



ANNUAL STATEMENT

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

Family Heritage Life Insurance Company of America

NAIC Group Code.....0290, 0290
(Current Period) (Prior Period)

NAIC Company Code..... 77968

Employer's ID Number..... 34-1626521

Organized under the Laws of OH

State of Domicile or Port of Entry OH

Country of Domicile US

Incorporated/Organized..... August 22, 1989

Commenced Business..... November 17, 1989

Statutory Home Office

6001 East Royalton Road, Suite 200..... Cleveland OH US 44147-3529
(Street and Number) (City or Town, State, County and Zip Code)

Main Administrative Office

6001 East Royalton Road, Suite 200..... Cleveland OH US..... 44147-3529 440-922-5200
(Street and Number) (City or Town, State, County and Zip Code) (Area Code) (Telephone Number)

Mail Address

P. O. Box 470608..... Cleveland OH US 44147-3529
(Street and Number or P. O. Box) (City or Town, State, County and Zip Code)

Primary Location of Books and Records

6001 East Royalton Road, Suite 200..... Cleveland OH US 44147-3529 440-922-5200
(Street and Number) (City or Town, State, County and Zip Code) (Area Code) (Telephone Number)

Internet Web Site Address

www.FamilyHeritageLife.com

Statutory Statement Contact

John A. Wise

440-922-5200

(Name)

acctdept@familyheritagelife.com

(Area Code) (Telephone Number) (Extension)

(E-Mail Address)

440-922-5120

(Fax Number)

OFFICERS

Name	Title	Name	Title
1. Kenneth J. Matson	President	2. Ronald L. Sarosy	Treasurer/Chief Financial Officer
3. Maria Burnett	Assistant Secretary	4. Jeffrey S. Morris	Actuary

OTHER

David S. Cochrane	Senior Vice President	Corey Jones #	Senior Vice President
Tony M. Martella	Senior Vice President	R. Brian Mitchell	Senior Vice President
David K. Carlson	Vice President	Seamus Fitzpatrick #	Vice President
Jeremy L. King	Vice President	Travis W. Korth #	Vice President
Eric Lenz	Vice President	Bret D. Mottl #	Vice President
W. Michael Pressley	Vice President	Joel P. Scarborough	Vice President
Eric W. Shanabarger	Vice President	Daniel T. Shelton	Vice President
Duaine L. Styles #	Vice President	Barbara Sue Emig	Appointed Actuary
John A. Wise	Assistant Vice President	Tod K. Richardson	Assistant Vice President
Carol A. McCoy	Assistant Secretary		

DIRECTORS OR TRUSTEES

Ben W. Lutek	Kenneth J. Matson	Jeffrey S. Morris	Maria Burnett
Frank M. Svoboda	Ronald L. Sarosy		

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

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) Kenneth J. Matson	(Signature) Ronald L. Sarosy	(Signature) Maria Burnett
1. (Printed Name) President	2. (Printed Name) Treasurer/Chief Financial Officer	3. (Printed Name) Assistant Secretary
(Title)	(Title)	(Title)

Subscribed and sworn to before me

This _____ day of February 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

DIRECT BUSINESS IN THE STATE OF **ALASKA** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		187				187
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		187	0	0	0	187
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		0	0	0	0	0

DETAILS OF WRITE-INS

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

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

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

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

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....	40,594	40,568		10,008	10,299
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....	40,594	40,568	0	10,008	10,299
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	40,594	40,568	0	10,008	10,299

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

DIRECT BUSINESS IN THE STATE OF **ALABAMA** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		32,733				32,733
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		32,733	0	0	0	32,733
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		39				39
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		39	0	0	0	39

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	135	4,315,000	(a)						135	4,315,000
21. Issued during year.....	.28	695,000							.28	695,000
22. Other changes to in force (Net).....	(28)	(1,195,000)							(28)	(1,195,000)
23. In force December 31 of current year.....	135	3,815,000	0	(a)	0	0	0	0	135	3,815,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		1,512	1,505			
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
Other Individual Policies:						
25.1 Non-cancellable (b).....						
25.2 Guaranteed renewable (b).....		2,871,096	2,869,192		1,073,255	1,128,351
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		2,871,096	2,869,192	0	1,073,255	1,128,351
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		2,872,608	2,870,697	0	1,073,255	1,128,351

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

DIRECT BUSINESS IN THE STATE OF **ARKANSAS** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		131,474				131,474
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		131,474	0	0	0	131,474
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		100,000				100,000
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		2,175				2,175
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		102,175	0	0	0	102,175

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....	4	100,000							4	100,000
Settled during current year:										
18.1 By payment in full.....	4	100,000							4	100,000
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	4	100,000	0	0	0	0	0	0	4	100,000
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	4	100,000	0	0	0	0	0	0	4	100,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	497	10,155,000	(a)						497	10,155,000
21. Issued during year.....	255	5,360,000							255	5,360,000
22. Other changes to in force (Net).....	(140)	(2,940,000)							(140)	(2,940,000)
23. In force December 31 of current year.....	612	12,575,000	0	(a)	0	0	0	0	612	12,575,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid
24. Group policies (b).....					
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....		7,547,948	7,542,941		1,705,957
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....		7,547,948	7,542,941	0	1,705,957
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		7,547,948	7,542,941	0	1,705,957
(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.					

DIRECT BUSINESS IN THE STATE OF **ARIZONA** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		61,216				61,216
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		61,216	0	0	0	61,216
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		2,337				2,337
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		2,337	0	0	0	2,337

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	.91	3,065,982	(a)						.91	3,065,982
21. Issued during year.....	.57	1,810,000							.57	1,810,000
22. Other changes to in force (Net).....	(.8)	(305,000)							(.8)	(305,000)
23. In force December 31 of current year.....	140	4,570,982	0	(a)	0	0	0	0	140	4,570,982

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid
24. Group policies (b).....		3,942	3,923		
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....		4,471,072	4,468,105		.563,518
25.3 Non-renewable for stated reasons only (b).....					.562,453
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....		4,471,072	4,468,105	0	.563,518
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		4,475,014	4,472,028	0	.563,518

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



DIRECT BUSINESS IN THE STATE OF CALIFORNIA DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		48,522				.48,522
2. Annuity considerations.....						.0
3. Deposit-type contract funds.....			XXX			.0
4. Other considerations.....						.0
5. Totals (Sum of Lines 1 to 4).....		48,522	.0	.0	.0	.48,522
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						.0
6.2 Applied to pay renewal premiums.....						.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						.0
6.4 Other.....						.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		.0	.0	.0	.0	.0
Annuities:						
7.1 Paid in cash or left on deposit.....						.0
7.2 Applied to provide paid-up annuities.....						.0
7.3 Other.....						.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....		.0	.0	.0	.0	.0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						.0
10. Matured endowments.....						.0
11. Annuity benefits.....						.0
12. Surrender values and withdrawals for life contracts.....		5,785				5,785
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....						.0
15. Totals.....		5,785	.0	.0	.0	5,785

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									.0	.0
17. Incurred during current year.....									.0	.0
Settled during current year:										
18.1 By payment in full.....									.0	.0
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
POLICY EXHIBIT										
20. In force December 31, prior year.....	112	3,815,000	(a)						112	3,815,000
21. Issued during year.....	.44	1,720,000							.44	1,720,000
22. Other changes to in force (Net).....	(23)	(1,075,000)							(23)	(1,075,000)
23. In force December 31 of current year.....	133	4,460,000	0	(a)	0	0	0	0	133	4,460,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid
24. Group policies (b).....		4,196	4,175		150
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....		.660	.672		
25.2 Guaranteed renewable (b).....		5,078,448	5,075,079		499,703
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....		5,079,108	5,075,751	.0	499,703
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		5,083,304	5,079,926	.0	499,853
(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.					

