	.....	.....	.....
0998.	Summary of remaining write-ins for Line 9 from overflow page.....	.....0	.....0
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above).....	.....0	.....0
1501.	.....	.....	.....
1502.	.....	.....	.....
1503.	.....	.....	.....
1598.	Summary of remaining write-ins for Line 15 from overflow page.....	.....	.....0
1599.	Totals (Lines 1501 through 1503 plus 1598) (Line 15 above).....	.....	.....0

- (a) Includes \$.....198,237 accrual of discount less \$.....573,589 amortization of premium and less \$....27,295 paid for accrued interest on purchases.
- (b) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued dividends on purchases.
- (c) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.
- (d) Includes \$.....0 for company's occupancy of its own buildings; and excludes \$.....0 interest on encumbrances.
- (e) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.
- (f) Includes \$.....0 accrual of discount less \$.....0 amortization of premium.
- (g) Includes \$.....0 investment expenses and \$.....0 investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$.....0 interest on surplus notes and \$.....0 interest on capital notes.
- (i) Includes \$....41,646 depreciation on real estate and \$.....0 depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

		1	2	3	4	5
		Realized Gain (Loss) on Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. government bonds.....	.....	.....	.....0	.....	.....
1.1	Bonds exempt from U.S. tax.....	.....	.....	.....0	.....	.....
1.2	Other bonds (unaffiliated).....	.....9,782	.....	.....9,782	.....	.....
1.3	Bonds of affiliates.....	.....	.....	.....0	.....	.....
2.1	Preferred stocks (unaffiliated).....	.....	.....	.....0	.....	.....
2.11	Preferred stocks of affiliates.....	.....	.....	.....0	.....	.....
2.2	Common stocks (unaffiliated).....	.....110,228	.....	.....110,228	.....975,971	.....
2.21	Common stocks of affiliates.....	.....	.....	.....0	.....	.....
3.	Mortgage loans.....	.....	.....	.....0	.....	.....
4.	Real estate.....	.....	.....	.....0	.....	.....
5.	Contract loans.....	.....	.....	.....0	.....	.....
6.	Cash, cash equivalents and short-term investments.....	.....	.....	.....0	.....	.....
7.	Derivative instruments.....	.....	.....	.....0	.....	.....
8.	Other invested assets.....	.....	.....	.....0	.....	.....
9.	Aggregate write-ins for capital gains (losses).....	.....0	.....0	.....0	.....0	.....0
10.	Total capital gains (losses).....	.....120,010	.....0	.....120,010	.....975,971	.....0

DETAILS OF WRITE-INS

0901.	.....	.....	.....0	.....	.....
0902.	.....	.....	.....0	.....	.....
0903.	.....	.....	.....0	.....	.....
0998.	Summary of remaining write-ins for Line 9 from overflow page...	.....0	.....0	.....0	.....0
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above).....	.....0	.....0	.....0	.....0



**EXHIBIT 1 - PART 1 - PREMIUMS AND ANNUITY CONSIDERATIONS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS**

	1	Insurance					7	8
	Total	2 Life Insurance	3 Individual Annuities	4 Accident and Health	5 Aggregate of All Other Lines of Business	6 Total (Columns 2 through 5)	Fraternal	Expense
<b>FIRST YEAR (other than single)</b>								
1. Uncollected.....	12,570	8,857		3,713		12,570		
2. Deferred and accrued.....	0					0		
3. Deferred, accrued & uncollected:								
3.1 Direct.....	12,570	8,857		3,713		12,570		
3.2 Reinsurance assumed.....	0					0		
3.3 Reinsurance ceded.....	0					0		
3.4 Net (Line 1 + Line 2).....	12,570	8,857	0	3,713	0	12,570	0	0
4. Advance.....	6,159	2,262		3,897		6,159		
5. Line 3.4 - Line 4.....	6,411	6,595	0	(184)	0	6,411	0	0
6. Collected during year:								
6.1 Direct.....	872,873	182,543	280,530	409,800		872,873		
6.2 Reinsurance assumed.....	0					0		
6.3 Reinsurance ceded.....	14,192	14,192				14,192		
6.4 Net.....	858,681	168,351	280,530	409,800	0	858,681	0	0
7. Line 5 + Line 6.4.....	865,092	174,946	280,530	409,616	0	865,092	0	0
8. Prior year (uncollected + deferred and accrued - advance).....	14,004	6,438		7,566		14,004		
9. First year premiums and considerations:								
9.1 Direct.....	865,280	182,700	280,530	402,050		865,280		
9.2 Reinsurance assumed.....	0					0		
9.3 Reinsurance ceded.....	14,192	14,192				14,192		
9.4 Net (Line 7 - Line 8).....	851,088	168,508	280,530	402,050	0	851,088	0	0
<b>SINGLE</b>								
10. Single premiums and considerations:								
10.1 Direct.....	624,773	420			624,353	624,773		
10.2 Reinsurance assumed.....	0					0		
10.3 Reinsurance ceded.....	0					0		
10.4 Net.....	624,773	420	0	0	624,353	624,773	0	0
<b>RENEWAL</b>								
11. Uncollected.....	121,783	72,457		49,326		121,783		
12. Deferred and accrued.....	0					0		
13. Deferred, accrued & uncollected:								
13.1 Direct.....	121,783	72,457		49,326		121,783		
13.2 Reinsurance assumed.....	0					0		
13.3 Reinsurance ceded.....	0					0		
13.4 Net (Line 11 + Line 12).....	121,783	72,457	0	49,326	0	121,783	0	0
14. Advance.....	400,105	239,616		160,489		400,105		
15. Line 13.4 - Line 14.....	(278,322)	(167,159)	0	(111,163)	0	(278,322)	0	0
16. Collected during year:								
16.1 Direct.....	11,900,872	5,030,840	3,459,207	3,410,825		11,900,872		
16.2 Reinsurance assumed.....	0					0		
16.3 Reinsurance ceded.....	254,037	254,037				254,037		
16.4 Net.....	11,646,835	4,776,803	3,459,207	3,410,825	0	11,646,835	0	0
17. Line 15 + Line 16.4.....	11,368,513	4,609,644	3,459,207	3,299,662	0	11,368,513	0	0
18. Prior year (uncollected + deferred and accrued - advance).....	(95,049)	(36,608)		(58,441)		(95,049)		
19. Renewal premiums and considerations:								
19.1 Direct.....	11,717,599	4,900,289	3,459,207	3,358,103		11,717,599		
19.2 Reinsurance assumed.....	0					0		
19.3 Reinsurance ceded.....	254,037	254,037				254,037		
19.4 Net (Line 17 - Line 18).....	11,463,562	4,646,252	3,459,207	3,358,103	0	11,463,562	0	0
<b>TOTAL</b>								
20. Total premiums and annuity considerations:								
20.1 Direct.....	13,207,652	5,083,409	3,739,737	3,760,153	624,353	13,207,652	0	0
20.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0
20.3 Reinsurance ceded.....	268,229	268,229	0	0	0	268,229	0	0
20.4 Net (Lines 9.4 + 10.4 + 19.4).....	12,939,423	4,815,180	3,739,737	3,760,153	624,353	12,939,423	0	0

EXHIBIT 1 - PART 2 - REFUNDS APPLIED, REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES AND COMMISSIONS INCURRED (direct business only)

10

	1 Total	Insurance					7 Fraternal	8 Expense
		2 Life Insurance	3 Individual Annuities	4 Accident and Health	5 Aggregate of All Other Lines of Business	6 Total (Columns 2 through 5)		
REFUNDS APPLIED (included in Part 1)								
21. To pay renewal premiums.....	0					0		
22. All other.....	0					0		
REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES INCURRED								
23. First year (other than single):								
23.1 Reinsurance ceded.....	0					0		
23.2 Reinsurance assumed.....	0					0		
23.3 Net ceded less assumed.....	0	0	0	0	0	0	0	0
24. Single:								
24.1 Reinsurance ceded.....	0					0		
24.2 Reinsurance assumed.....	0					0		
24.3 Net ceded less assumed.....	0	0	0	0	0	0	0	0
25. Renewal:								
25.1 Reinsurance ceded.....	0					0		
25.2 Reinsurance assumed.....	0					0		
25.3 Net ceded less assumed.....	0	0	0	0	0	0	0	0
26. Totals:								
26.1 Reinsurance ceded (Page 6, Line 6).....	0	0	0	0	0	0	0	0
26.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0
26.3 Net ceded less assumed.....	0	0	0	0	0	0	0	0
COMMISSIONS INCURRED (direct business only)								
27. First year (other than single).....	372,937	206,044	10,909	155,984		372,937		
28. Single.....	0					0		
29. Renewal.....	309,942	93,929		216,013		309,942		
30. Deposit-type contract funds.....	0					0		
31. Totals (to agree with Page 6, Line 19).....	682,879	299,973	10,909	371,997	0	682,879	0	0

United Transportation Union Insurance Association  
EXHIBIT 2 - GENERAL EXPENSES

		Insurance				5	6	7
		1	Accident and Health		4			
			2 Cost Containment	3 All Other				
		Life				Investment	Fraternal	Total
1.	Rent.....	113,687		58,565		24,114		196,366
2.	Salaries and wages.....	1,096,587		405,587			41,040	1,543,214
3.11	Insured benefit plans for employees.....	772,368		285,671			19,699	1,077,738
3.12	Insured benefit plans for fieldworkers.....	159,546		59,010				218,556
3.21	Uninsured benefit plans for employees.....							0
3.22	Uninsured benefit plans for fieldworkers.....							0
3.31	Other employee welfare.....	28,972		10,716				39,688
3.32	Other fieldworker welfare.....							0
4.1	Legal fees and expenses.....	865,728		320,201				1,185,929
4.2	Medical examination fees.....	51,818		19,166				70,984
4.3	Inspection report fees.....							0
4.4	Fees of public accountants and consulting actuaries.....	222,877		38,331				261,208
4.5	Expense of investigation and settlement of certificate claims.....							0
5.1	Traveling expenses.....	323,346		119,594			8,627	451,567
5.2	Advertising.....	8,232		3,045				11,277
5.3	Postage, express, telegraph and telephone.....	59,033		21,837				80,870
5.4	Printing and stationery.....	26,002		9,617				35,619
5.5	Cost or depreciation of furniture and equipment.....	36,519		13,507				50,026
5.6	Rental of equipment.....							0
5.7	Cost or depreciation of EDP equipment and software.....	15,425		5,705				21,130
5.8	Lodge supplies less \$.....0 from sales.....							0
6.1	Books and periodicals.....	120		45				165
6.2	Bureau and association dues.....	1,405		520				1,925
6.3	Insurance, except on real estate.....	85,114		31,481				116,595
6.4	Miscellaneous losses.....							0
6.5	Collection and bank service charges.....	16,616		6,146				22,762
6.6	Sundry general expenses.....							0
7.1	Field expense allowance.....							0
7.2	Fieldworkers' balances charged off (less \$.....0 recovered).....							0
7.3	Field conferences other than local meetings.....	90,748		33,565				124,313
8.1	Official publications.....							0
8.2	Expense of supreme lodge meetings.....							0
9.1	Real estate expenses.....							0
9.2	Investment expenses not included elsewhere.....					609,227		609,227
9.3	Aggregate write-ins for expenses.....	591,788	0	218,872	0	0	167,317	977,977
10.	General expenses incurred.....	4,565,931	0	1,661,181	0	633,341	(a) 236,683	(b) 7,097,136
11.	General expenses unpaid December 31, prior year.....	190,955		63,651				254,606
12.	General expenses unpaid December 31, current year.....	320,625		118,588				439,213
13.	General expenses paid during year (Lines 10 + 11 - 12 ).....	4,436,261	0	1,606,244	0	633,341	236,683	6,912,529

DETAILS OF WRITE-INS

09.301	Scholarship.....						154,867	154,867
09.302	Charity.....						12,450	12,450
09.303	Consulting Fees.....	551,152		203,850				755,002
09.398	Summary of remaining write-ins for Line 9.3 from overflow page.....	40,636	0	15,022	0	0	0	55,658
09.399	Totals (Lines 09.301 through 09.303 plus 09.398)(Line 9.3 above).....	591,788	0	218,872	0	0	167,317	977,977

(a) Show the distribution of this amount in the following categories:

1. Charitable \$.....12,450; 2. Institutional \$.....69,366; 3. Recreational and Health \$.....0; 4. Educational \$.....0  
5. Religious \$.....0; 6. Membership \$.....154,867; 7. Other \$.....0; 8. Total \$.....236,683

(b) Includes management fees of \$.....0 to affiliates and \$.....0 to non-affiliates.

EXHIBIT 3 - TAXES, LICENSES AND FEES

		Insurance			4	5	6
		1	2	3			
		Investment	Fraternal	Total			
1.	Real estate taxes.....						0
2.	State insurance department licenses and fees.....	22,496	8,468				30,964
3.	Other state taxes, including \$.....0 for employee benefits.....	16,116	6,066				22,182
4.	U.S. Social Security taxes.....	108,783	40,947				149,730
5.	All other taxes.....						0
6.	Taxes, licenses and fees Incurred.....	147,395	55,481	0	0	0	202,876
7.	Taxes, licenses and fees unpaid December 31, prior year.....	2,132	714				2,846
8.	Taxes, licenses and fees unpaid December 31, current year.....	2,288	846				3,134
9.	Taxes, licenses and fees paid during year (Lines 6 + 7 - 8).....	147,239	55,349	0	0	0	202,588

EXHIBIT 4 - DIVIDENDS OR REFUNDS

		1	2
		Life	Accident and Health
1.	Applied to pay renewal premiums.....		
2.	Applied to shorten the endowment or premium-paying period.....		
3.	Applied to provide paid-up additions.....		
4.	Applied to provide paid-up annuities.....		
5.	Total (Lines 1 to 4).....	0	0
6.	Paid in cash.....		
7.	Left on deposit.....	448	
8.	Aggregate write-ins for dividend or refund.....	0	0
9.	Total (Lines 5 to 8).....	448	0
10.	Amount due and unpaid.....	4,139	
11.	Provision for dividends or refunds payable in the following calendar year.....		
12.	Terminal dividends.....		
13.	Provision for deferred dividend contracts.....		
14.	Amount provisionally held for deferred dividend contracts not included in Line 13.....		
15.	Total (Line 10 through Line 14).....	4,139	0
16.	Total from prior year.....	8,522	
17.	Total dividends or refunds (Line 9 + 15 - 16).....	(3,935)	0

DETAILS OF WRITE-INS

0801.	.....		
0802.	.....		
0803.	.....		
0898.	Summary of remaining write-ins for Line 8 from overflow page.....	0	0
0899.	Totals (Line 0801 through 0803 plus 0898) (Line 8 above).....	0	0

EXHIBIT 5 - AGGREGATE RESERVE FOR LIFE CONTRACTS

1	2	3	4	5	6
Valuation Standard	Total	Industrial	Ordinary	Credit (Group and Individual)	Group
Life Insurance:					
0100001. Thru 1982 1958 CET 2.75% NLP.....	862,434		862,434		
0100002. Thru 1982 1958 CSO 2.75% NLP.....	24,260,837		24,260,837		
0100003. 1983 - 1988 1958 CSO 4.50% CRVM.....	5,024,456		5,024,456		
0100004. 1986 - 1988 1958 CSO 4.50% NLP.....	3,927,101		3,927,101		
0100005. 1983 - 1988 1958 CET 4.50% NLP.....	116,202		116,202		
0100006. 1987 - 1999 1980 CET 4.50% NLP.....	873,873		873,873		
0100007. 1989 - 1995 1980 CET 5.00% NLP.....	19,290		19,290		
0100008. 1987 - 2008 1980 CSO 4.00% CRVM.....	1,961,972		1,961,972		
0100009. 1987 - 2005 1980 CSO 4.50% CRVM.....	27,804,582		27,804,582		
0100010. 1987 - 2005 1980 CSO 4.50% NLP.....	2,109,305		2,109,305		
0100011. 1987 - 1999 1980 CSO 5.00% CRVM.....	363,622		363,622		
0100012. 1987 - 1999 1980 CSO 5.00% NLP.....	4,243,339		4,243,339		
0100013. 1987 - 1999 1980 CSO 5.25% CRVM.....	26,158		26,158		
0100014. 1987 - 1999 1980 CSO 5.50% CRVM.....	1,525,409		1,525,409		
0100015. 2009 - 2012 2001 CSO 4.00% CRVM.....	2,505,940		2,505,940		
0100016. 2013 - NB 2001 CSO 3.50% CRVM.....	329,632		329,632		
0199997. Totals (Gross).....	75,954,152	0	75,954,152	0	0
0199998. Reinsurance ceded.....	187,539		187,539		
0199999. Totals (Net).....	75,766,613	0	75,766,613	0	0
Annuities (excluding supplementary contracts with life contingencies):					
0200001. 1951 GAM 3.50% Immediate.....	11,634	XXX	11,634	XXX	
0200002. 1971 GAM 6.00% Immediate.....	21,392	XXX	21,392	XXX	
0200003. 1983 GAM 6.00% Immediate.....	19,675	XXX	19,675	XXX	
0200004. Annual Premium Deferred 1.00%.....	2,150,148	XXX	2,150,148	XXX	
0200005. Annual Premium Deferred 2.75%.....	22,975,102	XXX	22,975,102	XXX	
0200006. Annual Premium Deferred 3.00%.....	55,354,649	XXX	55,354,649	XXX	
0200007. Annual Premium Deferred 4.00%.....	0	XXX		XXX	
0299997. Totals (Gross).....	80,532,600	XXX	80,532,600	XXX	0
0299999. Totals (Net).....	80,532,600	XXX	80,532,600	XXX	0
Supplementary Contracts with Life Contingencies:					
0300001. 1937 SA 2.50% Immediate.....	3,221		3,221		
0300002. 1983 IAM 7.00% Immediate.....	132,308		132,308		
0300003. 1983 IAM 6.50% Immediate.....	110,990		110,990		
0300004. 2000 IAM 6.25% Immediate.....	47,547		47,547		
0300005. 2000 IAM 6.75% Immediate.....	94,076		94,076		
0300006. 2000 IAM 5.25% Immediate.....	68,061		68,061		
0300007. 2000 IAM 4.50% Immediate.....	75,210		75,210		
0300008. 2000 IAM 4.00% Immediate.....	85,728		85,728		
0399997. Totals (Gross).....	617,141	0	617,141	0	0
0399999. Totals (Net).....	617,141	0	617,141	0	0
Accidental Death Benefits:					
0400001. 1959 ADB with 1958 CSO 2.75%.....	40,700		40,700		
0400002. 1959 ADB with 2001 CSO 3.50%.....	585		585		
0400003. 1959 ADB with 2001 CSO 4.00%.....	3,976		3,976		
0499997. Totals (Gross).....	45,261	0	45,261	0	0
0499999. Totals (Net).....	45,261	0	45,261	0	0
Disability - Active Lives:					
0500001. 1952 DIS with 1958 CSO 2.75%.....	65,533		65,533		
0500002. 1952 DIS with 1980 CSO 2.75% NB.....	19,265		19,265		
0500003. 1952 DIS with 1980 CSO 3.00% NB.....	4,072		4,072		
0500004. 1952 DIS with 2001 CSO 3.00% NB.....	109,923		109,923		
0599997. Totals (Gross).....	198,793	0	198,793	0	0
0599998. Reinsurance ceded.....	5,350		5,350		
0599999. Totals (Net).....	193,443	0	193,443	0	0
Disability - Disabled Lives:					
0600001. 1964 CDT with 2.5% NB.....	1,074,189		1,074,189		
0699997. Totals (Gross).....	1,074,189	0	1,074,189	0	0
0699998. Reinsurance ceded.....	20,662		20,662		
0699999. Totals (Net).....	1,053,527	0	1,053,527	0	0
Miscellaneous Reserves:					
0700001. Experience Refund Reserves for Franchised Plan.....	425,000		425,000		
0799997. Totals (Gross).....	425,000	0	425,000	0	0
0799999. Totals (Net).....	425,000	0	425,000	0	0
9999999. Totals (Net) - Page 3, Line 1.....	158,633,585	0	158,633,585	0	0

**United Transportation Union Insurance Association**

## EXHIBIT 5 - INTERROGATORIES

- |     |  |           |          |
|-----|--|-----------|----------|
| 1.1 | Has the reporting entity ever issued both participating and non-participating contracts?   | Yes [ X ] | No [   ] |
| 1.2 | If not, state which kind is issued   |           |          |
|     |  |           |          |
| 2.1 | Does the reporting entity at present issue both participating and non-participating contracts?   | Yes [ X ] | No [   ] |
| 2.2 | If not, state which kind is issued   |           |          |
|     |  |           |          |
| 3.  | Does the reporting entity at present issue or have in force contracts that contain non-guaranteed elements?<br>If so, attach a statement that contains the determination procedures, answers to the interrogatories and an actuarial opinion as described in the instructions.   | Yes [ X ] | No [   ] |
|     |  |           |          |
| 4.  | Has the reporting entity any assessment or stipulated premium contracts in force? If so, state:  | Yes [   ] | No [ X ] |
| 4.1 | Amount of insurance:   | \$.....   |          |
| 4.2 | Amount of reserve:   | \$.....   |          |
| 4.3 | Basis of reserve:  |           |          |
|     |  |           |          |
| 4.4 | Basis of regular assessments:  |           |          |
|     |  |           |          |
| 4.5 | Basis of special assessments:  |           |          |
|     |  |           |          |
| 4.6 | Assessments collected during year:   | \$.....   |          |
| 5.  | If the contract loan interest rate guaranteed in any one or more of its currently issued contracts is less than 5%, not in advance, state the contract loan rate guarantees on any such contracts.   |           |          |
|     |  |           |          |
| 6.  | Does the reporting entity hold reserves for any annuity contracts that are less than the reserves that would be held on a standard basis?  | Yes [   ] | No [ X ] |
| 6.1 | If so, state the amount of reserve on such contracts on the basis actually held:   | \$.....   |          |
|     |  |           |          |
| 6.2 | That would have been held (on an exact or approximate basis) using the actual ages of the annuitants; the interest rate(s) used in 6.1; and the same mortality basis used by the reporting entity for the valuation of comparable annuity benefits issued to standard lives. If the reporting entity has no comparable annuity benefits for standard lives to be valued, the mortality basis shall be the table most recently approved by the state of domicile for valuing individual annuity benefits:<br>Attach statement of methods employed in their valuation. | \$.....   |          |
|     |  |           |          |
| 7.  | Does the reporting entity have any Synthetic GIC contracts or agreements in effect as of December 31 of the current year?  | Yes [   ] | No [ X ] |
| 7.1 | If yes, state the total dollar amount of assets covered by these contracts or agreements:  | \$.....   |          |
| 7.2 | Specify the basis (fair value, amortized cost, etc.) for determining the amount:   |           |          |
|     |  |           |          |
| 7.3 | State the amount of reserves established for this business:  | \$.....   |          |
| 7.4 | Identify where the reserves are reported in the blank.   |           |          |
|     |  |           |          |
| 8.  | Does the reporting entity have any Contingent Deferred Annuity contracts or agreements in effect as of December of the current year?   | Yes [   ] | No [ X ] |
| 8.1 | If yes, state the total dollar amount of account value covered by these contracts or agreements.   | \$.....   |          |
| 8.2 | State the amount of reserves established for this business.  | \$.....   |          |
| 8.3 | Identify where the reserves are reported in the blank.   |           |          |
|     |  |           |          |
| 9.  | Does the reporting entity have any Guaranteed Lifetime Income Benefit contracts, agreements or riders in effect as of December 31 of the current year?   | Yes [   ] | No [ X ] |
| 9.1 | If yes, state the total dollar amount of any account value associated with these contracts, agreements or riders.  | \$.....   |          |
| 9.2 | State the amount of reserves established for this business.  | \$.....   |          |
| 9.3 | Identify where the reserves are reported in the blank.   |           |          |

## EXHIBIT 5A - CHANGES IN BASES OF VALUATION DURING THE YEAR

1	Valuation Basis		4
	2	3	
Description of Valuation Class	Changed From	Changed To	Increase in Actuarial Reserve Due To Change

**NONE**

EXHIBIT 6 - AGGREGATE RESERVES FOR ACCIDENT AND HEALTH CONTRACTS

	1  Total	2  Collectively Renewable	Other Individual Contracts				
			3  Non- Cancelable	4  Guaranteed Renewable	5  Non-Renewable for Stated Reasons Only	6  Other Accident Only	7  All Other
ACTIVE LIFE RESERVE							
1. Unearned premium reserves.....	.....0						
2. Additional contract reserves (a).....	.....4,108,989			.....4,108,989			
3. Additional actuarial reserves-Asset/Liability analysis.....	.....0						
4. Reserve for future contingent benefits.....	.....0						
5. Aggregate write-ins for reserves.....	.....89,062	.....0	.....0	.....89,062	.....0	.....0	.....0
6. Totals (Gross).....	.....4,198,051	.....0	.....0	.....4,198,051	.....0	.....0	.....0
7. Reinsurance ceded.....	.....0						
8. Totals (Net).....	.....4,198,051	.....0	.....0	.....4,198,051	.....0	.....0	.....0
CLAIM RESERVE							
9. Present value of amounts not yet due on claims.....	.....725,259			.....725,259			
10. Additional actuarial reserves-Asset/Liability analysis.....	.....0						
11. Reserve for future contingent benefits.....	.....0						
12. Aggregate write-ins for reserves.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0
13. Totals (Gross).....	.....725,259	.....0	.....0	.....725,259	.....0	.....0	.....0
14. Reinsurance ceded.....	.....0						
15. Totals (Net).....	.....725,259	.....0	.....0	.....725,259	.....0	.....0	.....0
16. TOTAL (Net).....	.....4,923,310	.....0	.....0	.....4,923,310	.....0	.....0	.....0
17. TABULAR FUND INTEREST.....	.....134,954			.....134,954			

DETAILS OF WRITE-INS							
0501. Premium Waiver.....	.....89,062	.....	.....	.....89,062	.....	.....	.....
0502. ....	.....0	.....	.....	.....	.....	.....	.....
0503. ....	.....0	.....	.....	.....	.....	.....	.....
0598. Summary of remaining write-ins for Line 5 from overflow page.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0
0599. Totals (Lines 0501 through 0503+0598) (Line 5 above)	.....89,062	.....0	.....0	.....89,062	.....0	.....0	.....0
1201. ....	.....0	.....	.....	.....	.....	.....	.....
1202. ....	.....0	.....	.....	.....	.....	.....	.....
1203. ....	.....0	.....	.....	.....	.....	.....	.....
1298. Summary of remaining write-ins for Line 12 from overflow page.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0
1299. Totals (Lines 1201 through 1203+1298) (Line 12 above)	.....0	.....0	.....0	.....0	.....0	.....0	.....0

(a) Attach statement as to valuation standard used in calculating this reserve, specify reserve bases, interest rates and method.

EXHIBIT 7 - DEPOSIT-TYPE CONTRACTS

	1	2	3	4	5	6
	Total	Guaranteed Interest Contracts	Annuities Certain	Supplemental Contracts	Dividend Accumulations or Refunds	Premium and Other Deposit Funds
1. Balance at beginning of the year before reinsurance.....	.....5,349,761	.....	.....	.....5,130,143	.....216,840	.....2,778
2. Deposits received during the year.....	.....860,839	.....	.....	.....855,950	.....4,889	.....
3. Investment earnings credited to the account.....	.....5,029	.....	.....	.....	.....447	.....4,582
4. Other net change in reserves.....	.....0	.....	.....	.....	.....	.....
5. Fees and other charges assessed.....	.....0	.....	.....	.....	.....	.....
6. Surrender charges.....	.....0	.....	.....	.....	.....	.....
7. Net surrender or withdrawal payments.....	.....1,408,195	.....	.....	.....1,381,383	.....26,812	.....
8. Other net transfers to or (from) Separate Accounts.....	.....0	.....	.....	.....	.....	.....
9. Balance at the end of the current year before reinsurance (Lines 1 + 2 + 3 + 4 - 5 - 6 - 7 - 8).....	.....4,807,434	.....0	.....0	.....4,604,710	.....195,364	.....7,360
10. Reinsurance balance at the beginning of the year.....	.....0	.....	.....	.....	.....	.....
11. Net change in reinsurance assumed.....	.....0	.....	.....	.....	.....	.....
12. Net change in reinsurance ceded.....	.....0	.....	.....	.....	.....	.....
13. Reinsurance balance at the end of the year (Lines 10 + 11 - 12).....	.....0	.....0	.....0	.....0	.....0	.....0
14. Net balance at the end of current year after reinsurance (Lines 9 + 13).....	.....4,807,434	.....0	.....0	.....4,604,710	.....195,364	.....7,360

**EXHIBIT 8 - PART 1 - CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS**

Liability End of Current Year

	1	2	Ordinary			6	Group		Accident and Health		
			3	4	5		7	8	9	10	11
	Total	Industrial Life	Life Insurance	Individual Annuities	Supplementary Contracts	Credit Life (Group and Individual)	Life Insurance	Annuities	Group	Credit (Group and Individual)	Other
1. Due and unpaid:											
1.1 Direct.....	33,211		33,211								
1.2 Reinsurance assumed.....	0										
1.3 Reinsurance ceded.....	0										
1.4 Net.....	33,211	0	33,211	0	0	0	0	0	0	0	0
2. In course of settlement:											
2.1 Resisted:											
2.11 Direct.....	0										
2.12 Reinsurance assumed.....	0										
2.13 Reinsurance ceded.....	0										
2.14 Net.....	0	0	(b).....0	(b).....0	0	(b).....0	(b).....0	0	0	0	0
2.2 Other:											
2.21 Direct.....	747,640		658,936								88,704
2.22 Reinsurance assumed.....	0										
2.23 Reinsurance ceded.....	0										
2.24 Net.....	747,640	0	(b).....658,936	(b).....0	0	(b).....0	(b).....0	0	(b).....0	(b).....0	(b).....88,704
3. Incurred but unreported:											
3.1 Direct.....	351,604		286,321								65,283
3.2 Reinsurance assumed.....	0										
3.3 Reinsurance ceded.....	0										
3.4 Net.....	351,604	0	(b).....286,321	(b).....0	0	(b).....0	(b).....0	0	(b).....0	(b).....0	(b).....65,283
4. Totals:											
4.1 Direct.....	1,132,455	0	978,468	0	0	0	0	0	0	0	153,987
4.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0	0
4.4 Net.....	1,132,455	(a).....0	(a).....978,468	0	0	0	(a).....0	0	0	0	153,987

(a) Including matured endowments (but not guaranteed annual pure endowments) unpaid amounting to \$.....0 in Column 2, \$.....33,211 in Column 3 and \$.....0 in Column 7.

(b) Include only portion of disability and accident and health claim liabilities applicable to assumed "accrued" benefits. Reserves (including reinsurance assumed and net of reinsurance ceded) for unaccrued benefits for Ordinary Life Insurance \$.....0, Individual Annuities \$.....0, Credit Life (Group and Individual) \$.....0, and Group Life \$.....0, are included in Page 3, Line 1, (See Exhibit 5, Section on Disability Disabled Lives); and for Group Accident and Health \$.....0, Credit (Group and Individual) Accident and Health \$.....0 and Other Accident and Health \$.....0 are included in Page 3, Line 2, (See Exhibit 6, Claim Reserve).

**EXHIBIT 8 - PART 2 - CONTRACT CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS**

Incurred During the Year

	1	2	Ordinary			6	Group		Accident and Health		
			3	4	5		7	8	9	10	11
	Total	Industrial Life (a)	Life Insurance (b)	Individual Annuities	Supplementary Contracts	Credit Life (Group and Individual)	Life Insurance (c)	Annuities	Group	Credit (Group and Individual)	Other
1. Settlements during the year:											
1.1 Direct.....	13,934,260		3,883,495	7,355,035	1,402,904						1,292,826
1.2 Reinsurance assumed.....	0										
1.3 Reinsurance ceded.....	63,698		63,698								
1.4 Net.....	(d) 13,870,562	0	3,819,797	7,355,035	1,402,904	0	0	0	0	0	1,292,826
2. Liability December 31, current year from Part 1:											
2.1 Direct.....	1,132,455	0	978,468	0	0	0	0	0	0	0	153,987
2.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0	0
2.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0	0
2.4 Net.....	1,132,455	0	978,468	0	0	0	0	0	0	0	153,987
3. Amounts recoverable from reinsurers Dec. 31, current year.....	0										
4. Liability December 31, prior year:											
4.1 Direct.....	1,285,448		1,147,863								137,585
4.2 Reinsurance assumed.....	0										
4.3 Reinsurance ceded.....	0										
4.4 Net.....	1,285,448	0	1,147,863	0	0	0	0	0	0	0	137,585
5. Amounts recoverable from reinsurers December 31, prior year.....	0										
6. Incurred benefits:											
6.1 Direct.....	13,781,267	0	3,714,100	7,355,035	1,402,904	0	0	0	0	0	1,309,228
6.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0	0
6.3 Reinsurance ceded.....	63,698	0	63,698	0	0	0	0	0	0	0	0
6.4 Net.....	13,717,569	0	3,650,402	7,355,035	1,402,904	0	0	0	0	0	1,309,228

(a) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$.....0 in Line 1.1, \$.....0 in Line 1.4, \$.....0 in Line 6.1 and \$.....0 in line 6.4.

(b) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$.....0 in Line 1.1, \$....140,715 in Line 1.4, \$.....137,920 in Line 6.1 and \$.....0 in line 6.4.

(c) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$.....0 in Line 1.1, \$.....0 in Line 1.4, \$.....0 in Line 6.1 and \$.....0 in line 6.4.

(d) Includes \$.....0 premiums waived under total and permanent disability benefits.



EXHIBIT OF NONADMITTED ASSETS

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D).....			0
2. Stocks (Schedule D):			
2.1 Preferred stocks.....			0
2.2 Common stocks.....			0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens.....			0
3.2 Other than first liens.....			0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company.....			0
4.2 Properties held for the production of income.....			0
4.3 Properties held for sale.....			0
5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA).....			0
6. Contract loans.....			0
7. Derivatives (Schedule DB).....			0
8. Other invested assets (Schedule BA).....			0
9. Receivables for securities.....			0
10. Securities lending reinvested collateral assets (Schedule DL).....			0
11. Aggregate write-ins for invested assets.....	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	0	0	0
13. Title plants (for Title insurers only).....			0
14. Investment income due and accrued.....			0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection.....			0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.....			0
15.3 Accrued retrospective premiums and contracts subject to redetermination.....			0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers.....			0
16.2 Funds held by or deposited with reinsured companies.....			0
16.3 Other amounts receivable under reinsurance contracts.....			0
17. Amounts receivable relating to uninsured plans.....			0
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0
18.2 Net deferred tax asset.....			0
19. Guaranty funds receivable or on deposit.....			0
20. Electronic data processing equipment and software.....			0
21. Furniture and equipment, including health care delivery assets.....			0
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0
23. Receivables from parent, subsidiaries and affiliates.....			0
24. Health care and other amounts receivable.....			0
25. Aggregate write-ins for other-than-invested assets.....	0	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	0	0	0
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0
28. TOTALS (Lines 26 and 27).....	0	0	0

DETAILS OF WRITE-INS

1101. ....			0
1102. ....			0
1103. ....			0
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....	0	0	0
2501. ....			0
2502. ....			0
2503. ....			0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	0	0	0

NOTES TO FINANCIAL STATEMENTS

Note 1 – Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

United Transportation Union Insurance Association's (Insurance Association or UTUIA), statutory-basis financial statements are prepared in accordance with the NAIC's *Accounting Practices and Procedures Manual*. The United Transportation Union Insurance Association, a fraternal benefit society, is domiciled in Ohio. The Insurance Association's primary business is providing life, accident and health insurance and annuities to members of the United Transportation Union (Union) and to members of other transportation industries. Life insurance and annuities comprise more than 75% of UTUIA's premiums, with accident and health products representing the balance. UTUIA sells insurance throughout most of the United States with the highest concentrations per schedule T.

	SSAP #	F/S Page	F/S Line #	2016	2015
<b>NET INCOME</b>					
(1) United Transportation Union Insurance Association state basis (Page 4, Line 35, Columns 1 & 2)	XXX	XXX	XXX	\$ 1,680,940	\$ 2,915,816
(2) State Prescribed Practices that increase/decrease NAIC SAP					
(3) State Permitted Practices that increase/decrease NAIC SAP					
(4) NAIC SAP (1 – 2 – 3 = 4)	XXX	XXX	XXX	\$ 1,680,940	\$ 2,915,816
<b>SURPLUS</b>					
(5) United Transportation Union Insurance Association state basis (Page 3, line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 46,844,079	\$ 44,786,412
(6) State Prescribed Practices that increase/decrease NAIC SAP					
(7) State Permitted Practices that increase/decrease NAIC SAP					
(8) NAIC SAP (5 – 6 – 7 = 8)	XXX	XXX	XXX	\$ 46,844,079	\$ 44,786,412

B. Preparation of financial statements requires management to make estimates and assumptions that affect amounts reported in the financial statements and accompanying notes. Such estimates and assumptions could change in the future as more information becomes known, which could impact the amounts reported and disclosed herein.

C. Accounting Policy:

Basis of Presentation

The accompanying financial statements of the Insurance Association have been prepared in conformity with statutory accounting practices as prescribed. Such practices vary from accounting principles generally accepted in the United States (GAAP). The more significant variances from GAAP are as follows:

Investments

Investments in bonds are reported at amortized cost or market value based on their National Association of Insurance Commissioners (NAIC) rating; but for GAAP, such fixed maturity investments are designated at purchase as either held-to-maturity, trading, or available-for-sale. Held-to-maturity fixed investments would be reported at amortized cost, and the remaining fixed maturity investments would be reported at fair value, with unrealized holding gains and losses reported in operations for those designated as trading or as a separate component of surplus for those designated as available-for-sale.

Fair values of certain investments in bonds and stocks are based on values specified by the NAIC rather than on actual or estimated market values. Changes between cost and admitted asset investment amounts are credited or charged directly to unassigned surplus rather than to a separate surplus account.

Under a formula prescribed by the NAIC, the Insurance Association defers the portion of realized capital gains and losses on sales of fixed income investments, that is attributable to changes in the general level of interest rates, and amortizes those deferrals over the remaining period to maturity. That net deferral is reported as the interest maintenance reserve (IMR), a required statutory reserve, in the accompanying balance sheets. Realized capital gains and losses are reported in income net of transfers to the IMR.

The asset valuation reserve (AVR) provides a valuation allowance for invested assets. The AVR is determined by a NAIC prescribed formula and is reported as a liability rather than unassigned surplus. Under GAAP, realized capital gains and losses are reported in the income statement in the period that the asset giving rise to the gains or losses are sold and valuation allowances are provided when there has been a decline in value deemed other than temporary, in which case, the provision for such declines are charged to income.

Policy Acquisition Costs

**NOTES TO FINANCIAL STATEMENTS**

The costs of acquiring and renewing business are expensed when incurred. Under GAAP, acquisition costs related to traditional life insurance, to the extent recoverable from future policy revenues, are deferred and amortized over the premium-paying period of the related policies using assumptions consistent with those used in computing policy benefit reserves. For universal life insurance and investment products, to the extent recoverable from future gross profits, deferred policy acquisition costs are amortized generally in proportion to the present value of expected gross profits from surrender charges and investment, mortality, and expense margins.