DIRECT BUSINESS IN THE STATE OF **COLORADO** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		49,527				49,527
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		49,527	0	0	0	49,527
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		20,000				20,000
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		18				18
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		20,018	0	0	0	20,018

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....	1	20,000							1	20,000
Settled during current year:										
18.1 By payment in full.....	1	20,000							1	20,000
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	1	20,000	0	0	0	0	0	0	1	20,000
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	1	20,000	0	0	0	0	0	0	1	20,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	139	4,225,146	(a)						139	4,225,146
21. Issued during year.....	65	1,655,000							.65	1,655,000
22. Other changes to in force (Net).....	(19)	(695,000)							(19)	(695,000)
23. In force December 31 of current year.....	185	5,185,146	0	(a)	0	0	0	0	185	5,185,146

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		4,142	4,122			
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
Other Individual Policies:						
25.1 Non-cancellable (b).....						
25.2 Guaranteed renewable (b).....		7,309,729	7,304,880		995,257	1,052,846
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		7,309,729	7,304,880	0	995,257	1,052,846
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		7,313,871	7,309,002	0	995,257	1,052,846

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



DIRECT BUSINESS IN THE STATE OF CONNECTICUT DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....						.0
2. Annuity considerations.....						.0
3. Deposit-type contract funds.....		....XXX.....			....XXX.....	.0
4. Other considerations.....						.0
5. Totals (Sum of Lines 1 to 4).....	.0	.0		.0	.0	.0
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						.0
6.2 Applied to pay renewal premiums.....						.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						.0
6.4 Other.....		.....NONE.....				.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	.0	.0		.0	.0	.0
Annuities:						
7.1 Paid in cash or left on deposit.....						.0
7.2 Applied to provide paid-up annuities.....						.0
7.3 Other.....						.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0		.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	.0	.0		.0	.0	.0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						.0
10. Matured endowments.....						.0
11. Annuity benefits.....						.0
12. Surrender values and withdrawals for life contracts.....						.0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	.0	.0		.0	.0	.0
14. All other benefits, except accident and health.....						.0
15. Totals.....	.0	.0		.0	.0	.0

DETAILS OF WRITE-INS

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

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

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

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

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....	.732	.728			
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....	15,861	15,850		19,120	19,676
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....	15,861	15,850	.0	19,120	19,676
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	16,593	16,578	.0	19,120	19,676

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



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

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

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

DETAILS OF WRITE-INS

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

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

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

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

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....	10,830	10,824		9,658	9,938
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....	10,830	10,824	0	9,658	9,938
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	10,830	10,824	0	9,658	9,938

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

DIRECT BUSINESS IN THE STATE OF **DELAWARE** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		1,928				1,928
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		1,928	0	0	0	1,928
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		0	0	0	0	0

DETAILS OF WRITE-INS

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

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

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....						
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
Other Individual Policies:						
25.1 Non-cancellable (b).....						
25.2 Guaranteed renewable (b).....		297,244	297,046		22,595	23,252
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		297,244	297,046	0	22,595	23,252
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		297,244	297,046	0	22,595	23,252

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

DIRECT BUSINESS IN THE STATE OF **FLORIDA** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		53,947				53,947
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		53,947	0	0	0	53,947
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		0	0	0	0	0

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	284	5,570,000	(a)						284	5,570,000
21. Issued during year.....	125	2,835,000							125	2,835,000
22. Other changes to in force (Net).....	(48)	(1,045,000)							(48)	(1,045,000)
23. In force December 31 of current year.....	361	7,360,000	0	(a)	0	0	0	0	361	7,360,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		8,331	8,291		1,140	1,150
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
Other Individual Policies:						
25.1 Non-cancellable (b).....						
25.2 Guaranteed renewable (b).....		3,937,487	3,934,876		1,154,627	1,232,037
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		3,937,487	3,934,876	0	1,154,627	1,232,037
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		3,945,818	3,943,167	0	1,155,767	1,233,187

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

DIRECT BUSINESS IN THE STATE OF **GEORGIA** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		75,168				75,168
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		75,168	0	0	0	75,168
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		2,693				2,693
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		2,693	0	0	0	2,693

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	328	7,410,320	(a)						328	7,410,320
21. Issued during year.....	146	3,385,000							146	3,385,000
22. Other changes to in force (Net).....	(77)	(1,800,000)							(77)	(1,800,000)
23. In force December 31 of current year.....	397	8,995,320	0	(a)	0	0	0	0	397	8,995,320

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid
24. Group policies (b).....		4,255	4,234		
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....		8,912,904	8,906,992		2,282,568
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....		8,912,904	8,906,992	0	2,282,568
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		8,917,159	8,911,226	0	2,282,568
(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.					



DIRECT BUSINESS IN GRAND TOTAL DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		2,960,830				2,960,830
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		2,960,830	0	0	0	2,960,830
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		275,851				275,851
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		80,989				80,989
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		356,840	0	0	0	356,840

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....	9	275,851							9	275,851
Settled during current year:										
18.1 By payment in full.....	9	275,851							9	275,851
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	9	275,851	0	0	0	0	0	0	9	275,851
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	9	275,851	0	0	0	0	0	0	9	275,851
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	8,593	254,707,634	(a)						8,593	254,707,634
21. Issued during year.....	3,797	104,102,242							3,797	104,102,242
22. Other changes to in force (Net).....	(2,102)	(63,078,305)							(2,102)	(63,078,305)
23. In force December 31 of current year.....	10,288	295,731,571	0	(a)	0	0	0	0	10,288	295,731,571

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

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

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		10,196,038	10,146,096		1,085,425
24.1 Federal Employee Health Benefits Plan premium (b).....					1,098,887
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....		429,262	436,957	28,273	29,241
25.2 Guaranteed renewable (b).....		228,215,006	228,063,614	57,064,443	59,220,900
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....		228,644,268	228,500,571	57,092,716	59,250,141
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		238,840,306	238,646,667	58,178,141	60,349,028

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



DIRECT BUSINESS IN THE STATE OF HAWAII DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

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

DETAILS OF WRITE-INS

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

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

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

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

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....	.50,813	.50,779		.10,600	.10,908
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....	.50,813	.50,779	.0	.10,600	.10,908
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	.50,813	.50,779	.0	.10,600	.10,908

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

DIRECT BUSINESS IN THE STATE OF **IOWA** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		26,796				26,796
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		26,796	0	0	0	26,796
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		0	0	0	0	0

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	119	2,245,000	(a)						119	2,245,000
21. Issued during year.....	.97	2,040,000							.97	2,040,000
22. Other changes to in force (Net).....	(28)	(420,000)							(28)	(420,000)
23. In force December 31 of current year.....	188	3,865,000	0	(a)	0	0	0	0	188	3,865,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid
24. Group policies (b).....		4,475,050	4,453,130		458,459
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....		298,064	297,867		140,266
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....		298,064	297,867	0	140,266
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		4,773,114	4,750,997	0	598,725
(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.					

DIRECT BUSINESS IN THE STATE OF **IDAHO** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

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

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURDED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	1	25,000	(a)						1	25,000
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	5	210,000	0	0	0	0	0	5	210,000	
23. In force December 31 of current year.....	6	235,000	0	0	0	0	0	6	235,000	

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		1,705	1,697			
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
Other Individual Policies:						
25.1 Non-cancellable (b).....						
25.2 Guaranteed renewable (b).....		1,001,339	1,000,675		131,170	134,329
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		1,001,339	1,000,675	0	131,170	134,329
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		1,003,044	1,002,372	0	131,170	134,329

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

DIRECT BUSINESS IN THE STATE OF **ILLINOIS** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		66,238				66,238
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		66,238	0	0	0	66,238
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		145				145
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		145	0	0	0	145

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	198	6,275,000	(a)						198	6,275,000
21. Issued during year.....	116	2,715,000							116	2,715,000
22. Other changes to in force (Net).....	(57)	(1,620,000)							(57)	(1,620,000)
23. In force December 31 of current year.....	257	7,370,000	0	(a)	0	0	0	0	257	7,370,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid
24. Group policies (b).....		5,579,903	5,552,571		617,226
24.1 Federal Employee Health Benefits Plan premium (b).....					623,259
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....		6,146,590	6,142,513		2,916,948
25.3 Non-renewable for stated reasons only (b).....					3,111,754
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....		6,146,590	6,142,513	0	2,916,948
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		11,726,493	11,695,084	0	3,534,174
(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.					