***Nonadmitted Assets***

Certain assets designated as non-admitted, principally prepaid insurance and loans to Field Supervisors, are excluded from the accompanying balance sheets and are charged directly to unassigned surplus.

***Certificate Reserves***

Certain certificate reserves are calculated based on statutorily required interest and mortality assumptions rather than on estimated expected experience and actual account balances.

***Certificate Dividends***

Certificate holder dividends are recognized when declared rather than over the term of the related policies.

*Other significant accounting practices are as follows:*

***Investments***

Bonds, common stocks, short-term investments, and other investments are stated at values prescribed by the NAIC as follows:

Bonds not backed by other loans are stated at amortized cost using the interest method .

Loan-backed bonds and structured securities are valued at amortized cost using the interest method including anticipated prepayments. Prepayment assumptions are obtained from dealer survey values and data from public sources including Bloomberg and are consistent with the current interest rate and economic environment. The retrospective adjustment method is used to record adjustments to bond premiums and discounts

Short-term investments include money market funds.

Common stocks, mutual funds and variable annuity investments are reported at market value as determined by the Securities Valuation Office of the NAIC.

Certificate loans are reported at unpaid principal balances

***Cash and Short-Term Investments***—The carrying amounts reported in the accompanying balance sheets for these financial instruments approximate their fair values.

***Investment Securities***—the fair values for fixed maturity securities are based on market values prescribed by the Securities Valuation Office of the NAIC or quoted market prices, where available. For investments for which the NAIC does not provide a value, the amortized cost amount is substituted. The fair values for equity securities are based on market values prescribed by the Securities Valuation Office of the NAIC.

***Certificate Loans***—the fair values for certificate loans are estimated using discounted cash flow analyses, using interest rates currently being offered for similar loans to borrowers with similar credit ratings.

***Investment Contracts***—the fair values for UTUIA’s liabilities under investment-type insurance contracts are estimated as the amount payable to the contract holder upon demand. As of December 31, 2016 the carrying amount of such liabilities approximates the surrender value.

The fair values of the Insurance Association’s liabilities for insurance contracts, other than investment-type contracts, are not required to be disclosed.

***Claims and Claim Adjustment Expenses***

NOTES TO FINANCIAL STATEMENTS

Claims and claim adjustment expenses on accident and health policies represent the estimated ultimate net cost of all reported and unreported claims incurred prior to year end. The reserves for unpaid claims and claim adjustment expenses are estimated using individual case-basis valuations and statistical analyses. Those estimates are subject to the effects of trends in claim severity and frequency. Although considerable variability is inherent in such estimates, management believes that the reserves for claims and claim adjustment expenses are adequate. The estimates are continually reviewed and adjusted as necessary as experience develops or new information becomes known; such adjustments are included in current operations.

D. Going concern is not required until June 1st, 2018..

Note 2 – Accounting Changes and Corrections of Errors

There were no material changes in accounting principles or correction of errors in 2016.

Note 3 – Business Combinations and Goodwill

UTUIA had no events requiring disclosure subject to this footnote.

Note 4 – Discontinued Operations

UTUIA had no events requiring disclosure subject to this footnote.

Note 5 – Investments

- A – UTUIA had no mortgage loans
- B – UTUIA had no debt restructuring
- C. – UTUIA had no reverse mortgages

D. Loan Backed Securities

- 1. Prepayment assumptions for mortgage-backed/loan-backed and structured securities were obtained from broker-dealer survey values or internal estimates.
- 2. Prepayment model sources are Bloomberg median and IDC pricing services
- 3. No retrospective to prospective changes were made as a result of negative yield calculations.
- 4. No impairments
- 5. No temporary impairments

- E. – UTUIA had no repurchase agreements
- F. – UTUIA had no real estate transactions involving impairment loss or retail land sales operations.
- G. – UTUIA had no low-income housing tax credits.
- H. – UTUIA had no restricted assets.
- I – UTUIA has no working capital finance investments.
- J – UTUIA does not offset or net assets or net assets or liabilities.
- K – UTUIA has no structured notes.

A. Mortgage Loans, including Mezzanine Real Estate Loans

- (1) The maximum and minimum lending rates for mortgage loans during 2016 were:
- (2) The maximum percentage of any one loan to the value of security at the time of the loan, exclusive of insured or guaranteed or purchase money mortgage was \_\_\_\_%.
- (3) Taxes, assessments and any amounts advanced and not included in the mortgage loan total

Current Year

Prior Year

\$

\$

(4) Age Analysis of Mortgage Loans:

		Residential			Commercial		Mezzanine	Total	
		Farm	Insured	All Other	Insured	All Other			
a.	Current Year								
1.	Recorded Investment (All)								
(a)	Current	\$	\$	\$	\$	\$	\$		
(b)	30-59 Days Past Due								
(c)	60-89 Days Past Due								
(d)	90-179 Days Past Due								
(e)	180+ Days Past Due								
2.	Accruing Interest 90-179 Days Past Due								
(a)	Recorded Investment	\$	\$	\$	\$	\$	\$		
(b)	Interest	\$	\$	\$	\$	\$	\$		

NOTES TO FINANCIAL STATEMENTS

		Accrued						
	3.	Accruing Interest 180+ Days Past Due						
	(a)	Recorded Investment	\$	\$	\$	\$	\$	\$
	(b)	Interest Accrued						
	4.	Interest Reduced						
	(a)	Recorded Investment	\$	\$	\$	\$	\$	\$
	(b)	Number of Loans						
	(c)	Percent Reduced		%	%	%	%	%
\$	b.	Prior Year						
	1.	Recorded Investment (All)						
	(a)	Current	\$	\$	\$	\$	\$	\$
	(b)	30-59 Days Past Due						
	(c)	60-89 Days Past Due						
	(d)	90-179 Days Past Due						
	(e)	180+ Days Past Due						
	2.	Accruing Interest 90-179 Days Past Due						
	(a)	Recorded Investment	\$	\$	\$	\$	\$	\$
	(b)	Interest Accrued						
	3.	Accruing Interest 180+ Days Past Due						
	(a)	Recorded Investment	\$	\$	\$	\$	\$	\$
	(b)	Interest Accrued						
	4.	Interest Reduced						
	(a)	Recorded Investment	\$	\$	\$	\$	\$	\$
	(b)	Number of Loans						
	(c)	Percent Reduced		%	%	%	%	%

(5) Investment Impaired Loans With or Without Allowance for Credit Losses:

		Residential			Commercial		Mezzanine	Total
		Farm	Insured	All Other	Insured	All Other		
a.	Current Year							
1.	With Allowance for Credit Losses	\$	\$	\$	\$	\$	\$	\$
2.	No Allowance for Credit Losses							
b.	Prior Year							
1.	With Allowance for Credit Losses	\$	\$	\$	\$	\$	\$	\$
2.	No Allowance for Credit Losses							

(6) Investment in Impaired Loans – Average Recorded Investment, Interest Income Recognized, Recorded Investment on Nonaccrual Status and Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting:

		Residential			Commercial		Mezzanine	Total
		Farm	Insured	All Other	Insured	All Other		
a.	Current Year							
1.	Average Recorded Investment	\$	\$	\$	\$	\$	\$	\$
2.	Interest Income Recognized							
3.	Recorded Investments on Nonaccrual Status							
4.	Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting							
b.	Prior Year							
1.	Average Recorded Investment	\$	\$	\$	\$	\$	\$	\$
2.	Interest Income Recognized							
3.	Recorded							

NOTES TO FINANCIAL STATEMENTS

	Investments on Nonaccrual Status							
4.	Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting							

		Current Year	Prior Year
(7)	Allowance for credit losses:		
a.	Balance at beginning of period	\$	\$
b.	Additions charged to operations		
c.	Direct write-downs charged against the allowances		
d.	Recoveries of amounts previously charged off		
e.	Balance at end of period	\$	\$

		Current Year
(8)	Mortgage Loans Derecognized as a Result of Foreclosure:	
a.	Aggregate amount of mortgage loans derecognized	\$
b.	Real estate collateral recognized	\$
c.	Other collateral recognized	\$
d.	Receivable recognized from a government guarantee of the foreclosed mortgage loan	\$

(9) The company recognizes interest income on its impaired loans \_\_\_\_\_

B. Debt Restructuring

		Current Year	Prior Year
(1)	The total recorded investment in restructured loans, as of year-end	\$	\$
(2)	The realized capital losses related to these loans		
(3)	Total contractual commitments to extend credit to debtors owing receivables whose terms have been modified in troubled debt restructurings	\$	\$

(4)

C. Reverse Mortgages

- (1)
- (2)
- (3) At December 31, 2016, the actuarial reserve of \$ reduced the asset value of the group of reverse mortgages.
- (4) United Transportation Union Insurance Association recorded an unrealized loss \$ as a result of the re-estimates of the cash flows.

D. Loan-Backed Securities

(1)

(2)		1 Amortized Cost Basis Before Other-than-Temporar y Impairment	2a  Other-than-Temporary Impairment Recognized in Loss	2b	c  Fair Value 1 – (2a + 2b)
	OTTI recognized 1 <sup>st</sup> Quarter	Interest		Non-Interest	
a.	Intent to sell	\$	\$	\$	\$
b.	Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis				
c.	Total 1 <sup>st</sup> Quarter	\$	\$	\$	\$
	OTTI recognized 2 <sup>nd</sup> Quarter				
d.	Intent to sell	\$	\$	\$	\$
e.	Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis				
f.	Total 2 <sup>nd</sup> Quarter	\$	\$	\$	\$
	OTTI recognized 3 <sup>rd</sup> Quarter				
g.	Intent to sell	\$	\$	\$	\$
h.	Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis				
i.	Total 3 <sup>rd</sup> Quarter	\$	\$	\$	\$
	OTTI recognized 4 <sup>th</sup> Quarter				
j.	Intent to sell	\$	\$	\$	\$
k.	Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis				
l.	Total 4 <sup>th</sup> Quarter	\$	\$	\$	\$
m.	Annual aggregate total	XXX	\$	\$	XXX

NOTES TO FINANCIAL STATEMENTS

(3) Recognized OTTI securities

CUSIP	Book/Adjusted Carrying Value Amortized Cost Before Current Period OTTI	Present Value of Projected Cash Flows	Recognized Other-Than-Temporary Impairment	Amortized Cost After Other-Than-Temporary Impairment	Fair Value at Time of OTTI	Date of Financial Statement Where Reported
	\$	\$	\$	\$	\$	
Total			\$			

(4) All impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains):

a.	The aggregate amount of unrealized losses:	1.	Less than 12 Months	\$
		2.	12 Months or Longer	\$
b.	The aggregate related fair value of securities with unrealized losses:	1.	Less than 12 Months	\$
		2.	12 Months or Longer	\$

(5)

E. Repurchase Agreements and/or Securities Lending Transactions

(1)

(2)

(3) Collateral Received

0	Aggregate Amount Collateral Received		Fair Value
	1.	Repurchase Agreement	
	(a)	Open	\$
	(b)	30 Days or Less	
	(c)	31 to 60 Days	
	(d)	61 to 90 Days	
	(e)	Greater Than 90 Days	
	(f)	Sub-Total	
	(g)	Securities Received	
	(h)	Total Collateral Received	\$
	2.	Securities Lending	
	(a)	Open	\$
	(b)	30 Days or Less	
	(c)	31 to 60 Days	
	(d)	61 to 90 Days	
	(e)	Greater Than 90 Days	
	(f)	Sub-Total	
	(g)	Securities Received	
	(h)	Total Collateral Received	\$
	3.	Dollar Repurchase Agreement	
	(a)	Open	\$
	(b)	30 Days or Less	
	(c)	31 to 60 Days	
	(d)	61 to 90 Days	
	(e)	Greater Than 90 Days	
	(f)	Sub-Total	
	(g)	Securities Received	
	(h)	Total Collateral Received	\$
b.	The fair value of that collateral and of the portion of that collateral that it has sold or repledged		\$

c.

(4)

(5) Collateral Reinvestment

a.	Aggregate Amount Collateral Reinvested		Amortized Cost	Fair Value
	1.	Repurchase Agreement		
	(a)	Open	\$	\$
	(b)	30 Days or Less		
	(c)	31 to 60 Days		
	(d)	61 to 90 Days		
	(e)	91 to 120 Days		
	(f)	121 to 180 Days		
	(g)	181 to 365 Days		
	(h)	1 to 2 Years		
	(i)	2 to 3 Years		
	(j)	Greater Than 3 Years		
	(k)	Sub-Total		
	(l)	Securities Received		
	(m)	Total Collateral Reinvested	\$	\$
	2.	Securities Lending		
	(a)	Open	\$	\$
	(b)	30 Days or Less		

NOTES TO FINANCIAL STATEMENTS

		(c)	31 to 60 Days		
		(d)	61 to 90 Days		
		(e)	91 to 120 Days		
		(f)	121 to 180 Days		
		(g)	181 to 365 Days		
		(h)	1 to 2 Years		
		(i)	2 to 3 Years		
		(j)	Greater Than 3 Years		
		(k)	Sub-Total		
		(l)	Securities Received		
		(m)	Total Collateral Reinvested	\$	\$
	3.		Dollar Repurchase Agreement		
		(a)	Open	\$	\$
		(b)	30 Days or Less		
		(c)	31 to 60 Days		
		(d)	61 to 90 Days		
		(e)	91 to 120 Days		
		(f)	121 to 180 Days		
		(g)	181 to 365 Days		
		(h)	1 to 2 Years		
		(i)	2 to 3 Years		
		(j)	Greater Than 3 Years		
		(k)	Sub-Total		
		(l)	Securities Received		
		(m)	Total Collateral Reinvested	\$	\$

b.

(6)

(7) Collateral for Securities Lending transactions that extend beyond one year from the reporting date.

Description of Collateral	Amount
	\$
Total Collateral extending beyond one year of the reporting date	\$

F. Real Estate

(1)

(2)

(3)

(4)

(5)

(6)

(7)

G. Investments in Low-Income Housing Trade Credits (LIHTC)

(1)

(2)

(3)

(4)

(5)

(6)

(7)

H. Restricted Assets

(1) Restricted Assets (Including Pledged)

Restricted Asset Category	Gross (Admitted & Nonadmitted) Restricted							Current Year			
	Current Year							8	9	Percentage	
	1	2	3	4	5	6	7			10	11
	Total General Account (G/A)	G/A Supporting S/A Activity (a)	Total Separate Account (S/A) Restricted Assets	S/A Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)	Total Nonadmitted Restricted	Total Admitted Restricted (5 minus 8)	Gross (Admitted & Nonadmitted) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (d)
a. Subject to contractual obligation for which liability is not shown											



NOTES TO FINANCIAL STATEMENTS

b. Collateral held under security lending arrangements											
c. Subject to repurchase agreements											
d. Subject to reverse repurchase agreements											
e. Subject to dollar repurchase agreements											
f. Subject to dollar reverse repurchase agreements											
g. Placed under option contracts											
h. Letter stock or securities restricted as to sale – excluding FHLB capital stock											
i. FHLB capital stock											
j. On deposit with states											
k. On deposit with other regulatory bodies											
l. Pledged as collateral to FHLB (including assets backing funding agreements)											
m. Pledged as collateral not captured in other categories											
n. Other restricted assets											
o. Total Restricted Assets	\$	\$	\$	\$	\$	\$	\$		\$		

- (a) Subset of column 1  
(b) Subset of column 3  
(c) Column 5 divided by Asset Page, Column 1, Line 28  
(d) Column 9 divided by Asset Page, Column 3, Line 28

- (2) Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contacts that Share Similar Characteristics, Such as Reinsurance and Derivatives, are Reported in the Aggregate)

Description of Assets	Gross (Admitted & Nonadmitted) Restricted							8	Percentage	
	Current Year					6	7		9	10
	1	2	3	4	5					
	Total General Account (G/A)	G/A Supporting S/A Activity (a)	Total Separate Account (S/A) Restricted Assets	S/A Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)	Total Current Year Admitted Restricted	Gross (Admitted & Nonadmitted) Restricted to Total Assets	Admitted Restricted to Total Admitted Assets
	\$	\$	\$	\$	\$	\$	\$	\$		
Total (c)	\$	\$	\$	\$	\$	\$	\$	\$		

- (a) Subset of column 1  
(b) Subset of column 3  
(c) Total Line for Columns 1 through 7 should equal 5H(1)n Columns 1 through 7 respectively and Total Line for Columns 8 through 10 should equal 5H(1)n Columns 9 through 11 respectively.

- (3) Detail of Other Restricted Assets (Contracts that Share Similar Characteristics, such as Reinsurance and Derivatives, are Reported in the Aggregate)

Description of Assets	Gross (Admitted & Nonadmitted) Restricted							8	Percentage	
	Current Year					6	7		9	10
	1	2	3	4	5					
	Total General Account (G/A)	G/A Supporting S/A Activity (a)	Total Separate Account (S/A) Restricted Assets	S/A Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)	Total Current Year Admitted Restricted	Gross (Admitted & Nonadmitted) Restricted to Total Assets	Admitted Restricted to Total Admitted Assets
	\$	\$	\$	\$	\$	\$	\$	\$		
Total (c)	\$	\$	\$	\$	\$	\$	\$	\$		

- (a) Subset of column 1  
(b) Subset of column 3  
(c) Total Line for Columns 1 through 7 should equal 5H(1)m Columns 1 through 7 respectively and Total Line for Columns 8 through 10 should equal 5H(1)m Columns 9 through 11 respectively.

- (4) Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements

Collateral Assets	1 Book/Adjusted Carrying Value (BACV)	2 Fair Value	3 % of BACV to Total Assets (Admitted and Nonadmitted) *	4 % of BACV to Total Admitted Assets **
a. Cash	\$	\$	%	%
b. Schedule D, Part 1			%	%
c. Schedule D, Part 2, Sec. 1			%	%
d. Schedule D, Part 2, Sec. 2			%	%
e. Schedule B			%	%

NOTES TO FINANCIAL STATEMENTS

f. Schedule A			%	%
g. Schedule BA, Part 1			%	%
h. Schedule DL, Part 1			%	%
i. Other			%	%
j. Total Collateral Assets (a+b+c+d+e+f+g+i)	\$	\$	%	%

\*. Column 1 divided by Asset Page, Line 26 (Column 1)  
\*\* Column 1 divided by Asset Page, Line 26, (Column 3)

1		2
Amount		% of Liability to Total Liabilities
k. Recognized Obligation to Return Collateral Asset	\$	%

\* Column 1 divided by Liability Page, Line 26 (Column 1)

I. Working Capital Finance Investments

(1) Aggregate Working Capital Finance Investments (WCFI) Book/Adjusted Carrying Value by NAIC Designation:

		Gross Asset CY	Non-admitted Asset CY	Net Admitted Asset CY
a.	WCFI Designation 1	\$	\$	\$
b.	WCFI Designation 2			
c.	WCFI Designation 3			
d.	WCFI Designation 4			
e.	WCFI Designation 5			
f.	WCFI Designation 6			
g.	Total	\$	\$	\$

(2) Aggregate Maturity Distribution on the Underlying Working Capital Finance Programs

		Book/Adjusting Carrying Value
a.	Up to 180 Days	\$
b.	181 to 365 Days	
c.	Total	\$

J. Offsetting and Netting of Assets and Liabilities

	Gross Amount Recognized	Amount Offset	Net Amount Presented on Financial Statements
(1) Assets			
	\$	\$	\$
(2) Liabilities			
	\$	\$	\$

K. Structured Notes

	Actual Cost	Fair Value	Book/Adjusted Carrying Value	Mortgage-Referenced Security (YES/NO)
CUSIP Identification				
	\$	\$	\$	
XXX	\$	\$	\$	XXX

L. 5\* Securities

Investment	Number of 5* Securities		Aggregate BACV		Aggregate Fair Value	
	Current Year	Prior Year	Current Year	Prior Year	Current Year	Prior Year
(1) Bonds – AC			\$	\$	\$	\$
(2) Bonds – FV			\$	\$	\$	\$
(3) Preferred Stock – AC			\$	\$	\$	\$
(4) Preferred Stock – FV			\$	\$	\$	\$
(5) Total (1 + 2 + 3 + 4)			\$	\$	\$	\$

AC – Amortized Cost                      FV – Fair Value

Note 6 – Joint Ventures, Partnerships and Limited Liability Companies

UTUIA had no events requiring disclosure subject to this footnote.