DIRECT BUSINESS IN THE STATE OF **INDIANA** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		17,147				17,147
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		17,147	0	0	0	17,147
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		0	0	0	0	0

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	.83	1,940,000	(a)						.83	1,940,000
21. Issued during year.....	.14	280,000							.14	280,000
22. Other changes to in force (Net).....	(18)	(395,000)							(18)	(395,000)
23. In force December 31 of current year.....	.79	1,825,000	0	(a)	0	0	0	0	.79	1,825,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid
24. Group policies (b).....		8,601	8,558		
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....		8,596,089	8,590,387		3,684,054
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....		8,596,089	8,590,387	0	3,684,054
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		8,604,690	8,598,945	0	3,684,054

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

DIRECT BUSINESS IN THE STATE OF **KANSAS** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		37,056				37,056
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		37,056	0	0	0	37,056
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		0	0	0	0	0

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	.64	2,020,000	(a).....						.64	2,020,000
21. Issued during year.....	.64	2,050,000							.64	2,050,000
22. Other changes to in force (Net).....	(12)	(445,000)							(12)	(445,000)
23. In force December 31 of current year.....	116	3,625,000	0	(a).....0	0	0	0	0	116	3,625,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		5,220	5,195			
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
Other Individual Policies:						
25.1 Non-cancellable (b).....						
25.2 Guaranteed renewable (b).....		7,905,870	7,900,625		1,366,783	1,383,935
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		7,905,870	7,900,625	0	1,366,783	1,383,935
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		7,911,090	7,905,820	0	1,366,783	1,383,935

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

DIRECT BUSINESS IN THE STATE OF **KENTUCKY** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		85,088				85,088
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		85,088	0	0	0	85,088
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		107				107
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		107	0	0	0	107

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	277	6,925,000	(a)						277	6,925,000
21. Issued during year.....	166	4,320,000							166	4,320,000
22. Other changes to in force (Net).....	(36)	(1,090,000)							(36)	(1,090,000)
23. In force December 31 of current year.....	407	10,155,000	0	(a)	0	0	0	0	407	10,155,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		1,272	1,266			
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
Other Individual Policies:						
25.1 Non-cancellable (b).....						
25.2 Guaranteed renewable (b).....		6,858,569	6,854,019		1,265,512	1,285,232
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		6,858,569	6,854,019	0	1,265,512	1,285,232
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		6,859,841	6,855,285	0	1,265,512	1,285,232

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



DIRECT BUSINESS IN THE STATE OF LOUISIANA DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		11,988				11,988
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		11,988	0	0	0	11,988
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		0	0	0	0	0

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	.37	1,195,000	(a)						.37	1,195,000
21. Issued during year.....	.30	725,000							.30	725,000
22. Other changes to in force (Net).....	(16)	(275,000)							(16)	(275,000)
23. In force December 31 of current year.....	.51	1,645,000	0	(a)	0	0	0	0	.51	1,645,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid
24. Group policies (b).....		3,366	3,350		250
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....		4,648,794	4,645,711		747,564
25.3 Non-renewable for stated reasons only (b).....					785,585
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....		4,648,794	4,645,711	0	747,564
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		4,652,160	4,649,061	0	747,814
(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.					



DIRECT BUSINESS IN THE STATE OF MASSACHUSETTS DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		1,250				1,250
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		1,250	0	0	0	1,250
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		0	0	0	0	0

DETAILS OF WRITE-INS

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

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

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

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

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....	1,199	1,220		200	207
25.2 Guaranteed renewable (b).....	23,798	23,782		2,350	2,418
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....	24,997	25,002	0	2,550	2,625
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	24,997	25,002	0	2,550	2,625

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

DIRECT BUSINESS IN THE STATE OF **MARYLAND** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		2,651				2,651
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		2,651	0	0	0	2,651
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		100				100
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		100	0	0	0	100

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURDED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	7	371,205	(a)						7	371,205
21. Issued during year.....	1	20,000							1	20,000
22. Other changes to in force (Net).....	(2)	(125,000)							(2)	(125,000)
23. In force December 31 of current year.....	6	266,205	0	0	0	0	0	0	6	266,205

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

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

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....	1,065,787	1,065,081		159,788	162,748
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....	1,065,787	1,065,081	0	159,788	162,748
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,065,787	1,065,081	0	159,788	162,748

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



DIRECT BUSINESS IN THE STATE OF MAINE DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

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

DETAILS OF WRITE-INS

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

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

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

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

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....	2,368	2,356			
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....	.468	.476			
25.2 Guaranteed renewable (b).....	321,816	321,602		.45,854	.47,188
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....322,284		322,078	.0	.45,854	.47,188
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....324,652		324,434	.0	.45,854	.47,188

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

DIRECT BUSINESS IN THE STATE OF **MICHIGAN** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		2,186				2,186
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		2,186	0	0	0	2,186
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		0	0	0	0	0

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	6	270,000	(a)						6	270,000
21. Issued during year.....	1	20,000							1	20,000
22. Other changes to in force (Net).....	(2)	(75,000)							(2)	(75,000)
23. In force December 31 of current year.....	5	215,000	0	(a)	0	0	0	0	5	215,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		2,622	2,609		4,800	4,841
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
Other Individual Policies:						
25.1 Non-cancellable (b).....						
25.2 Guaranteed renewable (b).....		1,307,920	1,307,053		188,294	188,761
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		1,307,920	1,307,053	0	188,294	188,761
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		1,310,542	1,309,662	0	193,094	193,602

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

DIRECT BUSINESS IN THE STATE OF **MINNESOTA** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		22,777				22,777
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		22,777	0	0	0	22,777
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		5				5
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		5	0	0	0	0
15. Totals.....		0	0	0	0	0

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	.96	2,325,868	(a)						.96	2,325,868
21. Issued during year.....	.34	1,320,000							.34	1,320,000
22. Other changes to in force (Net).....	(15)	(215,000)							(15)	(215,000)
23. In force December 31 of current year.....	115	3,430,868	0	(a)	0	0	0	0	115	3,430,868

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid
24. Group policies (b).....		8,417	8,376		1,500
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....		8,887,462	8,881,567		1,002,189
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....		8,887,462	8,881,567	0	1,002,189
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		8,895,879	8,889,943	0	1,003,689

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

DIRECT BUSINESS IN THE STATE OF **MISSOURI** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		.51,332				.51,332
2. Annuity considerations.....						.0
3. Deposit-type contract funds.....			XXX			.0
4. Other considerations.....						.0
5. Totals (Sum of Lines 1 to 4).....		.51,332	.0	.0	.0	.51,332
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						.0
6.2 Applied to pay renewal premiums.....						.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						.0
6.4 Other.....						.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		.0	.0	.0	.0	.0
Annuities:						
7.1 Paid in cash or left on deposit.....						.0
7.2 Applied to provide paid-up annuities.....						.0
7.3 Other.....						.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....		.0	.0	.0	.0	.0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						.0
10. Matured endowments.....						.0
11. Annuity benefits.....						.0
12. Surrender values and withdrawals for life contracts.....		1,267				1,267
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....						.0
15. Totals.....		1,267	.0	.0	.0	1,267

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									.0	.0
17. Incurred during current year.....									.0	.0
Settled during current year:										
18.1 By payment in full.....									.0	.0
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
POLICY EXHIBIT										
20. In force December 31, prior year.....	120	5,090,000	(a).....						120	5,090,000
21. Issued during year.....	.72	1,755,000							.72	1,755,000
22. Other changes to in force (Net).....	(34)	(1,110,000)							(34)	(1,110,000)
23. In force December 31 of current year.....	158	5,735,000	0	(a).....0					158	5,735,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid
24. Group policies (b).....		.36,868	.36,687		1,525
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....		6,817,734	6,813,211		1,070,819
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....		6,817,734	6,813,211	.0	1,070,819
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		6,854,602	6,849,898	.0	1,072,344

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

DIRECT BUSINESS IN THE STATE OF **MISSISSIPPI** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		9,815				9,815
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		9,815	0	0	0	9,815
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		1,717				1,717
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		1,717	0	0	0	1,717

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	.37	1,035,000	(a)						.37	1,035,000
21. Issued during year.....	.16	385,000							.16	385,000
22. Other changes to in force (Net).....	(10)	(365,000)							(10)	(365,000)
23. In force December 31 of current year.....	.43	1,055,000	0	(a)	0	0	0	0	.43	1,055,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....						
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
Other Individual Policies:						
25.1 Non-cancellable (b).....						
25.2 Guaranteed renewable (b).....		854,531	853,964		241,397	211,496
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		854,531	853,964	0	241,397	211,496
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		854,531	853,964	0	241,397	211,496

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

DIRECT BUSINESS IN THE STATE OF **MONTANA** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		10,090				10,090
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		10,090	0	0	0	10,090
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		0	0	0	0	0

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURDED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	16	825,000	(a)						16	825,000
21. Issued during year.....	5	400,000							5	400,000
22. Other changes to in force (Net).....									0	0
23. In force December 31 of current year.....	21	1,225,000	0	(a)	0	0	0	0	21	1,225,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....	1,981,526	1,980,211		422,198	566,281
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....	1,981,526	1,980,211	0	422,198	566,281
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,981,526	1,980,211	0	422,198	566,281

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



DIRECT BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		114,907				114,907
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		114,907	0	0	0	114,907
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		50,000				50,000
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		1,254				1,254
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		51,254	0	0	0	51,254

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....	1	50,000							1	50,000
Settled during current year:										
18.1 By payment in full.....	1	50,000							1	50,000
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	1	50,000	0	0	0	0	0	0	1	50,000
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	1	50,000	0	0	0	0	0	0	1	50,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	410	10,728,000	(a)						410	10,728,000
21. Issued during year.....	116	2,865,000							116	2,865,000
22. Other changes to in force (Net).....	(59)	(1,885,000)							(59)	(1,885,000)
23. In force December 31 of current year.....	467	11,708,000	0	(a)	0	0	0	0	467	11,708,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		1,877	1,868			
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
Other Individual Policies:						
25.1 Non-cancellable (b).....						
25.2 Guaranteed renewable (b).....		7,869,244	7,864,024		1,576,650	1,657,451
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		7,869,244	7,864,024	0	1,576,650	1,657,451
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		7,871,121	7,865,892	0	1,576,650	1,657,451

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



DIRECT BUSINESS IN THE STATE OF NORTH DAKOTA DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		4,805				4,805
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		4,805	0	0	0	4,805
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		0	0	0	0	0

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	.21	615,000	(a)						.21	615,000
21. Issued during year.....	1	10,000							1	10,000
22. Other changes to in force (Net).....									0	0
23. In force December 31 of current year.....	22	625,000	0	(a)	0	0	0	0	.22	625,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid
24. Group policies (b).....					
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....		1,257,096	1,256,262		.240,654
25.3 Non-renewable for stated reasons only (b).....					255,512
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....		1,257,096	1,256,262	0	.240,654
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		1,257,096	1,256,262	0	.240,654
(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.					



DIRECT BUSINESS IN THE STATE OF NEBRASKA DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		18,088				18,088
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		18,088	0	0	0	18,088
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		5,851				5,851
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		3,430				3,430
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		9,281	0	0	0	9,281

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....	1	5,851							1	5,851
Settled during current year:										
18.1 By payment in full.....	1	5,851							1	5,851
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	1	5,851	0	0	0	0	0	0	1	5,851
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	1	5,851	0	0	0	0	0	0	1	5,851
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	.33	1,340,792	(a)						.33	1,340,792
21. Issued during year.....	.17	405,000							.17	405,000
22. Other changes to in force (Net).....	-(5)	(305,851)							-(5)	(305,851)
23. In force December 31 of current year.....	.45	1,439,941	0	(a)	0	0	0	0	.45	1,439,941

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid
24. Group policies (b).....		9,463	9,418		105
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....		8,060,678	8,055,330		3,758,699
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....		8,060,678	8,055,330	0	3,758,699
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		8,070,141	8,064,748	0	3,758,804

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



DIRECT BUSINESS IN THE STATE OF NEW HAMPSHIRE DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		11,186				11,186
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		11,186	0	0	0	11,186
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		0	0	0	0	0

DETAILS OF WRITE-INS

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

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

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

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

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....	425,885	433,520		28,073	29,034
25.2 Guaranteed renewable (b).....	213,801	213,658		10,416	10,719
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....	639,686	647,178	0	38,489	39,753
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	639,686	647,178	0	38,489	39,753

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

DIRECT BUSINESS IN THE STATE OF **NEW JERSEY** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		3,159				3,159
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		3,159	0	0	0	3,159
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		0	0	0	0	0

DETAILS OF WRITE-INS

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

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

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

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

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....	31,034	31,013		33,588	34,565
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....	31,034	31,013	0	33,588	34,565
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	31,034	31,013	0	33,588	34,565

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

DIRECT BUSINESS IN THE STATE OF **NEW MEXICO** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		19,016				19,016
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		19,016	0	0	0	19,016
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		1,043				1,043
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		1,043	0	0	0	1,043

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	.31	1,565,000	(a)						.31	1,565,000
21. Issued during year.....	8	245,000							8	245,000
22. Other changes to in force (Net).....	(4)	(270,000)							(4)	(270,000)
23. In force December 31 of current year.....	.35	1,540,000	0	(a)	0	0	0	0	.35	1,540,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....	1,772,162	1,770,986		208,648	214,716
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....	1,772,162	1,770,986	0	208,648	214,716
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,772,162	1,770,986	0	208,648	214,716

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



DIRECT BUSINESS IN THE STATE OF NEVADA DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

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

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	.31	1,470,000	(a)						.31	1,470,000
21. Issued during year.....	3	60,000							3	60,000
22. Other changes to in force (Net).....	(4)	(190,000)							(4)	(190,000)
23. In force December 31 of current year.....	.30	1,340,000	0	(a)	0	0	0	0	.30	1,340,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....	1,267,809	1,266,968		125,785	160,034
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....	1,267,809	1,266,968	0	125,785	160,034
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,267,809	1,266,968	0	125,785	160,034

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

DIRECT BUSINESS IN THE STATE OF **OHIO** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		86,520				86,520
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		86,520	0	0	0	86,520
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		7,249				7,249
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		7,249	0	0	0	7,249

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	216	7,010,659	(a)						216	7,010,659
21. Issued during year.....	38	1,075,000							38	1,075,000
22. Other changes to in force (Net).....	(23)	(860,000)							(23)	(860,000)
23. In force December 31 of current year.....	231	7,225,659	0	(a)	0	0	0	0	231	7,225,659

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid
24. Group policies (b).....		3,295	3,276		
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....		19,918,005	19,904,788		10,629,608
25.3 Non-renewable for stated reasons only (b).....					10,918,364
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....		19,918,005	19,904,788	0	10,629,608
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		19,921,300	19,908,064	0	10,629,608

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

DIRECT BUSINESS IN THE STATE OF **OKLAHOMA** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		.52,916				.52,916
2. Annuity considerations.....						.0
3. Deposit-type contract funds.....			XXX			.0
4. Other considerations.....						.0
5. Totals (Sum of Lines 1 to 4).....		.52,916	.0	.0	.0	.52,916
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						.0
6.2 Applied to pay renewal premiums.....						.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						.0
6.4 Other.....						.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		.0	.0	.0	.0	.0
Annuities:						
7.1 Paid in cash or left on deposit.....						.0
7.2 Applied to provide paid-up annuities.....						.0
7.3 Other.....						.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....		.0	.0	.0	.0	.0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						.0
10. Matured endowments.....						.0
11. Annuity benefits.....						.0
12. Surrender values and withdrawals for life contracts.....		21				.21
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....						.0
15. Totals.....		.21	.0	.0	.0	.21

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									.0	.0
17. Incurred during current year.....									.0	.0
Settled during current year:										
18.1 By payment in full.....									.0	.0
18.2 By payment on compromised claims.....									.0	.0
18.3 Totals paid.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.4 Reduction by compromise.....									.0	.0
18.5 Amount rejected.....									.0	.0
18.6 Total settlements.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
POLICY EXHIBIT										
20. In force December 31, prior year.....	138	3,675,000	(a).....						138	3,675,000
21. Issued during year.....	.92	4,390,000							.92	4,390,000
22. Other changes to in force (Net).....	(47)	(1,590,000)							(47)	(1,590,000)
23. In force December 31 of current year.....	183	6,475,000	0	(a).....0					183	6,475,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		1,466	1,459			
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
Other Individual Policies:						
25.1 Non-cancellable (b).....						
25.2 Guaranteed renewable (b).....		3,828,795	3,826,256		.674,961	.680,559
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		3,828,795	3,826,256	.0	.674,961	.680,559
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		3,830,261	3,827,715	.0	.674,961	.680,559

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



DIRECT BUSINESS IN THE STATE OF OREGON DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		5,815				5,815
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		5,815	0	0	0	5,815
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		0	0	0	0	0

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	.12	400,000	(a)						.12	400,000
21. Issued during year.....	.10	280,000							.10	280,000
22. Other changes to in force (Net).....	(.6)	(170,000)							(.6)	(170,000)
23. In force December 31 of current year.....	.16	510,000	0	(a)	0	0	0	0	.16	510,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		409	407			
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
Other Individual Policies:						
25.1 Non-cancellable (b).....						
25.2 Guaranteed renewable (b).....		972,682	972,037		205,525	209,056
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		972,682	972,037	0	205,525	209,056
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		973,091	972,444	0	205,525	209,056

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

DIRECT BUSINESS IN THE STATE OF **PENNSYLVANIA** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		14,726				14,726
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		14,726	0	0	0	14,726
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		4,290				4,290
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		4,290	0	0	0	4,290

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	.47	1,355,000	(a)						.47	1,355,000
21. Issued during year.....	.15	345,000							.15	345,000
22. Other changes to in force (Net).....	(.7)	(230,000)							(.7)	(230,000)
23. In force December 31 of current year.....	.55	1,470,000	0	(a)	0	0	0	0	.55	1,470,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		1,989	1,979		
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....		3,157,832	3,155,737		831,043
25.3 Non-renewable for stated reasons only (b).....					857,514
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....		3,157,832	3,155,737	0	831,043
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		3,159,821	3,157,716	0	831,043

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



DIRECT BUSINESS IN PUERTO RICO DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

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

DETAILS OF WRITE-INS

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

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

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

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

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....	6,123	6,119			
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....	6,123	6,119	0	0	.0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	6,123	6,119	0	0	.0

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



DIRECT BUSINESS IN THE STATE OF RHODE ISLAND DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

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

DETAILS OF WRITE-INS

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

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

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

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

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....	372	379			
25.2 Guaranteed renewable (b).....	88,318	88,260		9,868	10,155
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....88,690		88,639	0	9,868	10,155
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....88,690		88,639	0	9,868	10,155

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

DIRECT BUSINESS IN THE STATE OF **SOUTH CAROLINA** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		37,206				37,206
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		37,206	0	0	0	37,206
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		456				456
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		456	0	0	0	456

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	175	4,210,000	(a)						175	4,210,000
21. Issued during year.....	.91	2,355,000							.91	2,355,000
22. Other changes to in force (Net).....	(39)	(1,445,000)							(39)	(1,445,000)
23. In force December 31 of current year.....	227	5,120,000	0	(a)	0	0	0	0	227	5,120,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid
24. Group policies (b).....					
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....		2,616,075	2,614,340		354,416
25.3 Non-renewable for stated reasons only (b).....					347,895
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....		2,616,075	2,614,340	0	354,416
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		2,616,075	2,614,340	0	354,416
(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.					