Note 7 – Investment Income

A. All investment income due and accrued excludes amounts that are over 90 days old or in default.

B. No amounts were excluded at 12/31/16.

Note 8 – Derivative Instruments

UTUIA had no activity requiring disclosure subject to this footnote.

Note 9 – Income Taxes

The Insurance Association qualifies under Section 501(c)(8) of the Internal Revenue Code and is, therefore, not subject to income tax under present income tax laws. Accordingly, no provision for income taxes has

NOTES TO FINANCIAL STATEMENTS

been made in the financial statements.

UTUIA had no activity requiring disclosure subject to this footnote.

A. Deferred Tax Assets/(Liabilities)

1. Components of Net Deferred Tax Asset/(Liability)

	2016			2015			Change		
	1 Ordinary	2 Capital	3 (Col 1+2) Total	4 Ordinary	5 Capital	6 (Col 4+5) Total	7 (Col 1-4) Ordinary	8 (Col 2-5) Capital	9 (Col 7+8) Total
a. Gross deferred tax assets	\$	\$	\$	\$	\$	\$	\$	\$	\$
b. Statutory valuation allowance adjustment									
c. Adjusted gross deferred tax assets (1a-1b)									
d. Deferred tax assets nonadmitted									
e. Subtotal net admitted deferred tax asset (1c-1d)									
f. Deferred tax liabilities									
g. Net admitted deferred tax assets/(net deferred tax liability) (1e-1f)	\$	\$	\$	\$	\$	\$	\$	\$	\$

2. Admission Calculation Components

	2016			2015			Change		
	1 Ordinary	2 Capital	3 (Col 1+2) Total	4 Ordinary	5 Capital	6 (Col 4+5) Total	7 (Col 1-4) Ordinary	8 (Col 2-5) Capital	9 (Col 7+8) Total
a. Federal income taxes paid in prior years recoverable through loss carrybacks	\$	\$	\$	\$	\$	\$	\$	\$	\$
b. Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation. (The lesser of 2(b)1 and 2(b)2 below:									
Adjusted gross deferred tax assets expected to be realized following the balance sheet date									
Adjusted gross deferred tax assets allowed per limitation threshold									
c. Adjusted gross deferred tax assets (excluding the amount of deferred tax assets from 2(a) and 2(b) above) offset by gross deferred tax liabilities									
d. Deferred tax assets admitted as the result of application of SSAP 101. Total	\$	\$	\$	\$	\$	\$	\$	\$	\$

NOTES TO FINANCIAL STATEMENTS

(2(a)+2(b)+2(c))								
------------------	--	--	--	--	--	--	--	--

3. Other Admissibility Criteria

		2016	2015
a.	Ratio percentage used to determine recovery period and threshold limitation amount	%	%
b.	Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)2 above	\$	\$

4. Impact of Tax Planning Strategies

(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.

	12/31/2016		12/31/2015		Change	
	1	2	3	4	5	6
	Ordinary	Capital	Ordinary	Capital	(Col. 1-3) Ordinary	(Col. 2-4) Capital
1. Adjusted gross DTAs amount from Note 9A1(c)	\$	\$	\$	\$	\$	\$
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies	%	%	%	%	%	%
3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$	\$	\$	\$	\$	\$
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	%	%	%	%	%	%

(b) Does the company's tax planning strategies include the use of reinsurance?

B. Deferred Tax Liabilities Not Recognized

C. Current and Deferred Income Taxes

1. Current Income Tax

	1	2	3
	2016	2015	(Col 1-2) Change
a. Federal	\$	\$	\$
b. Foreign			
c. Subtotal	\$	\$	\$
d. Federal income tax on net capital gains			
e. Utilization of capital loss carry-forwards			
f. Other			
g. Federal and Foreign income taxes incurred	\$	\$	\$

2. Deferred Tax Assets

	1	2	3
	2016	2015	(Col 1-2) Change
a. Ordinary:			
1. Discounting of unpaid losses	\$	\$	\$
2. Unearned premium reserve			
3. Policyholder reserves			
4. Investments			
5. Deferred acquisition costs			
6. Policyholder dividends accrual			
7. Fixed assets			
8. Compensation and benefits accrual			
9. Pension accrual			
10. Receivables - nonadmitted			
11. Net operating loss carry-forward			
12. Tax credit carry-forward			
13. Other (including items <5% of total ordinary tax assets)			
99. Subtotal	\$	\$	\$
b. Statutory valuation allowance adjustment			
c. Nonadmitted			
d. Admitted ordinary deferred tax assets (2a99-2b-2c)	\$	\$	\$
e. Capital:			
1. Investments	\$	\$	\$

NOTES TO FINANCIAL STATEMENTS

2. Net capital loss carry-forward			
3. Real estate			
4. Other (including items <5% of total capital tax assets)			
99. Subtotal	\$	\$	\$
f. Statutory valuation allowance adjustment			
g. Nonadmitted			
h. Admitted capital deferred tax assets (2e99-2f-2g)			
i. Admitted deferred tax assets (2d+2h)	\$	\$	\$

3. Deferred Tax Liabilities

	1	2	3
	2016	2015	(Col 1-2) Change
a. Ordinary:			
1. Investments	\$	\$	\$
2. Fixed assets			
3. Deferred and uncollected premium			
4. Policyholder reserves			
5. Other (including items <5% of total ordinary tax liabilities)			
99. Subtotal	\$	\$	\$
b. Capital:			
1. Investments	\$	\$	\$
2. Real estate			
3. Other (including items <5% of total capital tax liabilities)			
99. Subtotal			
c. Deferred tax liabilities (3a99+3b99)	\$	\$	\$

4. Net Deferred Tax Assets (2i – 3c)	\$	\$	\$
--------------------------------------	----	----	----

D. Reconciliation of Federal Income Tax Rate to Actual Effective Rate Among the more significant book to tax adjustments were the following:

	Amount	Effective Tax Rate (%)
Permanent Differences:		
Provision computed at statutory rate	\$	%
Proration of tax exempt investment income		%
Tax exempt income deduction		%
Dividends received deduction		%
Disallowed travel and entertainment		%
Other permanent differences		%
Temporary Differences:		
Total ordinary DTAs	\$	%
Total ordinary DTLs		%
Total capital DTAs		%
Total capital DTLs		%
Other:		
Statutory valuation allowance adjustment	\$	%
Accrual adjustment – prior year		%
Other		%
Totals	\$	%
Federal and foreign income taxes incurred		%
Realized capital gains (losses) tax		%
Change in net deferred income taxes		%
Total statutory income taxes	\$	%

E. Operating Loss and Tax Credit Carryforwards and Protective Tax Deposits

At December 31, 2016, the Company did not have any unused operating loss carryforwards available to offset against future taxable income.

The following is income tax expense for 2016 and 2015 that is available for recoupment in the event of future net losses:

Year	Amount
2016	\$
2015	\$

The Company did not have any protective tax deposits under Section 6603 of the Internal Revenue Code.

F. Consolidated Federal Income Tax Return

The Company's federal income tax return is consolidated with the following entities:  
>> Enter Entities Here <<

NOTES TO FINANCIAL STATEMENTS

2. The method of allocation among companies is subject to a written agreement, approved by the Board of Directors, whereby allocation is made primarily on a separate return basis with current credit for any net operating losses or other items utilized in the consolidated tax return. Intercompany tax balances are settled monthly.

G. Federal or Foreign Federal Income Tax Loss Contingencies

The Company does not have any tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within twelve months of the reporting date.

Note 10 – Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

- A. The Insurance Association does have related party transactions with the SMART Transportation Division, an international labor union, through certain common directors and membership.
- B. The Insurance Association and the Union share a common headquarters and incur various joint operating expenses including, rent, data processing and other occupancy related costs. Such expenses are allocated between the Insurance Association and the Union and are trued up monthly as explained in part 10D. On 6-1-2015 the Insurance Association acquired its own employees which ended the employee rental from the Union. The Insurance Association hired its own workforce and also instituted pension and health & welfare programs.
- D. At December 31, 2016, UTUIA reported \$12,533 as amounts due to SMART Transportation Division for operating expenses as stated in Part A. Terms of the settlement require that these amounts be settled within 30 days.
- E. The Insurance Association and the Union are currently working on separation documents that will be used to document the ongoing relationship between the two parties. The agreements were not completed as of 12-31-2016.
- F. The Union permits the Insurance Association to receive premiums through payroll deductions from member based employment which are based on collective bargaining agreements. The Union also allows the Insurance Association to solicit business at local union meetings.
- G. There is no common ownership involving the Insurance Association and the Union.

C., H., I., J., K. & L. UTUIA had no activity requiring disclosure subject to these sub-sections.

Note 11 – Debt

UTUIA has no debt as of 12/31/2016.

Note 12 – Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

Retirement Plans, Deferred Compensation, Post-employment Benefits and Compensated Absences and Other Postretirement Benefits Plans.

- A. Effective 6-1-2015 the Insurance Association adopted a 401(k) Safe Harbor Defined Contribution Plan. Eligibility is based on the employee attaining age 21. Each employee can choose to make before tax contributions not to exceed the allowable amounts set by the Internal Revenue Service. The Insurance Association currently contributes 9% of employee’s eligible compensation. This company contribution is reviewed annually. The Insurance Association also makes Safe Harbor contributions of 3% of each employee’s eligible contribution. The Insurance Association contracts with Vanguard to administer the plan. Both the employee and employer contributions are 100% vested. Total contributions for the year ended 2016 is \$166,068.

The Insurance Association has an employee Health & Welfare Plan which covers medical, vision and dental coverage. The plan is run through a third party administrator and is currently run through United Healthcare. Employees are eligible for coverage after one month’s employment. Retirees are also eligible for coverage. The cost of the plan for 2016 was \$1,091,252.

NOTES TO FINANCIAL STATEMENTS

The Insurance Association also has a non-contributory Defined Contribution Pension Plan for Field Supervisors and Assistant Field Supervisors. The Insurance Association contracts with T Rowe Price to administrate this plan. Contributions are based on a fixed percentage of first year commissions and bonus payments. Amounts paid were \$48,983 and \$38,945 in 2015 and 2016 respectively.

B., C., D., E., F.,G., H., & I. - UTUIA had no transactions requiring disclosure

A. Defined Benefit Plan  
(1)

Change in Benefit Obligation		Overfunded		Underfunded	
a.	Pension Benefits	2016	2015	2016	2015
	1. Benefit obligation at beginning of year	\$	\$	\$	\$
	2. Service cost				
	3. Interest cost				
	4. Continuation by plan participants				
	5. Actuarial gain (loss)				
	6. Foreign currency exchange rate changes				
	7. Benefits paid				
	8. Plan amendments				
	9. Business combinations, divestitures, curtailments, settlements and special termination benefits				
	10. Benefit obligation at end of year	\$	\$	\$	\$
		Overfunded		Underfunded	
b.	Postretirement Benefits	2016	2015	2016	2015
	1. Benefit obligation at beginning of year	\$	\$	\$	\$
	2. Service cost				
	3. Interest cost				
	4. Continuation by plan participants				
	5. Actuarial gain (loss)				
	6. Foreign currency exchange rate changes				
	7. Benefits paid				
	8. Plan amendments				
	9. Business combinations, divestitures, curtailments, settlements and special termination benefits				
	10. Benefit obligation at end of year	\$	\$	\$	\$
		Overfunded		Underfunded	
c.	Special or Contractual Benefits per SSAP No. 11	2016	2015	2016	2015
	1. Benefit obligation at beginning of year	\$	\$	\$	\$
	2. Service cost				
	3. Interest cost				
	4. Continuation by plan participants				
	5. Actuarial gain (loss)				
	6. Foreign currency exchange rate changes				
	7. Benefits paid				
	8. Plan amendments				
	9. Business combinations, divestitures, curtailments, settlements and special termination benefits				
	10. Benefit obligation at end of year	\$	\$	\$	\$

Change in plan assets		Pension Benefits		Postretirement Benefits		Special or Contractual Benefits per SSAP No. 11	
		2016	2015	2016	2015	2016	2015
a.	Fair value of plan assets at beginning of year	\$	\$	\$	\$	\$	\$
b.	Actual return on plan assets						
c.	Foreign currency exchange rate changes						
d.	Reporting entity contribution						

NOTES TO FINANCIAL STATEMENTS

e.	Plan participants' contributions						
f.	Benefits paid						
g.	Business combinations, divestitures and settlements						
h.	Fair value of plan assets at end of year	\$	\$	\$	\$	\$	\$

(3)		Funded status		Pension Benefits		Postretirement Benefits	
		Overfunded:		2016	2015	2016	2015
a.	Assets (nonadmitted)						
	1. Prepaid benefit costs	\$		\$		\$	
	2. Overfunded plans assets						
	3. Total assets (nonadmitted)	\$		\$		\$	
		Underfunded:					
b.	Liabilities recognized						
	1. Accrued benefits costs	\$		\$		\$	
	2. Liability for pension benefits						
	3. Total liabilities recognized	\$		\$		\$	
c.	Unrecognized liabilities	\$		\$		\$	

(4)		Components of net periodic benefit cost		Pension Benefits		Postretirement Benefits		Special or Contractual Benefits per SSAP No. 11	
				2016	2015	2016	2015	2016	2015
a.	Service cost	\$		\$		\$		\$	
b.	Interest cost								
c.	Expected return on plan assets								
d.	Transition asset or obligation								
e.	Gains and losses								
f.	Prior service cost or credit								
g.	Gain or loss recognized due to a settlements curtailment								
h.	Total net periodic benefit cost	\$		\$		\$		\$	

(5)	Amounts in unassigned funds (surplus) recognized as components of net periodic benefit cost		Pension Benefits		Postretirement Benefits	
			2016	2015	2016	2015
	a.	Items not yet recognized as a component of net periodic cost – prior year	\$	\$	\$	\$
	b.	Net transition asset or obligation recognized				
	c.	Net prior service cost or credit arising during the period				
	d.	Net prior service cost or credit recognized				
	e.	Net gain and loss arising during the period				
	f.	Net gain and loss recognized				
	g.	Items not yet recognized as a component of net periodic cost – current year	\$	\$	\$	\$

(6)	Amounts in unassigned funds (surplus) expected to be recognized in the next fiscal year as components of net periodic benefit cost	Pension Benefits		Postretirement Benefits	
		2016	2015	2016	2015
a.	Net transition asset or obligations	\$	\$	\$	\$
b.	Net prior service cost or credit				
c.	Net recognized gains and losses	\$	\$	\$	\$

(7)	Amounts in unassigned funds (surplus) that have not yet been recognized as components of net periodic benefit cost		Pension Benefits		Postretirement Benefits	
			2016	2015	2016	2015
	a.	Net transition asset or obligations	\$	\$	\$	\$
	b.	Net prior service cost or credit				
	c.	Net recognized gains and	\$	\$	\$	\$



NOTES TO FINANCIAL STATEMENTS

	losses			
--	--------	--	--	--

(8)	Weighted-average assumptions used to determine net periodic benefit cost as of December 31		2016	2015
	a.	Weighted-average discount rate	%	%
	b.	Expected long-term rate of return on plan assets	%	%
	c.	Rate of compensation increase	%	%
	Weighted-average assumptions used to determine projected benefit obligations as of December 31			
	d.	Weighted-average discount rate	%	%
	e.	Rate of compensation increase	%	%

(9) The amount of the accumulated benefit obligation for defined benefit pension plans was \$\_\_\_\_\_ for the current year and \$\_\_\_\_\_ for the prior year.

(10)

(11)	Assumed health care cost trend rates have a significant effect on the amounts reported for the health care plans. A one-percentage point change in assumed health care cost trend rates would have the following effects:		1 Percentage Point Increase	1 Percentage Point Decrease
	a.	Effect on total of service and interest cost components	\$	\$
	b.	Effect on postretirement benefit obligation	\$	\$

(12) The following estimated future payments, which reflect expected future service, as appropriate, are expected to be paid in the year indicated:

	Year(s)	Amount
a.	2017	\$
b.	2018	\$
c.	2019	\$
d.	2020	\$
e.	2021	\$
f.	2022 through 20__	\$

(13)

(14)

(15)

(16)

(17)

(18)

(19)

(20)

(21)

B. Investment Policies and Strategies

C. Fair Value of Plan Assets

(1) Fair Value Measurements of Plans Assets at Reporting Date				
Description for each class of plan assets	(Level 1)	(Level 2)	(Level 3)	Total
	\$	\$	\$	\$
Total Plan Assets	\$	\$	\$	\$

(2) Fair Value Measurements in Level 3 of the Fair Value Hierarchy										
Description for each class of plan assets	Beginning Balance at 1/1/2016	Transfers into Level 3	Transfers out of Level 3	Return on Assets Still Held	Return on Assets Sold	Purchases	Issuances	Sales	Settlements	Ending Balance at 12/31/2016
	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Total Plan Assets	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$

(3)

D. Basis Used to Determine Expected Long-Term Rate-of-Return

E. Defined Contribution Plans

F. Multiemployer Plans

G. Consolidated/Holding Company Plans

H. Postemployment Benefits and Compensated Absences

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

(1)

(2)

NOTES TO FINANCIAL STATEMENTS

(3)

Note 13 – Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

UTUIA, being a fraternal benefit society, has no activity requiring disclosure.

(1)

(2)

(3)

(4)

(5)

(6)

(7)

(8)

(9)

(10) The portion of unassigned funds (surplus) represented or reduced by unrealized gains and losses is: \$

(11) The reporting entity issued the following surplus debentures or similar obligations:

Date Issued	Interest Rate	Par Value (Face Amount of Notes)	Carrying Value of Note*	Principal and/or Interest Paid Current Year	Total Principal and/or Interest Paid	Unapproved Principal and/or Interest	Date of Maturity
	%	\$	\$	\$	\$	\$	
Total	XXX	\$	\$	\$	\$	\$	XXX

\* Total should agree with Page 3, Line 33.

(12) The impact of any restatement due to prior quasi-reorganizations is as follows:

Description (Year)	Change in Surplus	Change in Gross Paid in and Contributed Surplus
	\$	\$

(13) The effective dates of all quasi-reorganizations in the prior 10 years are: \_\_\_\_\_.

Note 14 – Liabilities, Contingencies and Assessments

A. A., B., C., D., E. - UTUIA had no activity requiring disclosure.

F. Various lawsuits against the Association have arisen in the course of the UTUIA's business. Liabilities arising from litigation are not considered material.

(1) Total SSAP No. 97, Investments in Subsidiary, Controlled, and Affiliated Entities, A Replacement of SSAP No. 88, and SSAP No. 48, Joint Ventures, Partnerships and Limited Liability Company contingent liabilities: \$ .

(2) Detail of other contingent commitments

Nature and Circumstances of Guarantee and Key Attributes, Including Date and Duration of Agreement	Liability Recognition of Guarantee, (Including Amount Recognized at Inception. If no Initial Recognition, Document Exception Allowed Under SSAP No. 5R)	Ultimate Financial Statement Impact if Action under the Guarantee is Required	Maximum Potential Amount of Future Payments (Undiscounted) the Guarantor could be Required to make under the Guarantee. If unable to Develop an Estimate, this Should be Specifically Noted	Current Status of Payment or Performance Risk of Guarantee. Also Provide Additional Discussion as Warranted
	\$		\$	
Total	\$	XXX	\$	XXX

(3)

a.	Aggregate maximum potential of future payments of all guarantees (undiscounted) the guarantor could be required to make under guarantees. (Should equal the total of column 4 for (2) above.)			\$
b.	Current liability recognized in F/S			
1.	Noncontingent liabilities			\$
2.	Contingent liabilities			\$
c.	Ultimate financial statement impact if action under the guarantee is required			
1.	Investments in SCA			\$
2.	Joint Venture			
3.	Dividends to stockholders (capital contribution)			
4.	Expense			
5.	Other			
6.	Total (should equal (3)a)			\$

B. Assessments

**NOTES TO FINANCIAL STATEMENTS**

(1) Where Amount is Unknown

Where Amount is Known

(2)

a.	Assets recognized from paid and accrued premium tax offsets and policy surcharges prior year –end		\$
b.	Decreases current year:		\$
c.	Increases current year:		\$
d.	Assets recognized from paid and accrued premium tax offsets and policy surcharges current year-end		\$

C. Gain Contingencies

D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits

United Transportation Union Insurance Association paid the following amounts in the reporting period to settle claims related extra contractual obligations or bad faith claims stemming from lawsuits:

	Direct
Claims related ECO and bad faith losses paid during the reporting period	\$

Number of claims where amounts were paid to settle claims related extra contractual obligations or bad faith claims resulting from lawsuits during the reporting period:

(a) 0-25 Claims	(b) 26-50 Claims	(c) 51-100 Claims	(d) 101-500 Claims	(e) More than 500 Claims

Indicate whether claim count information is disclosed per claim or per claimant:

(f) Per Claim [    ]                      (g) Per Claimant [    ]

E. Joint and Several Liabilities

F. All Other Contingencies

**Note 15 – Leases**

A. Lessee Operating Lease

The Insurance Association shares common office space with the Union. The Insurance Association is billed its pro-rata share of the rent. Rent expense for office space and equipment amounted to \$154,691 and \$205,451 during 2015 and 2016, repsectively.

(1)

(2)

a.	At January 1, 2017 the minimum aggregate rental commitments are as follows:	
	Year Ending December 31	Operating Leases
1.	2017	\$ 225,000
2.	2018	\$
3.	2019	\$
4.	2020	\$
5.	2021	\$
6.	Total	\$

(3)

B. Revenue, Net Income or Assets with Respect to Leases

Leasing is not a significant part of the UTUIA's activities.

(1) For operating leases:

a.

b.

c.	Future minimum lease payment receivables under noncancelable leasing arrangements as of December 31 are as follows:	
	Year Ending December 31	Operating Leases
1.	2017	\$
2.	2018	\$
3.	2019	\$
4.	2020	\$
5.	2021	\$
6.	Total	\$

(d)

(2) For leveraged leases:

(a)

(b)

NOTES TO FINANCIAL STATEMENTS

		2016	2015
1.	Income from leveraged leases before income tax including investment tax credit	\$	\$
2.	Less current income tax		
3.	Net income from leveraged leases	\$	\$

(c) The components of the investment in leveraged leases at December 31, 2016 and 2015 were as shown below:

		2016	2015
1.	Lease contracts receivable (net of principal and interest on non-recourse financing)	\$	\$
2.	Estimated residual value of leased assets		
3.	Unearned and deferred income		
4.	Investment in leveraged leases		
5.	Deferred income taxes related to leveraged leases		
6.	Net investment in leveraged leases	\$	\$

Note 16 – Information About Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk

UTUIA had no activity requiring disclosure subject to this footnote.

1. The table below summarizes the face amount of the Company's financial instruments with off-balance sheet risk:

		Assets		Liabilities	
		2016	2015	2016	2015
a.	Swaps	\$	\$	\$	\$
b.	Futures				
c.	Options				
d.	Total	\$	\$	\$	\$

2.  
3.  
4.

Note 17 – Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

UTUIA had no activity requiring disclosure subject to this footnote.

A. Transfers of Receivables Reported as Sales

(1)  
(2)

B. Transfer and Servicing of Financial Assets

(1)  
(2)  
(3)  
(4)  
(5)  
(6)  
(7)

C. Wash Sales

(1)  
(2) The details by NAIC designation 3 or below, or unrated of securities sold during the year ended December 31, 2016 and reacquired within 30 days of the sale date are:

Description	NAIC Designation	Number of Transactions	Book Value of Securities Sold	Cost of Securities Repurchased	Gain/(Loss)
			\$	\$	\$

Note 18 – Gain or Loss to the Reporting Entity from Uninsured Plans and the Portion of Partially Insured Plans

UTUIA had no activity requiring disclosure subject to this footnote.

A. ASO Plans

The gain from operations from Administrative Services Only (ASO) uninsured plans and he uninsured portion of partially insured plans was as follows during 2016:

		ASO Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASO
a.	Net reimbursement for administrative expenses (including administrative fees) in excess of actual expenses	\$	\$	\$

**NOTES TO FINANCIAL STATEMENTS**

b.	Total net other income or expenses (including interest paid to or receive from plans)			
c.	Net gain or (loss) from operations			
d.	Total claim payment volume	\$	\$	\$

B. ASC Plans

The gain from operations from Administrative Services Contract (ASC) uninsured plans and he uninsured portion of partially insured plans was as follows during 2016:

		ASC Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASC
a.	Gross reimbursement for medical cost incurred	\$	\$	\$
b.	Gross administrative fees accrued			
c.	Other income or expenses (including interest paid to or received from plans)			
d.	Gross expenses incurred (claims and administrative)			
e.	Total net gain or loss from operations	\$	\$	\$

C. Medicare or Similarly Structured Cost Based Reimbursement Contract

- (1)
- (2)
- (3)
- (4)

**Note 19 – Direct Premium Written/Produced by Managing General Agents/Third Party Administrators**

UTUIA had no activity requiring disclosure subject to this footnote.

Name and Address of Managing General Agent or Third Party Administrator	FEIN Number	Exclusive Contract	Types of Business Written	Types of Authority Granted	Total Direct Premiums Written/Produced By
					\$
Total	XXX	XXX	XXX	XXX	\$

**Note 20 – Fair Value Measurements**

A. The UTUIA holds assets at fair value including bonds and common stock. UTUIA holds no liabilities valued at fair value. The assets held at fair value are all considered Level 1 as being measured at fair value on a recurring basis using the NAIC Valuation Service or other nationally recognized valuation organization such as Moody's or Best.

1) Description for each class of asset or liability      Level 1

Bonds	
US Government	\$ <u>25,402,094</u>
Industrial and Misc	\$ <u>170,636,580</u>
Hybrid Securities	\$ <u>0</u>
Parent, Subsidiaries and Affiliates	\$ <u>0</u>
Total Bonds	\$ <u>196,038,674</u>
Common Stock	
Industrial and Misc	\$ <u>18,150,205</u>
Parent, Subsidiaries and Affiliates	\$ <u>0</u>
Total Common Stock	\$ <u>18,150,205</u>

2) UTUIA has no level 3 assets or liabilities.

4) UTUIA has no level 3 assets or liabilities.

NOTES TO FINANCIAL STATEMENTS

A)	Type of Financial Instrument	Level 1
	Bonds	\$ <u>196,038,674</u>
	Common Stock	\$ <u>18,150,205</u>
	Perpetual Preferred Stock	\$ <u>0</u>
	Mortgage Loans	\$ <u>0</u>

Not Applicable

(1) Fair Value Measurements at Reporting Date

Assets at Fair Value	Level 1	Level 2	Level 3	Total
	\$	\$	\$	\$
Total	\$	\$	\$	\$

Liabilities at Fair Value	Level 1	Level 2	Level 3	Total
	\$	\$	\$	\$
Total	\$	\$	\$	\$

(2) Fair Value Measurements in (Level 3) of the Fair Value Hierarchy

	Beginning Balance at 1/1/2016	Transfers Into Level 3	Transfers Out of Level 3	Total Gains and (Losses) Included in Net Income	Total Gains and (Losses) Included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance at 12/31/2016
a. Assets										
	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$

	Beginning Balance at 1/1/2016	Transfers Into Level 3	Transfers Out of Level 3	Total Gains and (Losses) Included in Net Income	Total Gains and (Losses) Included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance at 12/31/2016
b. Liabilities										
	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$

- (3)
- (4)
- (5)

B.

C.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Not Practicable (Carrying Value)
	\$	\$	\$	\$	\$	\$

D. Not Practicable to Estimate Fair Value

Type of Class or Financial Instrument	Carrying Value	Effective Interest Rate	Maturity Date	Explanation
	\$	%		

Note 21 – Other Items

- A. The United Transportation Union has undergone a merger with the Sheet Metal Workers International of America resulting in the UTU renaming to SMART Transportation Division. UTUIA and SMART Transportation Division share headquarters, IT Services, a receivable system and other business expenses. SMART and UTUIA are currently working on separation documents that will explain the responsibilities of each party. These documents are expected to be completed in the 1<sup>st</sup> quarter, 2016. At this time UTUIA is not able to determine any impact from this merger.
- B. UTUIA has no activity requiring disclosure subject to this footnote.
- C. UTUIA has no activity requiring disclosure subject to this footnote.
- D. UTUIA has no activity requiring disclosure subject to this footnote.
- E. UTUIA has no activity requiring disclosure subject to this footnote.

- (1) Carrying Value of Transferable and Non-Transferable State Tax Credits Gross of any Related Tax Liabilities and Total Unused Transferable and Non-Transferable State Tax Credits by State and in Total

NOTES TO FINANCIAL STATEMENTS

Description of State Transferable and Non-Transferable Tax Credits		State	Carrying Value	Unused Amount
			\$	\$
Total			\$	\$

- (2) Method of Estimating Utilization of Remaining Transferable and Non-Transferable State Tax Credits
- (3) Impairment Loss
- (4) State Tax Credits Admitted and Nonadmitted

		Total Admitted	Total Nonadmitted
a.	Transferable	\$	\$
b.	Non-Transferable	\$	\$

F. UTUIA has no activity requiring disclosure subject to this footnote.

- (1)
- (2) Direct Exposure Through Investments in Subprime Mortgage Loans

		Book/Adjusted Carrying Value (Excluding Interest)	Fair Value	Value of Land and Buildings	Other-Than-Temporary Impairment Losses Recognized	Default Rate
a.	Mortgages in the process of foreclosure	\$	\$	\$	\$	%
b.	Mortgages in good standing					%
c.	Mortgages with restored terms					%
d.	Total	\$	\$	\$	\$	XXX

- (3) Direct Exposure Through Other Investments

		Actual Cost	Book/Adjusted Carrying Value (Excluding Interest)	Fair Value	Other-Than-Temporary Impairment Losses Recognized
a.	Residential mortgage backed securities	\$	\$	\$	\$
b.	Commercial mortgage backed securities				
c.	Collateralized debt obligations				
d.	Structured securities				
e.	Equity investments in SCAs*				
f.	Other assets				
g.	Total	\$	\$	\$	\$

\* These investments comprise % of the company's invested assets.

- (4) Underwriting Exposure to Subprime Mortgage Risk Through Mortgage Guaranty or Financial Guaranty Insurance Coverage

		Losses Paid in the Current Year	Losses Incurred in the Current Year	Case Reserves at end of Current Period	IBNR Reserves at End of Current Period
a.	Mortgage guaranty coverage	\$	\$	\$	\$
b.	Financial guaranty coverage				
c.	Other lines (specify):				
d.	Total	\$	\$	\$	\$

G. UTUIA has no activity requiring disclosure subject to this footnote.

- (1)
- (2)

				In Force	
		As of End of Current Year		As of End of Prior Year	
		Number	Balance	Number	Balance
a.	Up to and including 12 months	\$	\$	\$	\$
b.	13 to 24 months				
c.	25 to 36 months				
d.	37 to 48 months				
e.	49 to 60 months				
f.	Over 60 months				
g.	Total	\$	\$	\$	\$

- (3)

		Number	Individual Balance/Amount	Number	Group Balance/Amount
a.	Number/balance of retained asset account at the beginning of the year		\$		\$
b.	Number/amount of retained asset accounts issued/added during the year				
c.	Investment earnings credited to retained asset accounts during the year	N/A		N/A	
d.	Fees and other charges assessed to retained	N/A		N/A	

NOTES TO FINANCIAL STATEMENTS

	asset accounts during the year				
e.	Number/amount of retained asset accounts transfer to state unclaimed property funds during the year				
f.	Number/amount of retained asset accounts closed/withdrawn during the year				
g.	Number balance of retained asset accounts at the end of the year		\$		\$

H. Insurance-Linked Securities (ILS) Contracts

Management of Risk Related to:		Number of Outstanding ILS Contracts	Aggregate Maximum Proceeds
(1)	Directly-Written Insurance Risks		
a.	ILS Contracts as Issuer		\$
b.	ILS Contracts as Ceding Insurer		\$
c.	ILS Contracts as Counterparty		\$
(2)	Assumed Insurance Risks		
a.	ILS Contracts as Issuer		\$
b.	ILS Contracts as Ceding Insurer		\$
c.	ILS Contracts as Counterparty		\$

Note 22 – Events Subsequent

None.

A.	Did the reporting entity write accident and health insurance premium that is subject to Section 9010 of the Federal Affordable Care Act (YES/NO)?		Yes [ <input type="checkbox"/> ]	No [ <input checked="" type="checkbox"/> ]
B.	ACA fee assessment payable for the upcoming year	\$	\$	
C.	ACA fee assessment paid			
D.	Premium written subject to ACA 9010 assessment			
E.	Total adjusted capital before surplus adjustment (Five-Year Historical Line 17)	50,102,785		
F.	Total adjusted capital (Five-Year Historical Line 17 minus 22B above)	50,102,785		
G.	Authorized control level	\$		
H.	Would reporting the ACA assessment as of December 31, 2016 have triggered an RBC action level (YES/NO)?		Yes [ <input type="checkbox"/> ]	No [ <input checked="" type="checkbox"/> ]

Note 23 – Reinsurance

A. Ceded Reinsurance Report

Section1 – General Interrogatories

- (1) Are any of the reinsurers listed in Schedule S as non-affiliated, owned in excess of 10% or controlled, either directly or indirectly, by the company or by any representative, officer, trustee, or director of the company?

No.
- (2) Have any policies issued by the company been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) that is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor or any other person not primarily engaged in the insurance business?

No.

Section 2 – Ceded Reinsurance Report – Part A

- (1) Does the company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credits? No.

a. If yes, what is the estimated amount of the aggregate reduction in surplus of a unilateral cancellation by the reinsurer as of the date of this statement, for those agreements in which cancellation results in a net obligation of the reporting entity to the reinsurer, and for which such obligation is not presently accrued? Where necessary, the reporting entity may consider the current or anticipated experience of the business reinsured in making this estimate. \$ \_\_\_\_\_

b. What is the total amount of reinsurance credits taken, whether as an asset or as a reduction of liability, for these agreements in this statement? \$ \_\_\_\_\_
- (2) Does the reporting entity have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies? No.

Section 3 – Ceded Reinsurance Report – Part B

- (1) What is the estimated amount of the aggregate reduction in surplus, (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of ALL reinsurance agreements, by either party, as of the date of this statement? Where necessary, the company may consider the current or anticipated experience of the business reinsured in making this estimate. \$ \_0\_\_\_\_\_

(2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the company as of the effective date of the agreement? No.

If yes, what is the amount of reinsurance credits, whether an asset or a reduction of liability, taken for such new agreements or amendments? \$ \_\_\_\_\_

B. Uncollectible Reinsurance

UTUIA has no activity requiring disclosure subject to this footnote.



NOTES TO FINANCIAL STATEMENTS

(1) United Transportation Union Insurance Association has written off in the current year reinsurance balances due from the entities listed below, the amount of: \$

a.	Claims incurred	\$
b.	Claims adjustment expenses incurred	
c.	Premiums earned	
d.	Other	
	Entity	Amount
		\$

C. Commutation of Ceded Reinsurance

UTUIA has no activity requiring disclosure subject to this footnote.

United Transportation Union Insurance Association has reported in its operations in the current year as a result of commutation of reinsurance with the companies listed below, amounts that are reflected as:

(1)	Claims incurred	\$
(2)	Claims adjustment expenses incurred	
(3)	Premiums earned	
(4)	Other	
	Entity	Amount

D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

UTUIA has no activity requiring disclosure subject to this footnote.

(1) Reporting Entity Ceding to Certified Reinsurer Whose Rating was Downgraded or Status Subject to Revocation

a.

Name of Certified Reinsurer	Relationship to Reporting Entity	Date of Action	Jurisdiction of Action	Before	After	Net Obligation Subject to Collateral	Collateral Required (But Not Received)
				%	%	\$	\$

(2) Reporting Entity's Certified Reinsurer Rating Downgraded or Status Subject to Revocation

a.

Date of Action	Jurisdiction of Action	Before	After	Net Obligation Subject to Collateral	Collateral Required (But Not Received)
		%	%	\$	\$

E.

F.

G. Ceding Entities That Utilize Captive Reinsurers to Assume Reserves Subject to the XXX/AXXX Captive Framework

(1) Captive Reinsurers in Which a Risk-Based Capital Shortfall Exists per the Risk-Based Capital XXX/AXXX Captive Reinsurance Consolidated Exhibit:

a. Captives with Risk-Based Capital Shortfall

Cession ID	NAIC Company Code	ID Number	Name of Captive Reinsurer	Amount of Risk-Based Capital Shortfall
0	0			
Total	XXX	XXX	XXX	\$

b. Effect of Risk-Based Capital Shortfall on Total Adjusted Capital (TAC)

1.	Total Adjusted Capital (TAC)	(Five-Year Historical Line 30)	\$	50,102,785
2.	Risk-Based Capital Shortfall	(Sum of G(1)a1 Column 5)	\$	
3.	Total Adjusted Capital (TAC) Before Risk-Based Capital Shortfall	(G(1)b1 + G(1)b2)	\$	50,102,785

(2) Captive Reinsurers for Which a Non-Zero Primary Security Shortfall is Shown on the Risk-Based Capital XXX/AXXX Reinsurance Primary Security Shortfall by Cession Exhibit

Cession ID	NAIC Company Code	ID Number	Name of Captive Reinsurer	Amount of Risk-Based Capital Shortfall
0	0			
Total	XXX	XXX	XXX	\$

Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination

A. UTUIA has no activity requiring disclosure subject to this footnote.

B. UTUIA has no activity requiring disclosure subject to this footnote.

C. UTUIA has no activity requiring disclosure subject to this footnote.

D. UTUIA has no activity requiring disclosure subject to this footnote.

Medical Loss Ratio Rebates Required Pursuant to the Public Health Service Act.