DIRECT BUSINESS IN THE STATE OF **SOUTH DAKOTA** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		10,022				10,022
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		10,022	0	0	0	10,022
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		0	0	0	0	0

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	.17	845,000	(a).....						.17	845,000
21. Issued during year.....	3	140,000							3	140,000
22. Other changes to in force (Net).....	(1)	(75,000)							(1)	(75,000)
23. In force December 31 of current year.....	.19	910,000	(a).....0	0	0	0	0	0	.19	910,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		4,269	4,249			
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
Other Individual Policies:						
25.1 Non-cancellable (b).....						
25.2 Guaranteed renewable (b).....		5,223,917	5,220,451		.957,943	.973,991
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		5,223,917	5,220,451	0	.957,943	.973,991
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		5,228,186	5,224,700	0	.957,943	.973,991

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

DIRECT BUSINESS IN THE STATE OF **TENNESSEE** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		116,984				116,984
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		116,984	0	0	0	116,984
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		1,651				1,651
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		1,651	0	0	0	1,651

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURDED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	190	7,640,000	(a)						190	7,640,000
21. Issued during year.....	.84	2,970,000							.84	2,970,000
22. Other changes to in force (Net).....	(36)	(1,425,000)							(36)	(1,425,000)
23. In force December 31 of current year.....	238	9,185,000	0	(a)	0	0	0	0	238	9,185,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid
24. Group policies (b).....		9,833	9,785		150
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....		4,918,539	4,915,276		1,477,041
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....		4,918,539	4,915,276	0	1,477,041
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		4,928,372	4,925,061	0	1,477,191

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

DIRECT BUSINESS IN THE STATE OF **TEXAS** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		1,373,136				1,373,136
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		1,373,136	0	0	0	1,373,136
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		100,000				100,000
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		38,530				38,530
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		138,530	0	0	0	138,530

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....	2	100,000							2	100,000
Settled during current year:										
18.1 By payment in full.....	2	100,000							2	100,000
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	2	100,000	0	0	0	0	0	0	2	100,000
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	2	100,000	0	0	0	0	0	0	2	100,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	3,811	121,278,165	(a)						3,811	121,278,165
21. Issued during year.....	1,770	48,295,000							1,770	48,295,000
22. Other changes to in force (Net).....	(1,139)	(35,081,943)							(1,139)	(35,081,943)
23. In force December 31 of current year.....	4,442	134,491,222	0	(a)	0	0	0	0	4,442	134,491,222

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		6,576	6,543			120
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
Other Individual Policies:						
25.1 Non-cancellable (b).....						
25.2 Guaranteed renewable (b).....		49,763,250	49,730,237		11,087,000	11,550,383
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		49,763,250	49,730,237	0	11,087,000	11,550,383
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		49,769,826	49,736,780	0	11,087,120	11,550,504

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

DIRECT BUSINESS IN THE STATE OF **UTAH** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

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

DETAILS OF WRITE-INS

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

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

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		487	485			
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
Other Individual Policies:						
25.1 Non-cancellable (b).....		612	623			
25.2 Guaranteed renewable (b).....		3,917,371	3,914,773		407,477	444,739
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		3,917,983	3,915,396	0	407,477	444,739
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		3,918,470	3,915,881	0	407,477	444,739

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

DIRECT BUSINESS IN THE STATE OF **VIRGINIA** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		89,621				89,621
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		89,621	0	0	0	89,621
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		0	0	0	0	0

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	303	6,436,456	(a)						303	6,436,456
21. Issued during year.....	90	1,832,242							90	1,832,242
22. Other changes to in force (Net).....	(77)	(1,335,511)							(77)	(1,335,511)
23. In force December 31 of current year.....	316	6,933,187	0	(a)	0	0	0	0	316	6,933,187

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid
24. Group policies (b).....		1,239	1,233		
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....		4,940,327	4,937,050		1,118,991
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....		4,940,327	4,937,050	0	1,118,991
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		4,941,566	4,938,283	0	1,118,991

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

DIRECT BUSINESS IN THE STATE OF **VERMONT** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		3,934				3,934
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		3,934	0	0	0	3,934
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		1,921				1,921
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		1,921	0	0	0	1,921

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	5	350,000	(a)						5	350,000
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(1)	(50,000)	(a)	0	0	0	0	0	(1)	(50,000)
23. In force December 31 of current year.....	4	300,000	0	0	0	0	0	0	4	300,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....	888	884			
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....	66	67			
25.2 Guaranteed renewable (b).....	41,261	41,234		6,790	6,987
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....	41,327	41,301	0	6,790	6,987
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	42,215	42,185	0	6,790	6,987

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

DIRECT BUSINESS IN THE STATE OF **WASHINGTON** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		103,647				103,647
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		103,647	0	0	0	103,647
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		2,147				2,147
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		2,147	0	0	0	2,147

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	166	7,920,041	(a)						166	7,920,041
21. Issued during year.....	.50	3,465,000							.50	3,465,000
22. Other changes to in force (Net).....	(37)	(1,725,000)							(37)	(1,725,000)
23. In force December 31 of current year.....	179	9,660,041	0	(a)	0	0	0	0	179	9,660,041

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid
24. Group policies (b).....		196	195		
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....		3,143,226	3,141,141		.535,719
25.3 Non-renewable for stated reasons only (b).....					.542,439
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....		3,143,226	3,141,141	0	.535,719
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		3,143,422	3,141,336	0	.535,719

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

DIRECT BUSINESS IN THE STATE OF **WISCONSIN** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		9,150				9,150
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		9,150	0	0	0	9,150
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		1,650				1,650
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		1,650	0	0	0	1,650

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	.33	890,000	(a)						.33	890,000
21. Issued during year.....	4	.85,000							4	.85,000
22. Other changes to in force (Net).....	(5)	(190,000)							(5)	(190,000)
23. In force December 31 of current year.....	.32	785,000	0	(a)	0	0	0	0	.32	785,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		1,549	1,542			
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
Other Individual Policies:						
25.1 Non-cancellable (b).....						
25.2 Guaranteed renewable (b).....		2,474,693	2,473,051		.278,731	.278,055
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		2,474,693	2,473,051	0	.278,731	.278,055
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		2,476,242	2,474,593	0	.278,731	.278,055

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

DIRECT BUSINESS IN THE STATE OF **WEST VIRGINIA** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		60,794				60,794
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		60,794	0	0	0	60,794
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		944				944
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		944	0	0	0	944

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	249	5,920,000	(a)						249	5,920,000
21. Issued during year.....	55	1,190,000							55	1,190,000
22. Other changes to in force (Net).....	(37)	(1,035,000)							(37)	(1,035,000)
23. In force December 31 of current year.....	267	6,075,000	0	(a)	0	0	0	0	267	6,075,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid
24. Group policies (b).....					
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....		2,895,831	2,893,910		.530,004
25.3 Non-renewable for stated reasons only (b).....					.545,420
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....		2,895,831	2,893,910	0	.530,004
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		2,895,831	2,893,910	0	.530,004

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

DIRECT BUSINESS IN THE STATE OF **WYOMING** DURING THE YEAR

NAIC Group Code.....0290

NAIC Company Code.....77968

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		11,406				11,406
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		11,406	0	0	0	11,406
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		15				15
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		15	0	0	0	15

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	.26	840,000	(a)						.26	840,000
21. Issued during year.....	13	505,000							13	505,000
22. Other changes to in force (Net).....	(7)	(235,000)							(7)	(235,000)
23. In force December 31 of current year.....	.32	1,110,000	0	(a)	0	0	0	0	.32	1,110,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....	2,577,022	2,575,313		.272,834	281,190
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....	2,577,022	2,575,313	0	.272,834	281,190
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	2,577,022	2,575,313	0	.272,834	281,190