NOTES TO FINANCIAL STATEMENTS

		1	2	3	4	5
		Individual	Small Group Employer	Large Group Employer	Other Categories with Rebates	Total
Prior Reporting Year						
(1)	Medical loss ratio rebates incurred	\$	\$	\$	\$	\$
(2)	Medical loss ratio rebates paid					
(3)	Medical loss ratio rebates unpaid					
(4)	Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	
(5)	Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	
(6)	Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	
Current Reporting Year-to-Date						
(7)	Medical loss ratio rebates incurred	\$	\$	\$	\$	\$
(8)	Medical loss ratio rebates paid					
(9)	Medical loss ratio rebates unpaid					
(10)	Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	
(11)	Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	
(12)	Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	

E. Risk Sharing Provisions of the Affordable Care Act

(1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions

Yes [ ] No [ ]

(2) Impact of Risk Sharing Provisions of the Affordable Care Act on admitted assets, liabilities and revenue for the current year:

a.	Permanent ACA Risk Adjustment Program	AMOUNT	
	Assets		
1.	Premium adjustments receivable due to ACA Risk Adjustment	\$	
	Liabilities		
2.	Risk adjustment user fees payable for ACA Risk Adjustment		
3.	Premium adjustments payable due to ACA Risk Adjustment		
	Operations (Revenue & Expenses)		
4.	Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment		
5.	Reported in expenses as ACA Risk Adjustment user fees (incurred/paid)	\$	
b.	Transitional ACA Reinsurance Program		
	Assets		
1.	Amounts recoverable for claims paid due to ACA Reinsurance	\$	
2.	Amounts recoverable for claims unpaid due to ACA Reinsurance (contra liability)		
3.	Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance		
	Liabilities		
4.	Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premium		
5.	Ceded reinsurance premiums payable due to ACA Reinsurance		
6.	Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance	\$	
	Operations (Revenue & Expenses)		
7.	Ceded reinsurance premiums due to ACA Reinsurance	\$	
8.	Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments		
9.	ACA Reinsurance contributions – not reported as ceded premium	\$	
c.	Temporary ACA Risk Corridors Program		
	Assets		
1.	Accrued retrospective premium due to ACA Risk Corridors	\$	
	Liabilities		
2.	Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors		
	Operations (Revenue & Expenses)		
3.	Effect of ACA Risk Corridors on net premium income (paid/received)		
4.	Effect of ACA Risk Corridors on change in reserves for rate credits	\$	

(3) Roll forward of prior year ACA Risk Sharing Provisions for the following asset (gross of any nonadmission) and liability balances along with the reasons for adjustments to prior year balance:

						Differences		Adjustments		Unsettled Balances as of the Reporting Date		
		Accrued During the Prior Year on Business Written Before December 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year		Prior Year Accrued Less Payments (Col. 1-3)	Prior Year Accrued Less Payments (Col. 2-4)	To Prior Year Balances	To Prior Year Balances		Cumulative Balance from Prior Years (Col. 1-3+7)	Cumulative Balance from Prior Years (Col. 2-4+8)
		1	2	3	4	5	6	7	8	Ref	9	10
		Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)		Receivable	(Payable)
a.	Permanent ACA Risk Adjustment Program											
1.	Premium adjustments receivable	\$	\$	\$	\$	\$	\$	\$	\$	A	\$	\$
2.	Premium adjustments (payable)									B		
3.	Subtotal ACA Permanent Risk Adjustment Program	\$	\$	\$	\$	\$	\$	\$	\$		\$	\$
b.	Transitional ACA Reinsurance Program											
1.	Amounts recoverable for claims paid	\$	\$	\$	\$	\$	\$	\$	\$	C	\$	\$
2.	Amounts recoverable for claims unpaid (contra liability)									D		
3.	Amounts receivable relating to uninsured plans									E		

NOTES TO FINANCIAL STATEMENTS

	4.	Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premiums									F		
	5.	Ceded reinsurance premiums payable									G		
	6.	Liability for amounts held under uninsured plans									H		
	7.	Subtotal ACA Transitional Reinsurance Program	\$	\$	\$	\$	\$	\$	\$	\$		\$	\$
c.	Temporary ACA Risk Corridors Program												
	1.	Accrued retrospective premium	\$	\$	\$	\$	\$	\$	\$	\$	I	\$	\$
	2.	Reserve for rate credits or policy experience rating refunds									J		
	3.	Subtotal ACA Risk Corridors Program											
d.	Total for ACA Risk Sharing Provisions		\$	\$	\$	\$	\$	\$	\$	\$		\$	\$

Explanations of Adjustments

- A.
- B.
- C.
- D.
- E.
- F.
- G.
- H.
- I.
- J.

(4) Roll-Forward of Risk Corridors Asset and Liability Balances by Program Benefit Year

		Accrued During the Prior Year on Business Written Before December 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year		Differences		Adjustments		Unsettled Balances as of the Reporting Date		
						Prior Year Accrued Less Payments (Col. 1-3)	Prior Year Accrued Less Payments (Col. 2-4)	To Prior Year Balances	To Prior Year Balances	Cumulative Balance from Prior Years (Col. 1-3+7)	Cumulative Balance from Prior Years (Col. 2-4+8)	
		1	2	3	4	5	6	7	8	9	10	
		Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a.	2014											
	1.	Accrued retrospective premium								A	\$	
	2.	Reserve for rate credits for policy experience rating refunds								B		
b.	2015											
	1.	Accrued retrospective premium	\$							C	\$	
	2.	Reserve for rate credits for policy experience rating refunds								D		
c.	2016											
	1.	Accrued retrospective premium	\$							E	\$	
	2.	Reserve for rate credits or policy experience rating refunds								F		
d.	Total for Risk Corridors	\$									\$	

- A.
- B.
- C.
- D.
- E.
- F.

(5) ACA Risk Corridors Receivable as of Reporting Date

Risk Corridors Program Year	1 Estimated Amount to be Filed or Final Amount Filed with CMS	2 Non-Accrued Amounts for Impairment or Other Reasons	3 Amounts Received from CMS	4 Asset Balance (Gross of Non-Admissions) (1-2-3)	5 Non-Admitted Amount	5 Net Admitted Asset (4–5)
a.. 2014	\$	\$	\$	\$	\$	\$
b. 2015	\$	\$	\$	\$	\$	\$
c. 2016	\$	\$	\$	\$	\$	\$
d. Total (a+b+c)	\$	\$	\$	\$	\$	\$

Note 25 – Change in Incurred Losses and Loss Adjustment Expenses

UTUIA has no activity requiring disclosure subject to this footnote.

Note 26 – Intercompany Pooling Arrangements

A. UTUIA has no activity requiring disclosure subject to this footnote.

B. UTUIA has no activity requiring disclosure subject to this footnote.

NOTES TO FINANCIAL STATEMENTS

- C. UTUIA has no activity requiring disclosure subject to this footnote.
- D. UTUIA has no activity requiring disclosure subject to this footnote.
- E. UTUIA has no activity requiring disclosure subject to this footnote.
- F. UTUIA has no activity requiring disclosure subject to this footnote.
- G. UTUIA has no activity requiring disclosure subject to this footnote.

Note 27 – Structured Settlements

- A. UTUIA has no activity requiring disclosure subject to this footnote.

Loss Reserves Eliminated by Annuities	Unrecorded Loss Contingencies
\$	\$

- B. UTUIA has no activity requiring disclosure subject to this footnote.

Life Insurance Company and Location	Licensed in Company's State of Domicile YES/NO	Statement Value (i.e. Present Value) of Annuities
		\$

Note 28 – Health Care Receivables

- A. UTUIA has no activity requiring disclosure subject to this footnote.

Pharmaceutical Rebate Receivables

Quarter	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More than 180 Days After Billing
	\$	\$	\$	\$	\$

- B. UTUIA has no activity requiring disclosure subject to this footnote.

Risk Sharing Receivables

Calendar Year	Evaluation Period Year Ending	Risk Sharing Receivable as Estimated in the Prior Year	Risk Sharing Receivable as Estimated in the Current Year	Risk Sharing Receivable Billed	Risk Sharing Receivable Not Yet Billed	Actual Risk Sharing Amounts Received in Year Billed	Actual Risk Sharing Amounts Received First Year Subsequent	Actual Risk Sharing Amounts Received Second Year Subsequent	Actual Risk Sharing Amounts Received - All Other
0	0	\$	\$	\$	\$	\$	\$	\$	\$

Note 29 – Participating Policies

In the past, UTUIA has payed dividends on permanent life products, and does not pay dividends on term life, annuity or A&H Products, although all products are participating and could be subject to dividends in the future if circumstances warrant dividends. Approximately 40% of total premiums are from permanent life products.

In early 2015 the UTUIA Board of Directors voted to continue the suspension of dividend payments for one year starting March 1, 2015. The suspension was due to nationwide economic factors.

During 2014, the total dividends were (\$3,040), accounted for as expense when earned. All UTUIA permanent policies are participating.

Note 30 – Premium Deficiency Reserves

1.

Liability carried for premium deficiency reserve:

\$675,875
2.

Date of most recent evaluation of this liability:

December 31, 2016
3.

Was anticipated investment income utilized in the calculation?

Yes [ ] No [x ]

Note 31 – Reserves for Life Contracts and Deposit-Ttype Contracts

- (1)

Life, annuity and accident and health benefit reserves are developed by actuarial methods and are determined based on published tables using statutorily specified interest rates and valuation methods that will provide, in the aggregate, reserves that are greater than or equal to the minimum or guaranteed policy cash values or the amounts required by the Ohio Department of Insurance. UTUIA waives deduction of deferred fractional premiums on the death of life and annuity policy insured and returns any premium beyond the date of death. Surrender values on policies do not exceed the corresponding benefit reserves. Additional reserves are established where the results of cash flow testing under various interest rate scenarios indicate the need for such reserves or where the net premiums exceed the gross premiums on any insurance in force. UTUIA recorded no additional reserves related to cash flow testing at December 31, 2016.
- (2)

The company has no substandard policies.

NOTES TO FINANCIAL STATEMENTS

- (3) Does not apply.
- (4)&(5) Tabular interest, tabular less actual reserve released and tabular cost have been determined by formula per the NAIC. The tabular interest on funds not involving life contingencies are based on the interest rate of the underlying securities.
- (6) The details for other changes: No other reserve changes.

	ORDINARY						GROUP	
Item	Total	Industrial Life	Life Insurance	Individual Annuities	Supplementary Contracts	Credit Life Group and Individual	Life Insurance	Annuities
	\$	\$	\$	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$	\$	\$	\$

Note 32 – Analysis of Annuity Actuarial Reserves and Deposit Liabilities by Withdrawal Characteristics

Major categories of reserves for annuities, supplemental contracts and deposit fund liabilities at December 31, 2016 are summarized as follows:

	Amount	Percent
Annuities and supplementary contracts with life contingencies	\$80,532,600	93.74%
Supplementary contracts without life contingencies	\$617,141	0.72%
Deposit fund liabilities	\$4,757,652	5.54%
	\$85,907,652	100.0%

At December 31, 2015, the Insurance Association’s annuity reserves and deposit fund liabilities are as follows:

	Amount	Percent
Subject to discretionary withdrawal with adjustment at book value less surrender charge of 5% or more	\$983,225	1.1%
Subject to discretionary withdrawal with minimal or no adjustment	\$84,254,326	98.1%
Not subject to discretionary withdrawal	\$669,842	0.8%
Total annuity reserve and deposit fund liabilities	\$85,907,393	100.0%

A.	Subject to Discretionary Withdrawal:		General Accounts	Separate Account with Guarantees	Separate Account Nonguaranteed	Total	% of Total
	(1)	With market value adjustment	\$	\$	\$	\$	%
	(2)	At book value less current surrender charge of 5% or more					%
	(3)	At fair value					%
	(4)	Total with market value adjustment or at fair value (total of 1 through 3)					%
	(5)	At book value without adjustment (minimal or no charge or adjustment)					%
B.	Not subject to discretionary withdrawal						%
C.	Total (gross: direct + assumed)						%
D.	Reinsurance ceded						
E.	Total (net (C) - (D))		\$	\$	\$	\$	

F. Life and Accident & Health Annual Statement:

(1)	Exhibit 5, Annuities, Total (net)	\$	80,532,600
(2)	Exhibit 5, Supplementary contracts with life contingencies, Total (net)		617,141
(3)	Exhibit 7, Deposit-type contracts, Line 14, Column 1		4,801,374
(4)	Subtotal	\$	85,951,115
Separate Accounts Statement:			
(5)	Exhibit 3, Line 0299999, Column 2	\$	
(6)	Exhibit 3, Line 0399999, Column 2		
(7)	Policyholder dividend and coupon accumulations		
(8)	Policyholder premiums		
(9)	Guaranteed interest contracts		
(10)	Other contract deposit funds		
(11)	Subtotal	\$	
(12)	Combined Total	\$	85,951,115

NOTES TO FINANCIAL STATEMENTS

Note 33 – Premium and Annuity Considerations Deferred and Uncollected

A. Deferred and uncollected life insurance premiums and annuity considerations as of December 31, 2016 were:

		Gross	Net of Loading
(1)	Industrial	\$	\$
(2)	Ordinary new business		
(3)	Ordinary renewal		
(4)	Credit life		
(5)	Group life		
(6)	Group annuity		
(7)	Totals	\$	\$

Note 34 – Separate Accounts

A. Separate Account Activity

(1)

(2) In accordance with the products/transactions recorded within the separate account, some assets are considered legally insulated whereas others are not legally insulated from the general account. (The legal insulation of the separate account assets prevents such assets from being generally available to satisfy claims resulting from the general account.)

As of December 31, 2016 and 2015 the Company separate account statement included legally insulated assets of \$ and \$\_\_\_\_\_, respectively. The assets legally insulated from the general account as of December 31, 2016 are attributed to the following products/transactions:

Product/Transaction	Legally Insulated Assets	Separate Account Assets (Not Legally Insulated)
	\$	\$
Total	\$	\$

(3) In accordance with the products/transaction recorded within the separate account, some separate account liabilities are guaranteed by the general account. (In accordance with the guarantees provided, if the investment proceeds are insufficient to cover the rate of return guaranteed for the product, the policyholder proceeds will be remitted by the general account.)

As of December 31, 2016, the general account of XYZ Company had a maximum guarantee for separate account liabilities of \$\_\_\_\_\_. To compensate the general account for the risk taken, the separate account has paid risk charges as follows for the past five (5) years:

a.	2016	\$
b.	2015	\$
c.	2014	\$
d.	2013	\$
e.	2012	\$

The total separate account guarantees paid by the general account for the preceding four years ending December 31, 2014, 2013, 2012, and 2011 was \$\_\_\_\_\_, \$\_\_\_\_\_, \$\_\_\_\_\_, and \$\_\_\_\_\_, respectively.

(4)

B. General Nature and Characteristics of Separate Accounts Business

Separate Accounts with Guarantees

		Index	Nonindexed Guarantee Less than/equal to 4%	Nonindexed Guarantee More than 4%	Nonguaranteed Separate Accounts	Total
(1)	Premiums, considerations or deposits for year ended 12/31/2016	\$	\$	\$	\$	\$
Reserves at 12/31/2016						
(2)	For accounts with assets at:					
	a. Fair value	\$	\$	\$	\$	\$
	b. Amortized cost					
	c. Total reserves*	\$	\$	\$	\$	\$
(3)	By withdrawal characteristics					
	a. Subject to discretionary withdrawal					
	4. With market value adjustment	\$	\$	\$	\$	\$
	5. At book value without market value adjustment and with current surrender charge of 5% or more					
	6. At fair value					
	7. At book value without market value adjustment and with current surrender charge less than 5%					
	8. Subtotal	\$	\$	\$	\$	\$
	b. Not subject to discretionary withdrawal					
	c. Total	\$	\$	\$	\$	\$
(4)	Reserves for asset default risk in	\$	\$	\$	\$	\$

NOTES TO FINANCIAL STATEMENTS

		lieu or AVR					
*	Line 2(c) should equal Line 3(h)						

C. Reconciliation of Net Transfers to or (from) Separate Accounts

(1) Transfers as reported in the Summary of Operations of the Separate Accounts Statement:

a.	Transfers to Separate Accounts (Page 4, Line 1.4)	\$
b.	Transfer from Separate Accounts (Page 4, Line 10)	
c.	Net transfers to or (from) Separate Accounts (a) - (b)	\$

(2) Reconciling adjustments:

Adjustment	Amount
	\$

(3) Transfers as reported in the Summary of Operations of the Fraternal Annual Statement

(1c) + (2) = (Page 4, Line 24)

\$

Note 35 – Loss/Claim Adjustment Expenses

This note does not apply to the UTUIA.

The balance in the liability for unpaid accident and health claim adjustment expenses as of \_\_\_\_\_ and \_\_\_\_\_ was \$\_\_\_\_\_ and \$\_\_\_\_\_, respectively. United Transportation Union Insurance Association incurred \$\_\_\_\_\_ and paid \$\_\_\_\_\_ of claim adjustment expenses in the current year, of which \$\_\_\_\_\_ of the paid amount was attributable to insured or covered events of prior years. United Transportation Union Insurance Association did not increase or decrease the provision for insured events of prior years.

United Transportation Union Insurance Association took into account estimated anticipated salvage and subrogation in its determination of the liability for unpaid claims/losses and reduced such liability by \$\_\_\_\_\_.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?  
If yes, complete Schedule Y, Parts 1, 1A and 2.

Yes [ ☐ ]    No [ ☒ ]

1.2

If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations?

Yes [ ☐ ]    No [ ☒ ]    N/A [ ☐ ]

1.3

State regulating?

2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes [ ☐ ]    No [ ☒ ]

2.2

If yes, date of change:

3.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

12-31-2012

3.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.

12-31-2012

3.3

State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

9-23-2013

3.4

By what department or departments?  
Ohio Department of Insurance

3.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with departments?

Yes [ ☒ ]    No [ ☐ ]    N/A [ ☐ ]

3.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes [ ☒ ]    No [ ☐ ]    N/A [ ☐ ]

4.1

During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:

4.11

sales of new business?

Yes [ ☐ ]    No [ ☒ ]

4.12

renewals?

Yes [ ☐ ]    No [ ☒ ]

4.2

During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:

4.21

sales of new business?

Yes [ ☐ ]    No [ ☒ ]

4.22

renewals?

Yes [ ☐ ]    No [ ☒ ]

5.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes [ ☐ ]    No [ ☒ ]

5.2

If yes, provide the name of entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1	2	3
Name of Entity	NAIC Company Code	State of Domicile

6.1

Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes [ ☐ ]    No [ ☒ ]

6.2

If yes, give full information:

7.1

Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?

Yes [ ☐ ]    No [ ☒ ]

7.2

If yes,

7.21

State the percentage of foreign control

%

7.22

State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).

1	2
Nationality	Type of Entity

8.1

Is the company a subsidiary of a bank holding company regulated with the Federal Reserve Board?

Yes [ ☐ ]    No [ ☒ ]

8.2

If response to 8.1 is yes, please identify the name of the bank holding company.

8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes [ ☐ ]    No [ ☒ ]

8.4

If the response to 8.3 is yes, please provide below the names and locations (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	SEC

9.

What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?  
Horovitz, Rudoy & Roteman 476 Seventh Avenue, Pittsburg PA. 15219

10.1

Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation?

Yes [ ☐ ]    No [ ☒ ]

10.2

If the response to 10.1 is yes, provide information related to this exemption:

10.3

Has the insurer been granted any exemptions related to other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation?

Yes [ ☐ ]    No [ ☒ ]

10.4

If the response to 10.3 is yes, provide information related to this exemption:

10.5

Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws?

Yes [ ☒ ]    No [ ☐ ]    N/A [ ☐ ]

10.6

If the response to 10.5 is no or n/a, please explain:



GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

11.

What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?  
Miller & Newberg 8717 w. 110th st. Overland Park, KS. 66210
- 12.1

Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?

Yes [ ☐ ] No [ ☒ ]
- 12.11

Name of real estate holding company
- 12.12

Number of parcels involved
- 12.13

Total book/adjusted carrying value

\$ 

0
- 12.2

If yes, provide explanation
13.

FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:
- 13.1

What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?
- 13.2

Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located?

Yes [ ☐ ] No [ ☐ ]
- 13.3

Have there been any changes made to any of the trust indentures during the year?

Yes [ ☐ ] No [ ☐ ]
- 13.4

If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?

Yes [ ☐ ] No [ ☐ ] N/A [ ☐ ]
- 14.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?

Yes [ ☒ ] No [ ☐ ]
- (a)

Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
- (b)

Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
- (c)

Compliance with applicable governmental laws, rules and regulations;
- (d)

The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
- (e)

Accountability for adherence to the code.
- 14.11

If the response to 14.1 is no, please explain:
- 14.2

Has the code of ethics for senior managers been amended?

Yes [ ☐ ] No [ ☒ ]
- 14.21

If the response to 14.2 is yes, provide information related to amendment(s).
- 14.3

Have any provisions of the code of ethics been waived for any of the specified officers?