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

Family Heritage Life Insurance Company of America
FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

Interest Maintenance Reserve

	1 Amount
1. Reserve as of December 31, prior year.....	3,024,192
2. Current year's realized pre-tax capital gains/(losses) of \$....46,803 transferred into the reserve net of taxes of \$....15,909.....	30,894
3. Adjustment for current year's liability gains/(losses) released from the reserve.....	0
4. Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3).....	3,055,086
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4).....	948,180
6. Reserve as of December 31, current year (Line 4 minus Line 5).....	2,106,905

Amortization

Year of Amortization	1 Reserve as of December 31, Prior Year	2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3 Adjustment for Current Year's Liability Gains/(Losses) Released from the Reserve	4 Balance Before Reduction for the Current Year's Amortization (Cols. 1 + 2 + 3)
1. 2016.....	947,876	305		948,180
2. 2017.....	658,658	563		659,221
3. 2018.....	355,936	576		356,512
4. 2019.....	189,931	565		190,496
5. 2020.....	175,522	527		176,049
6. 2021.....	154,172	539		154,711
7. 2022.....	129,134	521		129,654
8. 2023.....	103,781	551		104,332
9. 2024.....	82,044	555		82,599
10. 2025.....	62,259	529		62,787
11. 2026.....	47,087	589		47,676
12. 2027.....	36,557	676		37,233
13. 2028.....	25,527	623		26,151
14. 2029.....	18,838	684		19,522
15. 2030.....	15,301	714		16,015
16. 2031.....	11,199	692		11,891
17. 2032.....	7,321	779		8,100
18. 2033.....	2,651	783		3,434
19. 2034.....	304	817		1,121
20. 2035.....	96	878		974
21. 2036.....	(2)	882		880
22. 2037.....	(2)	1,127		1,125
23. 2038.....	(1)	1,503		1,502
24. 2039.....	(0)	1,902		1,901
25. 2040.....		2,387		2,387
26. 2041.....		2,760		2,760
27. 2042.....		2,774		2,774
28. 2043.....		2,208		2,208
29. 2044.....		1,585		1,585
30. 2045.....		962		962
31. 2046 and Later.....		340		340
32. Total (Lines 1 to 31).....	3,024,191	30,894	0	3,055,085

ASSET VALUATION RESERVE

	Default Component			Equity Component			7 Total Amount (Cols. 3 + 6)
	1 Other Than Mortgage Loans	2 Mortgage Loans	3 Total (Cols. 1 + 2)	4 Common Stock	5 Real Estate and Other Invested Assets	6 Total (Cols. 4 + 5)	
1. Reserve as of December 31, prior year.....	2,935,675		2,935,675		(0)	(0)	2,935,675
2. Realized capital gains/(losses) net of taxes - General Account.....			0		(69,417)	(69,417)	(69,417)
3. Realized capital gains/(losses) net of taxes - Separate Accounts.....			0			0	0
4. Unrealized capital gains/(losses) - net of deferred taxes - General Account.....	39,628		39,628		(36,783)	(36,783)	2,845
5. Unrealized capital gains/(losses) - net of deferred taxes - Separate Accounts.....			0			0	0
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves.....			0			0	0
7. Basic contribution.....	1,019,655		1,019,655		6,769	6,769	1,026,425
8. Accumulated balances (Lines 1 through 5, minus 6 plus 7).....	3,994,958	0	3,994,958	0	(99,431)	(99,431)	3,895,527
9. Maximum reserve.....	5,336,067		5,336,067		129,113	129,113	5,465,180
10. Reserve objective.....	3,661,688		3,661,688		117,276	117,276	3,778,964
11. 20% of (Line 10 minus Line 8).....	(66,654)	0	(66,654)	0	43,341	43,341	(23,313)
12. Balance before transfers (Lines 8 + 11).....	3,928,304	0	3,928,304	0	(56,089)	(56,089)	3,872,215
13. Transfers.....			0			0	0
14. Voluntary contribution.....			0			0	0
15. Adjustment down to maximum/up to zero.....			0		56,089	56,089	56,089
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15).....	3,928,304	0	3,928,304	0	(0)	(0)	3,928,304

ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
LONG-TERM BONDS												
1		Exempt obligations.....	45,855,185	XXX.....	XXX.....	45,855,185	0.0000	0	0.0000	0	0.0000	0
2	1	Highest quality.....	495,047,079	XXX.....	XXX.....	495,047,079	0.0004	198,019	0.0023	1,138,608	0.0030	1,485,141
3	2	High quality.....	380,491,884	XXX.....	XXX.....	380,491,884	0.0019	722,935	0.0058	2,206,853	0.0090	3,424,427
4	3	Medium quality.....	5,971,459	XXX.....	XXX.....	5,971,459	0.0093	55,535	0.0230	137,344	0.0340	203,030
5	4	Low quality.....	2,026,639	XXX.....	XXX.....	2,026,639	0.0213	43,167	0.0530	107,412	0.0750	151,998
6	5	Lower quality.....		XXX.....	XXX.....	0	0.0432	0	0.1100	0	0.1700	0
7	6	In or near default.....	357,355	XXX.....	XXX.....	357,355	0.0000	0	0.2000	71,471	0.2000	71,471
8		Total unrated multi-class securities acquired by conversion.....		XXX.....	XXX.....	0	XXX.....	0	XXX.....	0	XXX.....	
9		Total long-term bonds (sum of Lines 1 through 8).....	929,749,601	XXX.....	XXX.....	929,749,601	XXX.....	1,019,655	XXX.....	3,661,688	XXX.....	5,336,067
PREFERRED STOCKS												
10	1	Highest quality.....		XXX.....	XXX.....	0	0.0004	0	0.0023	0	0.0030	0
11	2	High quality.....		XXX.....	XXX.....	0	0.0019	0	0.0058	0	0.0090	0
12	3	Medium quality.....		XXX.....	XXX.....	0	0.0093	0	0.0230	0	0.0340	0
13	4	Low quality.....		XXX.....	XXX.....	0	0.0213	0	0.0530	0	0.0750	0
14	5	Lower quality.....		XXX.....	XXX.....	0	0.0432	0	0.1100	0	0.1700	0
15	6	In or near default.....		XXX.....	XXX.....	0	0.0000	0	0.2000	0	0.2000	0
16		Affiliated life with AVR.....		XXX.....	XXX.....	0	0.0000	0	0.0000	0	0.0000	0
17		Total preferred stocks (sum of Lines 10 through 16).....	0	XXX.....	XXX.....	0	XXX.....	0	XXX.....	0	XXX.....	0
SHORT-TERM BONDS												
18		Exempt obligations.....	4,946,286	XXX.....	XXX.....	4,946,286	0.0000	0	0.0000	0	0.0000	0
19	1	Highest quality.....		XXX.....	XXX.....	0	0.0004	0	0.0023	0	0.0030	0
20	2	High quality.....		XXX.....	XXX.....	0	0.0019	0	0.0058	0	0.0090	0
21	3	Medium quality.....		XXX.....	XXX.....	0	0.0093	0	0.0230	0	0.0340	0
22	4	Low quality.....		XXX.....	XXX.....	0	0.0213	0	0.0530	0	0.0750	0
23	5	Lower quality.....		XXX.....	XXX.....	0	0.0432	0	0.1100	0	0.1700	0
24	6	In or near default.....		XXX.....	XXX.....	0	0.0000	0	0.2000	0	0.2000	0
25		Total short-term bonds (sum of Lines 18 through 24).....	4,946,286	XXX.....	XXX.....	4,946,286	XXX.....	0	XXX.....	0	XXX.....	0
DERIVATIVE INSTRUMENTS												
26		Exchange traded.....		XXX.....	XXX.....	0	0.0004	0	0.0023	0	0.0030	0
27	1	Highest quality.....		XXX.....	XXX.....	0	0.0004	0	0.0023	0	0.0030	0
28	2	High quality.....		XXX.....	XXX.....	0	0.0019	0	0.0058	0	0.0090	0
29	3	Medium quality.....		XXX.....	XXX.....	0	0.0093	0	0.0230	0	0.0340	0
30	4	Low quality.....		XXX.....	XXX.....	0	0.0213	0	0.0530	0	0.0750	0
31	5	Lower quality.....		XXX.....	XXX.....	0	0.0432	0	0.1100	0	0.1700	0
32	6	In or near default.....		XXX.....	XXX.....	0	0.0000	0	0.2000	0	0.2000	0
33		Total derivative instruments.....	0	XXX.....	XXX.....	0	XXX.....	0	XXX.....	0	XXX.....	0
34		Total (Lines 9 + 17 + 25 + 33).....	934,695,887	XXX.....	XXX.....	934,695,887	XXX.....	1,019,655	XXX.....	3,661,688	XXX.....	5,336,067