Yes [ ☐ ] No [ ☒ ]
- 14.31

If the response to 14.3 is yes, provide the nature of any waiver(s).
- 15.1

Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List?

Yes [ ☐ ] No [ ☒ ]
- 15.2

If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

1	2	3	4
American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Circumstances That Can Trigger the Letter of Credit	Amount

BOARD OF DIRECTORS

16.

Is the purchase or sale of all investments of the reporting entity passed upon either by the Board of Directors or a subordinator committee thereof?

Yes [ ☒ ] No [ ☐ ]
17.

Does the reporting entity keep a complete permanent record of the proceedings of its Board of Directors and all subordinate committees thereof?

Yes [ ☒ ] No [ ☐ ]
18.

Has the reporting entity an established procedure for disclosure to its Board of Directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person?

Yes [ ☒ ] No [ ☐ ]

FINANCIAL

19.

Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)?

Yes [ ☐ ] No [ ☒ ]
- 20.1

Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.11

To directors or other officers

\$ 

0
- 20.12

To stockholders not officers

\$ 

0
- 20.13

Trustees, supreme or grand (Fraternal only)

\$ 

0
- 20.2

Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.21

To directors or other officers

\$ 

0
- 20.22

To stockholders not officers

\$ 

0
- 20.23

Trustees, supreme or grand (Fraternal only)

\$ 

0
- 21.1

Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reporting in the statement?

Yes [ ☐ ] No [ ☒ ]
- 21.2

If yes, state the amount thereof at December 31 of the current year:
- 21.21

Rented from others

\$
- 21.22

Borrowed from others

\$
- 21.23

Leased from others

\$
- 21.24

Other

\$
- 22.1

Does this statement include payments for assessments as described in the *Annual Statement Instructions* other than guaranty fund or guaranty association assessments?

Yes [ ☐ ] No [ ☒ ]
- 22.2

If answer is yes:
- 22.21

Amount paid as losses or risk adjustment

\$
- 22.22

Amount paid as expenses

\$
- 22.23

Other amounts paid

\$
- 23.1

Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?

Yes [ ☐ ] No [ ☒ ]
- 23.2

If yes, indicate any amounts receivable from parent included in the Page 2 amount:

\$ 

0

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

INVESTMENT

24.01

Were all of stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date (other than securities lending programs addressed in 24.03)?

Yes [X]    No [ ]

24.02

If no, give full and complete information, relating thereto:

24.03

For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet (an alternative is to reference Note 17 where this information is also provided).

24.04

Does the company's security lending program meet the requirements for a conforming program as outlined in the *Risk-Based Capital Instructions*?

Yes [ ]    No [ ]    N/A [X]

24.05

If answer to 24.04 is yes, report amount of collateral for conforming programs.

\$

24.06

If answer to 24.04 is no, report amount of collateral for other programs

\$

24.07

Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract?

Yes [ ]    No [ ]    N/A [X]

24.08

Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%?

Yes [ ]    No [ ]    N/A [X]

24.09

Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending?

Yes [ ]    No [ ]    N/A [X]

24.10

For the reporting entity's security lending program, state the amount of the following as of December 31 of the current year:

24.101

Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2:

\$0

24.102

Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2:

\$0

24.103

Total payable for securities lending reported on the liability page:

\$0

25.1

Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is current in force? (Exclude securities subject to Interrogatory 21.1 and 24.03.)

Yes [ ]    No [X]

25.2

If yes, state the amount thereof at December 31 of the current year:

25.21

Subject to repurchase agreements

\$0

25.22

Subject to reverse repurchase agreements

\$0

25.23

Subject to dollar repurchase agreements

\$0

25.24

Subject to reverse dollar repurchase agreements

\$0

25.25

Placed under option agreements

\$0

25.26

Letter stock or securities restricted as sale – excluding FHLB Capital Stock

\$0

25.27

FHLB Capital Stock

\$0

25.28

On deposit with states

\$0

25.29

On deposit with other regulatory bodies

\$0

25.30

Pledged as collateral – excluding collateral pledged to an FHLB

\$0

25.31

Pledged as collateral to FHLB – including assets backing funding agreements

\$0

25.32

Other

\$0

25.3

For category (25.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
		\$

26.1

Does the reporting entity have any hedging transactions reported on Schedule DB?

Yes [ ]    No [X]

26.2

If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?  
If no, attach a description with this statement.

Yes [ ]    No [ ]    N/A [X]

27.1

Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity?

Yes [ ]    No [X]

27.2

If yes, state the amount thereof at December 31 of the current year:

\$

28.

Excluding items in Schedule E-Part 3-Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC *Financial Condition Examiners Handbook*?

Yes [X]    No [ ]

28.01

For all agreements that comply with the requirements of the NAIC *Financial Condition Examiners Handbook*, complete the following:

1 Name of Custodian(s)	2 Custodian's Address
US Bank	1350 Euclid Ave, Cleveland, OH 44115

28.02

For all agreements that do not comply with the requirements of the NAIC *Financial Condition Examiners Handbook*, provide the name, location and a complete explanation

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

28.03

Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year?

Yes [ ]    No [X]

28.04

If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason

28.05

Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. ["...that have access to the investment accounts", "... handle securities"].

1 Name of Firm or Individual	2 Affiliation
JP Morgan	UU

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

28.0597 For those firms/individuals listed in the table for Question 28.05, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's assets?

Yes [ x ]    No [   ]

28.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 28.05, does the total assets under management aggregate to more than 50% of the reporting entity's assets?

Yes [   ]    No [   ]

28.06 For those firms or individuals listed in the table for 28.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1	2	3	4	5
Central Registration Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	Investment Management Agreement (IMA) Filed
102920	JP Morgan	xxxxxxx		

29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D-Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])?

Yes [ X ]    No [   ]

29.2 If yes, complete the following schedule:

1 CUSIP	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
256206    10    3	Dodge & Cox Intl Stock Fund	1,202,718
411511    30    6	Harbor International	1,096,375
683974    50    5	Oppenheimer Developing Mkts Fds	752,460
922908    64    5	Vanguard Index TR	912,106
29.2999 TOTAL		3,963,659

29.3 For each mutual fund listed in the table above, complete the following schedule:

1  Name of Mutual Fund (from above table)	2  Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	4  Date of Valuation
Dodge & Cox Intl Stock Fund	Sanofi		12/31/2016
Harbor International	Las Vegas Sands Corp		12/31/2016
Oppenheimer Developing Mkts Fds	Alibaba Group Holding		12/31/2016
Vanguard Index TR	Equinix Inc		12/31/2016

30. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

		1  Statement (Admitted) Value	2  Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1	Bonds	198,782,739	209,165,060	10,382,321
30.2	Preferred Stocks	0	0	0
30.3	Totals	198,782,739	209,165,060	10,382,321

30.4 Describe the sources or methods utilized in determining the fair values:

Fair Value from IDC

31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D?

Yes [   ]    No [ X ]

31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source?

Yes [   ]    No [   ]

31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:

32.1 Have all the filing requirements of the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* been followed?

Yes [ X ]    No [   ]

32.2 If no, list exceptions:

OTHER

33.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?

\$ 0

33.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1 Name	2 Amount Paid
	\$

34.1 Amount of payments for legal expenses, if any?

\$ 0

34.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid
Vorys, Sater, & Seymour	\$ 242,315

35.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any?

\$ 0

35.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1 Name	2 Amount Paid
	\$

**GENERAL INTERROGATORIES**

**PART 1 - COMMON INTERROGATORIES**

GENERAL INTERROGATORIES

PART 2 – FRATERNAL INTERROGATORIES

1.1

Does the reporting entity have any direct Medicare Supplement Insurance in force?

Yes [ ☐ ]

No [ ☒ ]

1.2

If yes, indicate premium earned on U.S. business only.

\$

1.3

What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?

\$

1.31

Reason for excluding:

1.4

Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above.

\$

1.5

Indicate total incurred claims on all Medicare Supplement insurance.

\$

1.6

Individual policies:

Most current three years:

1.61

Total premium earned

\$

1.62

Total incurred claims

\$

1.63

Number of covered lives

\$

All years prior to most current three years:

1.64

Total premium earned

\$

1.65

Total incurred claims

\$

1.66

Number of covered lives

\$

1.7

Group policies:

Most current three years:

1.71

Total premium earned

\$

1.72

Total incurred claims

\$

1.73

Number of covered lives

\$

All years prior to most current three years:

1.74

Total premium earned

\$

1.75

Total incurred claims

\$

1.76

Number of covered lives

\$

2.1

Does the reporting entity have Separate Accounts?

Yes [ ☐ ]

No [ ☒ ]

2.2

If yes, has a Separate Accounts statement been filed with this Department

Yes [ ☐ ]

No [ ☐ ]

N/A[ ☒ ]

2.3

What portion of capital and surplus funds of the reporting entity covered by assets in the Separate Accounts statement, is not currently distributable from the Separate Accounts to the general account for use by the general account?

\$

2.4

State the authority under which Separate Accounts are maintained:

2.5

Was any of the reporting entity's Separate Accounts business reinsured as of December 31?

Yes [ ☐ ]

No [ ☒ ]

2.6

Has the reporting entity assumed by reinsurance any Separate Accounts business as of December 31?

Yes [ ☐ ]

No [ ☒ ]

2.7

If the reporting entity has assumed Separate Accounts business, how much, if any, reinsurance assumed receivable for reinsurance of Separate Accounts reserve expense allowances is included as a negative amount in the liability for "Transfers to Separate Accounts due or accrued (net)?"

\$

3.

Is the reporting entity organized and conducted on the lodge system, with ritualistic form of work and representative form of government?

Yes [ ☒ ]

No [ ☐ ]

4.

How often are meetings of the subordinate branches required to be he MONTHLY

5.

How are the subordinate branches represented in the supreme or governing body?  
BY DELEGATES

6.

What is the basis of representation in the governing body?  
EACH DISTRICT HAS ONE DELEGATE PER 2,000 MEMBERS

7.1

How often are regular meetings of the governing body held?  
ONCE EVERY FOUR YEARS

7.2

When was the last regular meeting of the governing body held?

SEPTEMBER, 2015

7.3

When and where will the next regular or special meeting of the governing body be held?  
AUGUST 2019 AT A SITE TO BE DETERMINED

7.4

How many members of the governing body attended the last regular meeting?

28

7.5

How many of the same were delegates of the subordinate branches?

20

8.

How are the expenses of the governing body defrayed?  
COMPANY OPERATIONS

9.

When and by whom are the officers and directors elected?  
BY DELEGATE VOTE AT THE CONVENTION

10.

What are the qualifications for membership?  
PER BYLAW, THROUGH OWNERSHIP OF A POLICY

11.

What are the limiting ages for admission?  
UP TO AND INCLUDING AGE 75

12.

What is the minimum and maximum insurance that may be issued on any one life?  
\$1,000 TO \$1,000,000

13.

Is a medical examination required before issuing a benefit certificate to applicants?

Yes [ ☒ ]

No [ ☐ ]

GENERAL INTERROGATORIES

PART 2 – FRATERNAL INTERROGATORIES

14.

Are applicants admitted to membership without filing an application with and becoming a member of a local branch by ballot and initiation?

Yes ☐ No ☒

15.1

Are notices of the payments required sent to the members?

Yes ☒ No ☐ N/A ☐

15.2

If yes, do the notices state the purpose for which the money is to be used?

Yes ☒ No ☐

16.

What proportion of first and subsequent year's payments may be used for management expenses?

16.11

First Year

16.12

Subsequent Years

%

%

17.1

Is any part of the mortuary, disability, emergency or reserve fund, or the accretions from or payments for the same, used for expenses?

Yes ☐ No ☒

17.2

If so, what amount and for what purpose?

\$

18.1

Does the reporting entity pay an old age disability benefit?

Yes ☐ No ☒

18.2

If yes, at what age does the benefit commence?

19.1

Has the constitution or have the laws of the reporting entity been amended during the year?

Yes ☐ No ☒

19.2

If yes, when?

20.

Have you filed with this Department all forms of benefit certificates issued, a copy of the constitution and all of the laws, rules and regulations in force at the present time?

Yes ☒ No ☐

21.1

State whether all or a portion of the regular insurance contributions were waived during the current year under premium-paying certificates on account of meeting attained age or membership requirements?

Yes ☐ No ☒

21.2

If so, was an additional reserve included in Exhibit 5?

Yes ☐ No ☒ N/A ☐

21.3

If yes, explain

22.1

Has the reporting entity reinsured, amalgamated with, or absorbed any company, order, society, or association during the year?

Yes ☐ No ☒

22.2

If yes, was there any contract agreement, or understanding, written or oral, expressed or implied, by means of which any officer, director, trustee, or any other person, or firm, corporation, society or association, received or is to receive any fee, commission, emolument, or compensation of any nature whatsoever in connection with, on an account of such reinsurance, amalgamation, absorption, or transfer of membership or funds?

Yes ☐ No ☒ N/A ☐

23.

Has any present or former officer, director, trustee, incorporator, or any other persons, or any firm, corporation, society or association, any claims of any nature whatsoever against this reporting entity, which is not included in the liabilities on Page 3 of this statement?

Yes ☐ No ☒

24.1

Does the reporting entity have variable annuities with guaranteed benefits?

Yes ☐ No ☒

24.2

If 24.1 is yes, complete the following table for each type of guaranteed benefit.

Type		3	4	5	6	7	8	9
1	2	Waiting Period Remaining	Account Value Related to Col. 3	Total Related Account Values	Gross Amount of Reserve	Location of Reserve	Portion Reinsured	Reinsurance Reserve Credit
Guaranteed Death Benefit	Guaranteed Living Benefit							

25.

For reporting entities having sold annuities to another insurer where the insurer purchasing the annuities has obtained a release of liability from the claimant (payee) as the result of the purchase of an annuity from the reporting entity only:

25.1

Amount of loss reserves established by these annuities during the current year:

\$

25.2

List the name and location of the insurance company purchasing the annuities and the statement value on the purchase date of the annuities.

1	2
P&C Insurance Company and Location	Statement Value on Purchase Date of Annuities (i.e., Present Value)
	\$

26.1

Do you act as a custodian for health savings accounts?

Yes ☐ No ☒

26.2

If yes, please provide the amount of custodial funds held as of the reporting date.

\$

26.3

Do you act as an administrator for health savings accounts?

Yes ☐ No ☒

26.4

If yes, please provide the balance of the funds administered as of the reporting date.

\$

27.1

Does the reporting entity have outstanding assessments in the form of liens against policy benefits that have increased surplus?

Yes ☐ No ☒

27.2

If yes, what is the date(s) of the original lien and the total outstanding balance of liens that remain in surplus?

Date	Outstanding Lien Amount
	\$

28.1

Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers?

Yes ☐ No ☒ N/A ☐

28.2

If the answer to 28.1 is yes, please provide the following:

1	2	3	4	Assets Supporting Reserve Credit		
Company Name	NAIC Company Code	Domiciliary Jurisdiction	Reserve Credit	5 Letters of Credit	6 Trust Agreements	7 Other

29.

Provide the following for individual ordinary life insurance\* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded).

29.1

Direct Premiums Written

\$4,815,180

29.2

Total Incurred Claims

\$3,512,481

29.3

Number of Covered Lives

17,628

GENERAL INTERROGATORIES

PART 2 – FRATERNAL INTERROGATORIES

*Ordinary Life Insurance Includes
Term (whether full underwriting, limited underwriting, jet issue, "short form app")
Whole Life (whether full underwriting, limited underwriting, jet issue, "short form app")
Variable Life (with or without secondary guarantee)
Universal Life (with or without secondary guarantee)
Variable Universal Life (with or without secondary guarantee)

United Transportation Union Insurance Association  
FIVE-YEAR HISTORICAL DATA

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e. 17.6.  
Amounts of life insurance in this exhibit should be shown in thousands (OMIT 000).

	1 2016	2 2015	3 2014	4 2013	5 2012
<b>Life Insurance in Force (Exhibit of Life Insurance)</b>					
1. Total (Line 21, Column 2).....	591,545	596,414	604,714	610,086	627,574
<b>New Business Issued (Exhibit of Life Insurance)</b>					
2. Total (Line 2, Column 2).....	42,590	36,972	43,569	23,297	44,852
<b>Premium Income (Exhibit 1, Part 1)</b>					
3. Life insurance - first year (Line 9.4, Column 2).....	168,508	174,227	293,761	705,527	698,286
4. Life insurance - single and renewal (Lines 10.4 and 19.4, Column 2).....	4,646,672	5,314,639	5,275,668	5,009,244	5,132,561
5. Annuity (Line 20.4, Column 3).....	3,739,737	3,836,293	5,504,087	5,882,890	5,364,400
6. Accident and health (Line 20.4, Column 4).....	3,760,153	3,445,166	3,477,171	3,473,208	3,528,553
7. Aggregate of all other lines of business (Line 20.4, Column 5).....	624,353	988,785	1,198,611	643,143	464,902
8. Total (Line 20.4, Column 1).....	12,939,423	13,759,110	15,749,298	15,714,012	15,188,702
<b>Balance Sheet Items (Pages 2 and 3)</b>					
9. Total admitted assets excluding Separate Accounts business (Page 2, Line 26, Col. 3).....	226,336,516	226,807,650	227,594,939	227,267,692	222,897,383
10. Total liabilities excluding Separate Accounts business (Page 3, Line 23).....	179,492,438	182,021,238	185,151,479	189,900,130	192,801,068
11. Aggregate reserve for life certificates and contracts (Page 3, Line 1).....	158,633,585	160,793,370	162,004,647	163,866,372	165,221,013
12. Aggregate reserve for accident and health certificates (Page 3, Line 2).....	4,923,310	4,891,522	5,466,324	6,108,786	6,877,804
13. Deposit-type contract funds (Page 3, Line 3).....	4,807,434	5,349,761	5,649,282	6,218,008	6,843,851
14. Asset valuation reserve (Page 3, Line 21.1).....	3,258,706	2,659,462	2,874,673	3,635,104	4,250,542
15. Surplus (Page 3, Line 30).....	46,844,079	44,786,412	42,443,460	37,367,562	30,096,315
<b>Cash Flow (Page 5)</b>					
16. Net cash from operations (Line 11).....	(455,211)	326,019	(983,035)	(528,405)	1,537,913
<b>Risk-Based Capital Analysis</b>					
17. Total adjusted capital.....	50,102,785	47,290,874	45,318,133	41,002,666	34,346,857
18. 50% of the calculated RBC amount.....	1,796,671	2,537,153	2,553,573	2,796,346	2,525,925
<b>Percentage Distribution of Cash, Cash Equivalent and Invested Assets</b> (Page 2, Col. 3) (Line No. ÷ Page 2, Line 12, Col. 3) x 100.0					
19. Bonds (Line 1).....	87.6	88.3	87.1	80.6	85.7
20. Stocks (Lines 2.1 and 2.2).....	8.1	7.6	7.7	11.6	9.9
21. Mortgage loans on real estate (Lines 3.1 and 3.2).....					
22. Real estate (Lines 4.1, 4.2 and 4.3).....	0.7	0.7	0.7	1.0	1.0
23. Cash, cash equivalents and short-term investments (Line 5).....	1.3	1.0	1.8	4.0	0.5
24. Contract loans (Line 6).....	2.3	2.4	2.7	2.8	2.9
25. Derivatives (Line 7).....					
26. Other invested assets (Line 8).....					
27. Receivable for securities (Line 9).....					
28. Securities lending reinvested collateral assets (Line 10).....					
29. Aggregate write-ins for invested assets (Line 11).....					
30. Cash, cash equivalents and invested assets (Line 12).....	100.0	100.0	100.0	100.0	100.0
<b>Investments in Subsidiaries and Affiliates</b>					
31. Affiliated bonds (Schedule D Summary, Line 12, Col. 1).....					
32. Affiliated preferred stock (Schedule D Summary, Line 18, Col. 1).....					
33. Affiliated common stock (Schedule D Summary, Line 24, Col. 1).....					
34. Affiliated short-term investments (subtotals included in Sch. DA, Verif., Col. 5, Line 10).....					
35. Affiliated mortgage loans on real estate.....					
36. All other affiliated.....					
37. Total of above Lines 31 to 36.....	0	0	0	0	0
38. Total investment in parent included in Lines 31 to 36 above.....					
<b>Total Nonadmitted Assets and Admitted Assets</b>					
39. Total nonadmitted assets (Page 2, Line 28, Col. 2).....				50,000	20,000
40. Total admitted assets (Page 2, Line 28, Col. 3).....	226,336,516	226,807,650	227,594,939	227,267,692	222,897,383
<b>Investment Data</b>					
41. Net investment income (Exhibit of Net Investment Income, Line 17).....	8,947,834	8,914,020	8,956,316	8,794,465	9,479,581
42. Realized capital gains (losses) (Page 4, Line 30, Column 1).....	120,010	66,446	2,239,628	2,112,019	(122,389)
43. Unrealized capital gains (losses) (Page 4, Line 34, Column 1).....	975,971	(788,075)	(786,907)	1,991,397	2,316,039
44. Total of above Lines 41, 42 and 43.....	10,043,815	8,192,391	10,409,037	12,897,881	11,673,231



United Transportation Union Insurance Association  
FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2016	2 2015	3 2014	4 2013	5 2012
<b>Benefits and Reserve Increases (Page 6)</b>					
45. Total certificate benefits - life (Lines 10, 11, 12, 13 and 14, Column 7 less Line 13, Column 5).....	15,269,813	14,679,412	17,423,498	17,537,051	14,316,084
46. Total certificate benefits - accident and health (Line 13, Column 5).....	1,309,228	1,330,914	1,270,835	1,086,176	1,439,195
47. Increase in life reserves (Line 17, Column 2).....	(1,512,306)	(1,254,279)	(577,694)	(851,127)	(246,696)
48. Increase in accident and health reserves (Line 17, Column 5).....	31,788	(574,802)	(642,462)	(769,018)	(489,260)
49. Refunds to members (Line 28, Column 1).....	(3,935)	(3,040)	(15,449)	7,645	2,087
<b>Operating Percentages</b>					
50. Insurance expense percent (Page 6, Column 1, Lines 19, 20 and 21 less Line 6, Column 1) ÷ (Page 6 Column 1, Line 1) x 100.0.....	55.0	45.4	44.4	42.1	46.2
51. Lapse percent [(Exhibit of Life Insurance, Column 2, Lines 14 and 15) ÷ 1/2 (Exhibit of Life Insurance, Column 2, Lines 1 and 21)] x 100.0.....	4.8	4.6	4.1	2.5	3.9
52. Accident and health loss percent (Schedule H, Part 1, Lines 5 and 6, Column 2).....	35.7	21.9	18.1	10.0	26.9
53. A&H cost containment percent (Schedule H, Part 1, Line 4, Column 2).....					
54. Accident and health expense percent excluding cost containment expenses (Schedule H, Part 1, Line 10, Column 2).....	55.2	52.2	52.9	55.2	56.1
<b>Accident and Health Reserve Adequacy</b>					
55. Incurred losses on prior years' claims (Schedule H, Part 3, Line 3.1, Column 1).....	904,511	915,524	773,898	975,308	1,205,596
56. Prior years' liability and reserve (Schedule H, Part 3, Line 3.2, Column 1).....	715,586	793,177	860,544	1,189,370	1,062,907
<b>Net Gains from Operations After Refunds to Members by Lines of Business (Page 6, Line 29)</b>					
57. Life Insurance (Column 2).....	1,663,785	2,226,881	2,496,263	2,051,705	1,536,913
58. Annuity (Column 3).....	(685,843)	159,716	(659,130)	(629,293)	(433,531)
59. Supplementary contracts (Column 4).....	(59,278)	(393,556)	(158,970)	(244,698)	257,009
60. Accident and health (Column 5).....	642,266	1,184,278	1,340,431	1,585,543	1,003,285
61. Aggregate of all other lines of business (Column 6).....					
62. Fraternal (Column 8).....		(327,949)	(205,848)	(180,865)	(207,615)
63. Expense (Column 9).....					
64. Total (Column 1).....	1,560,930	2,849,370	2,812,746	2,582,392	2,156,061

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors?

Yes [ ] No [ ]

If no, please explain:

United Transportation Union Insurance Association  
EXHIBIT OF LIFE INSURANCE

	1 Number of Certificates	2 Amount of Insurance (a)
1. In force end of prior year.....	18,286	596,415
2. Issued during year.....	442	42,590
3. Reinsurance assumed.....		
4. Revived during year.....	412	15,105
5. Increased during year (net).....		253
6. Subtotals, Lines 2 to 5.....	854	57,948
7. Additions by refunds during year.....	XXX	
8. Aggregate write-ins for increases.....	0	0
9. Totals (Line 1 plus Line 6 to Line 8).....	19,140	654,363
Deductions During Year:		
10. Death.....	437	3,518
11. Maturity.....	13	141
12. Disability.....		
13. Expiry.....	359	29,339
14. Surrender.....	424	10,489
15. Lapse.....	279	17,764
16. Conversion.....		1,567
17. Decreased (net).....		
18. Reinsurance.....		
19. Aggregate write-ins for decreases.....	0	0
20. Totals (Lines 10 to 19).....	1,512	62,818
21. In force end of year (b) (Line 9 minus Line 20).....	17,628	591,545
22. Reinsurance ceded end of year.....	XXX	78,581
23. Line 21 minus Line 22.....	XXX	512,964

DETAILS OF WRITE-INS		
0801. ....		
0802. ....		
0803. ....		
0898. Summary of remaining write-ins for Line 8 from overflow page.....	0	0
0899. Totals (Lines 0801 through 0803 plus 0898) (Line 8 above).....	0	0
1901. ....		
1902. ....		
1903. ....		
1998. Summary of remaining write-ins for Line 19 from overflow page.....	0	0
1999. Totals (Lines 1901 through 1903 plus 1998) (Line 19 above).....	0	0

- (a) Amounts of life insurance in this exhibit shall be shown in thousands (omit 000).
- (b) Paid-up insurance included in the final totals of Line 21 (including additions to certificates) number of certificates.....3,932 , amount, \$....45,627.  
Additional accidental death benefits included in life certificates were in amount \$.....29,967. Does the society collect any contributions from members for general expenses of the society under fully paid-up certificates? Yes [    ]    No [ X ]  
If not, how are such expenses met?.....Operations

EXHIBIT OF NUMBERS OF CERTIFICATES FOR SUPPLEMENTARY CONTRACTS,  
ANNUITIES AND ACCIDENT AND HEALTH INSURANCE

	1 Supplementary Contracts (Involving Life Contingencies)	2 Supplementary Contracts (Not Involving Life Contingencies)	3 Individual Annuities	4 Accident & Health Insurance
1. In force end of prior year.....	17	102	2,792	30,593
2. Issued during year.....		7	38	1,463
3. Reinsurance assumed.....				
4. Increased during year (net).....				
5. Totals (Lines 1 to 4).....	17	109	2,830	32,056
Deduction during year:				
6. Decreased during year (net).....		18	144	2,941
7. Reinsurance ceded.....				
8. Totals (Lines 6 and 7).....	0	18	144	2,941
9. In force end of year (Line 5 minus Line 8).....	17	91	2,686	29,115
10. Amount on deposit.....				XXX
Income now payable:				
11. Amount of income payable.....	21,522	1,381,383	28,413	XXX
Deferred fully paid:				
12. Account balance.....	XXX	XXX		XXX
Deferred not fully paid:				
13. Account balance.....	XXX	XXX	80,621,413	XXX

Annual Statement for the year 2016 of the

United Transportation Union Insurance Association

SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS

Allocated by States and Territories

States, Etc.			1	Direct Business					
				Life Contracts		4 Accident and Health Insurance Premiums, Including Policy, Membership and Other Fees	5 Other Considerations	6 Total Columns 2 through 5	7 Deposit-Type Contracts
				2 Life Insurance Premiums	3 Annuity Considerations				
1.	Alabama.....	AL	N	88,260	7,773	32,794		128,827	3,040
2.	Alaska.....	AK	N	1,409	2,300	1,712		5,421	
3.	Arizona.....	AZ	N	67,319	86,379	75,901		229,599	17,108
4.	Arkansas.....	AR	N	134,465	9,930	48,364		192,759	4,800
5.	California.....	CA	L	586,643	85,459	383,486		1,055,588	161,468
6.	Colorado.....	CO	L	96,184	208,316	78,824		383,324	30,645
7.	Connecticut.....	CT	N	2,854		4,512		7,366	
8.	Delaware.....	DE	N	8,772		3,893		12,665	
9.	District of Columbia.....	DC	L	9,899		8,158		18,057	
10.	Florida.....	FL	N	81,527	624,145	36,610		742,282	2,186
11.	Georgia.....	GA	N	276,085	39,347	130,694		446,126	58,645
12.	Hawaii.....	HI	N					.0	
13.	Idaho.....	ID	N	29,434	2,420	47,878		79,732	
14.	Illinois.....	IL	N	483,228	169,702	417,245		1,070,175	9,600
15.	Indiana.....	IN	N	199,297	46,321	160,082		405,700	
16.	Iowa.....	IA	N	80,276	10,000	45,538		135,814	18,688
17.	Kansas.....	KS	N	169,584	55,578	101,736		326,898	24,317
18.	Kentucky.....	KY	N	164,394	14,300	44,893		223,587	42,087
19.	Louisiana.....	LA	N	129,577	46,766	141,810		318,153	
20.	Maine.....	ME	N	3,758		1,055		4,813	
21.	Maryland.....	MD	N	59,507	6,694	12,393		78,594	63,118
22.	Massachusetts.....	MA	N	11,752		14,114		25,866	
23.	Michigan.....	MI	N	58,966	30,199	31,161		120,326	
24.	Minnesota.....	MN	N	77,188	92,230	35,944		205,362	215,796
25.	Mississippi.....	MS	N	30,982		27,626		58,608	
26.	Missouri.....	MO	N	215,719	42,860	133,028		391,607	25,646
27.	Montana.....	MT	N	27,450	7,430	28,814		63,694	
28.	Nebraska.....	NE	N	156,458	14,892	155,628		326,978	4,215
29.	Nevada.....	NV	N	12,826	6,682	8,788		28,296	
30.	New Hampshire.....	NH	N			106		106	
31.	New Jersey.....	NJ	N	121,853	56,861	335,849		514,563	20,249
32.	New Mexico.....	NM	L	20,795	3,500	16,161		40,456	
33.	New York.....	NY	N	236,736	67,034	116,442		420,212	158,676
34.	North Carolina.....	NC	N	109,040	18,126	49,906		177,072	19,091
35.	North Dakota.....	ND	N	87,723	49,968	48,175		185,866	15,600
36.	Ohio.....	OH	L	265,008	405,477	140,665		811,150	162,693
37.	Oklahoma.....	OK	N	48,416		16,849		65,265	
38.	Oregon.....	OR	N	13,778	25,000	17,227		56,005	
39.	Pennsylvania.....	PA	L	154,780	53,964	215,314		424,058	14,296
40.	Rhode Island.....	RI	N	271		66		337	
41.	South Carolina.....	SC	N	78,239	292,731	54,076		425,046	22,430
42.	South Dakota.....	SD	N	7,897	7,000	11,099		25,996	9,000
43.	Tennessee.....	TN	N	102,368	201,006	51,388		354,762	18,876
44.	Texas.....	TX	N	251,096	406,001	226,749		883,846	7,145
45.	Utah.....	UT	N	30,805		16,617		47,422	3,078
46.	Vermont.....	VT	N	388		192		580	
47.	Virginia.....	VA	N	123,654	5,400	71,372		200,426	19,534
48.	Washington.....	WA	N	28,811	6,700	39,591		75,102	2,448
49.	West Virginia.....	WV	L	71,134	507,125	52,843		631,102	217,408
50.	Wisconsin.....	WI	N	71,039	11,333	34,546		116,918	9,500
51.	Wyoming.....	WY	N	126,162	12,787	92,711		231,660	
52.	American Samoa.....	AS	N					.0	
53.	Guam.....	GU	N					.0	
54.	Puerto Rico.....	PR	N					.0	
55.	US Virgin Islands.....	VI	N					.0	
56.	Northern Mariana Islands.....	MP	N					.0	
57.	Canada.....	CAN	N					.0	
58.	Aggregate Other Alien.....	OT	XXX	.0	.0	.0	.0	.0	.0
59.	Subtotal.....	(a).....	7	5,213,806	3,739,736	3,820,625	.0	12,774,167	1,381,383
90.	Reporting entity contributions for employee benefit plans	XXX						.0	
91.	Dividends or refunds applied to purchase paid-up additions and annuities.....	XXX						.0	
92.	Dividends or refunds applied to shorten endowment or premium paying period.....	XXX						.0	
93.	Premium or annuity considerations waived under disability or other contract provisions.....	XXX						.0	
94.	Aggregate other amounts not allocable by State.....	XXX		.0	.0	.0	.0	.0	.0
95.	Totals (Direct Business).....	XXX		5,213,806	3,739,736	3,820,625	.0	12,774,167	1,381,383
96.	Plus reinsurance assumed.....	XXX						.0	
97.	Totals (All Business).....	XXX		5,213,806	3,739,736	3,820,625	.0	12,774,167	1,381,383
98.	Less reinsurance ceded.....	XXX		268,229				268,229	
99.	Totals (All Business) less reinsurance ceded.....	XXX		4,945,577	3,739,736	(b).....3,820,625	.0	12,505,938	1,381,383

DETAILS OF WRITE-INS									
58001.	.....	XXX						.0	
58002.	.....	XXX						.0	
58003.	.....	XXX						.0	
58998.	Summ. of remaining write-ins for line 58 from overflow	XXX		.0	.0	.0	.0	.0	.0
58999.	Total (Lines 58001 through 58003 plus 58998) (Line 58)	XXX		.0	.0	.0	.0	.0	.0
9401.	.....	XXX						.0	
9402.	.....	XXX						.0	
9403.	.....	XXX						.0	
9498.	Summ. of remaining write-ins for line 94 from overflow	XXX		.0	.0	.0	.0	.0	.0
9499.	Total (Lines 9401 through 9403 plus 9498) (Line 94 above)	XXX		.0	.0	.0	.0	.0	.0

(L) - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) - Registered - Non-domiciled RRGs; (Q) - Qualified - Qualified or Accredited Reinsurer;  
(E) - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) - None of the above - Not allowed to write business in the state.  
Explanation of basis of allocation by states, etc., of premiums and annuity considerations

(a) Insert the number of L responses except for Canada and Other Alien.  
(b) Column 4 should balance with Exhibit 1, Lines 6.4, 10.4 and 16.4, Col. 4 or with Schedule H, Part 1, Column 1, Line 1. Indicate which:

**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**

PART 1 – ORGANIZATIONAL CHART

---

2016 ALPHABETICAL INDEX  
FRATERNAL ANNUAL STATEMENT BLANK

Analysis of Increase in Reserves During The Year	7	Schedule D – Part 2 – Section 1	E11
Analysis of Operations By Lines of Business	6	Schedule D – Part 2 – Section 2	E12
Asset Valuation Reserve (Replications (Synthetic) Assets	32	Schedule D – Part 3	E13
Asset Valuation Reserve Default Component	27	Schedule D – Part 4	E14
Asset Valuation Reserve Equity Component	29	Schedule D – Part 5	E15
Asset Valuation Reserve	26	Schedule D – Part 6 – Section 1	E16
Assets	2	Schedule D – Part 6 – Section 2	E16
Cash Flow	5	Schedule D – Summary By Country	SI04
Exhibit 1 – Part 1 – Premiums and Annuity Considerations for Life and Accident and Health Contracts	9	Schedule D – Verification Between Years	SI03
Exhibit 1 – Part 2 – Refunds Applied, Reinsurance Commissions and Expense	10	Schedule DA – Part 1	E17
Exhibit 2 – General Expenses	11	Schedule DA – Part 2 – Verification Between Years	SI10
Exhibit 3 – Taxes, Licenses and Fees	11	Schedule DB – Part A – Section 1	E18
Exhibit 4 – Dividends	11	Schedule DB – Part A – Section 2	E19
Exhibit 5 – Aggregate Reserve for Life Contracts	12	Schedule DB – Part A – Verification Between Years	SI11
Exhibit 5 – Interrogatories	13	Schedule DB – Part B – Section 1	E20
Exhibit 5A – Changes in Bases of Valuation During The Year	13	Schedule DB – Part B – Section 2	E21
Exhibit 6 – Aggregate Reserves for Accident and Health Contracts	14	Schedule DB – Part B – Verification Between Years	SI11
Exhibit 7 – Deposit-Type Contracts	14	Schedule DB – Part C – Section 1	SI12
Exhibit 8 – Claims for Life and Accident and Health Contracts - Part 1	15	Schedule DB – Part C – Section 2	SI13
Exhibit 8 – Claims for Life and Accident and Health Contracts - Part 2	16	Schedule DB – Part D – Section 1	E22
Exhibit of Capital Gains (Losses)	8	Schedule DB – Part D – Section 2	E23
Exhibit of Life Insurance	24	Schedule DB – Verification	SI14
Exhibit of Net Investment Income	8	Schedule DL – Part 1	E24
Exhibit of Nonadmitted Assets	17	Schedule DL – Part 2	E25
Exhibit of Number of Certificates for Supplementary Contracts, Annuities and Accident and Health Insurance	24	Schedule E – Part 1 – Cash	E26
Five-Year Historical Data	21	Schedule E – Part 2 – Cash Equivalents	E27
Form for Calculating the Interest Maintenance Reserve (IMR)	25	Schedule E – Part 3 – Special Deposits	E28
General Interrogatories	19	Schedule E – Verification Between Years	SI15
Jurat Page	1	Schedule F	33
Liabilities, Surplus and Other Funds	3	Schedule H – Accident and Health Exhibit – Part 1	34
Life Insurance (State Page)	23	Schedule H – Part 5 – Health Claims	36
Notes To Financial Statements	18	Schedule H – Parts – 2, 3, and 4	35
Overflow Page For Write-Ins	52	Schedule S – Part 1 – Section 1	37
Schedule A – Part 1	E01	Schedule S – Part 1 – Section 2	38
Schedule A – Part 2	E02	Schedule S – Part 2	39
Schedule A – Part 3	E03	Schedule S – Part 3 – Section 1	40
Schedule A – Verification Between Years	SI02	Schedule S – Part 3 – Section 2	41
Schedule B – Part 1	E04	Schedule S – Part 4	42
Schedule B – Part 2	E05	Schedule S – Part 5	43
Schedule B –Part 3	E06	Schedule S – Part 6	44
Schedule B – Verification Between Years	SI02	Schedule S – Part 7	45
Schedule BA – Part 1	E07	Schedule T – Part 2 – Interstate Compact	46
Schedule BA – Part 2	E08	Schedule T – Premiums and Annuity Considerations	47
Schedule BA –Part 3	E09	Schedule Y – Information Concerning Activities of Insurer Members of a Holding Company Group	48
Schedule BA – Verification Between Years	SI03	Schedule Y – Part 1A – Detail of Insurance Holding Company System	49
Schedule D – Part 1	E10	Schedule Y – Part 2 – Summary of Insurer's Transactions With Any Affiliates	50
Schedule D – Part 1A – Section 1	SI05	Summary Investment Schedule	SI01
Schedule D – Part 1A – Section 2	SI08	Summary of Operations	4
		Supplemental Exhibits and Schedules Interrogatories	51