ASSET VALUATION RESERVE (continued)

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
		MORTGAGE LOANS										
		In good standing:										
35		Farm mortgages - CM1 - highest quality.....		....XXX.....	....0	....0.0010.....	....0	....0.0050.....	....0	....0.0065.....	....0
36		Farm mortgages - CM2 - high quality.....		....XXX.....	....0	....0.0035.....	....0	....0.0100.....	....0	....0.0130.....	....0
37		Farm mortgages - CM3 - medium quality.....		....XXX.....	....0	....0.0060.....	....0	....0.0175.....	....0	....0.0225.....	....0
38		Farm mortgages - CM4 - low medium quality.....		....XXX.....	....0	....0.0105.....	....0	....0.0300.....	....0	....0.0375.....	....0
39		Farm mortgages - CM5 - low quality.....		....XXX.....	....0	....0.0160.....	....0	....0.0425.....	....0	....0.0550.....	....0
40		Residential mortgages-insured or guaranteed.....		....XXX.....	....0	....0.0003.....	....0	....0.0006.....	....0	....0.0010.....	....0
41		Residential mortgages-all other.....		....XXX.....	....0	....0.0013.....	....0	....0.0030.....	....0	....0.0040.....	....0
42		Commercial mortgages-insured or guaranteed.....		....XXX.....	....0	....0.0003.....	....0	....0.0006.....	....0	....0.0010.....	....0
43		Commercial mortgages-all other - CM1 - highest quality.....		....XXX.....	....0	....0.0010.....	....0	....0.0050.....	....0	....0.0065.....	....0
44		Commercial mortgages-all other - CM2 - high quality.....		....XXX.....	....0	....0.0035.....	....0	....0.0100.....	....0	....0.0130.....	....0
45		Commercial mortgages-all other - CM3 - medium quality.....		....XXX.....	....0	....0.0060.....	....0	....0.0175.....	....0	....0.0225.....	....0
46		Commercial mortgages-all other - CM4 - low medium quality.....		....XXX.....	....0	....0.0105.....	....0	....0.0300.....	....0	....0.0375.....	....0
47		Commercial mortgages-all other - CM5 - low quality.....		....XXX.....	....0	....0.0160.....	....0	....0.0425.....	....0	....0.0550.....	....0
		Overdue, not in process:										
48		Farm mortgages.....		....XXX.....	....0	....0.0420.....	....0	....0.0760.....	....0	....0.1200.....	....0
49		Residential mortgages-insured or guaranteed.....		....XXX.....	....0	....0.0005.....	....0	....0.0012.....	....0	....0.0020.....	....0
50		Residential mortgages-all other.....		....XXX.....	....0	....0.0025.....	....0	....0.0058.....	....0	....0.0090.....	....0
51		Commercial mortgages-insured or guaranteed.....		....XXX.....	....0	....0.0005.....	....0	....0.0012.....	....0	....0.0020.....	....0
52		Commercial mortgages-all other.....		....XXX.....	....0	....0.0420.....	....0	....0.0760.....	....0	....0.1200.....	....0
		In process of foreclosure:										
53		Farm mortgages.....		....XXX.....	....0	....0.0000.....	....0	....0.1700.....	....0	....0.1700.....	....0
54		Residential mortgages-insured or guaranteed.....		....XXX.....	....0	....0.0000.....	....0	....0.0040.....	....0	....0.0040.....	....0
55		Residential mortgages-all other.....		....XXX.....	....0	....0.0000.....	....0	....0.0130.....	....0	....0.0130.....	....0
56		Commercial mortgages-insured or guaranteed.....		....XXX.....	....0	....0.0000.....	....0	....0.0040.....	....0	....0.0040.....	....0
57		Commercial mortgages-all other.....		....XXX.....	....0	....0.0000.....	....0	....0.1700.....	....0	....0.1700.....	....0
58		Total Schedule B mortgages (sum of Lines 35 through 57).....	....0	....0	....XXX.....	....0	....XXX.....	....0	....XXX.....	....0	....XXX.....
59		Schedule DA mortgages.....			....XXX.....	....0	....0.0030.....	....0	....0.0100.....	....0	....0.0130.....
60		Total mortgage loans on real estate (Lines 58 + 59).....	....0	....0	....XXX.....	....0	....XXX.....	....0	....XXX.....	....0	....XXX.....

ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Equity and Other Invested Asset Component

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
COMMON STOCK												
1		Unaffiliated public.....		XXX.....	XXX.....	.0	0.0000	0	(a).....0.2000	0	(a).....0.2000	0
2		Unaffiliated private.....		XXX.....	XXX.....	.0	0.0000	0	.....0.1600	0	.....0.1600	0
3		Federal Home Loan Bank.....		XXX.....	XXX.....	.0	0.0000	0	.....0.0050	0	.....0.0080	0
4		Affiliated life with AVR.....		XXX.....	XXX.....	.0	0.0000	0	.....0.0000	0	.....0.0000	0
5		Affiliated Investment Subsidiary:										
6		Fixed income exempt obligations.....				.0	XXX.....		....XXX.....		....XXX.....	
7		Fixed income highest quality.....				.0	XXX.....		....XXX.....		....XXX.....	
8		Fixed income high quality.....				.0	XXX.....		....XXX.....		....XXX.....	
9		Fixed income medium quality.....				.0	XXX.....		....XXX.....		....XXX.....	
10		Fixed income low quality.....				.0	XXX.....		....XXX.....		....XXX.....	
11		Fixed income lower quality.....				.0	XXX.....		....XXX.....		....XXX.....	
12		Fixed income in or near default.....				.0	XXX.....		....XXX.....		....XXX.....	
13		Unaffiliated common stock public.....				.0	0.0000	0	(a).....0	0	(a).....0	0
14		Unaffiliated common stock private.....				.0	0.0000	0	.....0.1600	0	.....0.1600	0
15		Real estate.....				.0	(b).....0	0	(b).....0	0	(b).....0	0
16		Affiliated - certain other (see SVO Purposes and Procedures Manual).....		XXX.....	XXX.....	.0	0.0000	0	.....0.1300	0	.....0.1300	0
17		Affiliated - all other.....		XXX.....	XXX.....	.0	0.0000	0	.....0.1600	0	.....0.1600	0
		Total common stock (sum of Lines 1 through 16).....	0	0	0	0	XXX.....	0	XXX.....	0	XXX.....	0
REAL ESTATE												
18		Home office property (General Account only).....				.0	0.0000	0	.....0.0750	0	.....0.0750	0
19		Investment properties.....	670,000			670,000	0.0000	0	.....0.0750	50,250	.....0.0750	50,250
20		Properties acquired in satisfaction of debt.....				.0	0.0000	0	.....0.1100	0	.....0.1100	0
21		Total real estate (sum of Lines 18 through 20).....	670,000	0	0	670,000	XXX.....	0	XXX.....	50,250	XXX.....	50,250
OTHER INVESTED ASSETS												
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS												
22		Exempt obligations.....		XXX.....	XXX.....	.0	0.0000	0	.....0.0000	0	.....0.0000	0
23	1	Highest quality.....		XXX.....	XXX.....	.0	0.0004	0	.....0.0023	0	.....0.0030	0
24	2	High quality.....		XXX.....	XXX.....	.0	0.0019	0	.....0.0058	0	.....0.0090	0
25	3	Medium quality.....		XXX.....	XXX.....	.0	0.0093	0	.....0.0230	0	.....0.0340	0
26	4	Low quality.....		XXX.....	XXX.....	.0	0.0213	0	.....0.0530	0	.....0.0750	0
27	5	Lower quality.....		XXX.....	XXX.....	.0	0.0432	0	.....0.1100	0	.....0.1700	0
28	6	In or near default.....		XXX.....	XXX.....	.0	0.0000	0	.....0.2000	0	.....0.2000	0
29		Total with bond characteristics (sum of Lines 22 through 28).....	0	XXX.....	XXX.....	0	XXX.....	0	XXX.....	0	XXX.....	0

ASSET VALUATION RESERVE (continued)

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Equity and Other Invested Asset Component

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS										
30	1	Highest quality.....	16,865,878	XXX.....	XXX.....	16,865,878	0.0004	6,746	0.0023	38,792	0.0030	50,598
31	2	High quality.....		XXX.....	XXX.....	0	0.0019	0	0.0058	0	0.0090	0
32	3	Medium quality.....		XXX.....	XXX.....	0	0.0093	0	0.0230	0	0.0340	0
33	4	Low quality.....		XXX.....	XXX.....	0	0.0213	0	0.0530	0	0.0750	0
34	5	Lower quality.....		XXX.....	XXX.....	0	0.0432	0	0.1100	0	0.1700	0
35	6	In or near default.....		XXX.....	XXX.....	0	0.0000	0	0.2000	0	0.2000	0
36		Affiliated life with AVR.....		XXX.....	XXX.....	0	0.0000	0	0.0000	0	0.0000	0
37		Total with preferred stock characteristics (sum of Lines 30 through 36).....	16,865,878	XXX.....	XXX.....	16,865,878	XXX.....	6,746	XXX.....	38,792	XXX.....	50,598
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS										
		In Good Standing Affiliated:										
38		Mortgages - CM1 - highest quality.....			XXX.....	0	0.0010	0	0.0050	0	0.0065	0
39		Mortgages - CM2 - high quality.....			XXX.....	0	0.0035	0	0.0100	0	0.0130	0
40		Mortgages - CM3 - medium quality.....			XXX.....	0	0.0060	0	0.0175	0	0.0225	0
41		Mortgages - CM4 - low medium quality.....			XXX.....	0	0.0105	0	0.0300	0	0.0375	0
42		Mortgages - CM5 - low quality.....			XXX.....	0	0.0160	0	0.0425	0	0.0550	0
43		Residential mortgages-insured or guaranteed.....			XXX.....	0	0.0003	0	0.0006	0	0.0010	0
44		Residential mortgages-all other.....		XXX.....	XXX.....	0	0.0013	0	0.0030	0	0.0040	0
45		Commercial mortgages-insured or guaranteed.....		XXX.....	XXX.....	0	0.0003	0	0.0006	0	0.0010	0
		Overdue, Not in Process Affiliated:										
46		Farm mortgages.....			XXX.....	0	0.0420	0	0.0760	0	0.1200	0
47		Residential mortgages-insured or guaranteed.....			XXX.....	0	0.0005	0	0.0012	0	0.0020	0
48		Residential mortgages-all other.....			XXX.....	0	0.0025	0	0.0058	0	0.0090	0
49		Commercial mortgages-insured or guaranteed.....			XXX.....	0	0.0005	0	0.0012	0	0.0020	0
50		Commercial mortgages-all other.....			XXX.....	0	0.0420	0	0.0760	0	0.1200	0
		In Process of foreclosure Affiliated:										
51		Farm mortgages.....			XXX.....	0	0.0000	0	0.1700	0	0.1700	0
52		Residential mortgages-insured or guaranteed.....			XXX.....	0	0.0000	0	0.0040	0	0.0040	0
53		Residential mortgages-all other.....			XXX.....	0	0.0000	0	0.0130	0	0.0130	0
54		Commercial mortgages-insured or guaranteed.....			XXX.....	0	0.0000	0	0.0040	0	0.0040	0
55		Commercial mortgages-all other.....			XXX.....	0	0.0000	0	0.1700	0	0.1700	0
56		Total Affiliated (Sum of Lines 38 through 55).....	0	0	XXX.....	0	XXX.....	0	XXX.....	0	XXX.....	0
57		Unaffiliated - In Good Standing with Covenants.....			XXX.....	0	(c).....	0	(c).....	0	(c).....	0
58		Unaffiliated - In Good Standing Defeased with Government Securities.....			XXX.....	0	0.0010	0	0.0050	0	0.0065	0
59		Unaffiliated - In Good Standing Primarily Senior.....			XXX.....	0	0.0035	0	0.0100	0	0.0130	0
60		Unaffiliated - In Good Standing All Other.....			XXX.....	0	0.0060	0	0.0175	0	0.0225	0
61		Unaffiliated - Overdue, Not in Process.....			XXX.....	0	0.0420	0	0.0760	0	0.1200	0
62		Unaffiliated - In Process of Foreclosure.....			XXX.....	0	0.0000	0	0.1700	0	0.1700	0
63		Total Unaffiliated (Sum of Lines 57 through 62).....	0	0	XXX.....	0	XXX.....	0	XXX.....	0	XXX.....	0
64		Total with Mortgage Loan Characteristics (Lines 56 + 63).....	0	0	XXX.....	0	XXX.....	0	XXX.....	0	XXX.....	0

ASSET VALUATION RESERVE (continued)

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Equity and Other Invested Asset Component

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK												
65		Unaffiliated public.....		XXX.....	XXX.....	0	0.0000	0	(a).....	0	(a).....	
66		Unaffiliated private.....		XXX.....	XXX.....	0	0.0000	0	0.1600	0	0.1600	
67		Affiliated life with AVR.....		XXX.....	XXX.....	0	0.0000	0	0.0000	0	0.0000	
68		Affiliated certain other (see SVO Purposes and Procedures Manual).....		XXX.....	XXX.....	0	0.0000	0	0.1300	0	0.1300	
69		Affiliated other - all other.....		XXX.....	XXX.....	0	0.0000	0	0.1600	0	0.1600	
70		Total with Common Stock Characteristics (Sum of Lines 65 through 69).....	0	XXX.....	XXX.....	0	XXX.....	0	XXX.....	0	XXX.....	
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE												
71		Home office property (general account only).....				0	0.0000	0	0.0750	0	0.0750	
72		Investment properties.....				0	0.0000	0	0.0750	0	0.0750	
73		Properties acquired in satisfaction of debt.....				0	0.0000	0	0.1100	0	0.1100	
74		Total with Real Estate Characteristics (Sum of Lines 71 through 73).....	0	0	0	0	XXX.....	0	XXX.....	0	XXX.....	
LOW INCOME HOUSING TAX CREDIT INVESTMENTS												
75		Guaranteed federal low income housing tax credit.....	76,803			76,803	0.0003	23	0.0006	46	0.0010	
76		Non-guaranteed federal low income housing tax credit.....				0	0.0063	0	0.0120	0	0.0190	
77		Guaranteed state low income housing tax credit.....				0	0.0003	0	0.0006	0	0.0010	
78		Non-guaranteed state low income housing tax credit.....				0	0.0063	0	0.0120	0	0.0190	
79		All other low income housing tax credit.....				0	0.0273	0	0.0600	0	0.0975	
80		Total LIHTC (Sum of Lines 75 through 79).....	76,803	0	0	76,803	XXX.....	23	XXX.....	46	XXX.....	
ALL OTHER INVESTMENTS												
81		NAIC 1 working capital finance investments.....		XXX.....		0	0.0000	0	0.0037	0	0.0037	
82		NAIC 2 working capital finance investments.....		XXX.....		0	0.0000	0	0.0120	0	0.0120	
83		Other invested assets - Schedule BA.....	216,837	XXX.....		216,837	0.0000	0	0.1300	28,189	0.1300	
84		Other short-term invested assets - Schedule DA.....		XXX.....		0	0.0000	0	0.1300	0	0.1300	
85		Total All Other (sum of Lines 81, 82, 83 and 84).....	216,837	XXX.....	0	216,837	XXX.....	0	XXX.....	28,189	XXX.....	
86		Total Other Invested Assets - Schedule BA & DA (Sum of Lines 29, 37, 64, 70, 74, 80 and 85).....	17,159,518	0	0	17,159,518	XXX.....	6,769	XXX.....	67,026	XXX.....	

(a) Times the company's weighted average portfolio beta (Minimum .10, Maximum .20).

(b) Determined using same factors and breakdowns used for directly owned real estate.

(c) This will be the factor associated with the risk category determined in the company generated worksheet.

Asset Valuation Reserve - Replications (Synthetic) Assets
NONE

Sch. F - Claims
NONE

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

	Total		Group Accident and Health		Credit A&H (Group and Individual)		Collectively Renewable		Other Individual Contracts									
			1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %	15 Amount	16 %
PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS																		
1. Premiums written.....	236,670,771	XXX	10,124,774	XXX	.....	XXX	.....	XXX	.....	XXX	309,494	XXX	226,236,503	XXX	.....	XXX	.....	XXX
2. Premiums earned.....	236,206,945	XXX	10,047,627	XXX	.....	XXX	.....	XXX	.....	XXX	315,154	XXX	225,844,164	XXX	.....	XXX	.....	XXX
3. Incurred claims.....	60,050,362	25.4	1,092,589	10.9	0	0.0	0	0.0	0	0.0	15,402	4.9	58,942,371	26.1	0	0.0	0	0.0
4. Cost containment expenses.....	0	0.0	0.0	0.0	.....	0.0	.....	0.0	.....	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
5. Incurred claims and cost containment expenses (Lines 3 and 4).....	60,050,362	25.4	1,092,589	10.9	0	0.0	0	0.0	0	0.0	15,402	4.9	58,942,371	26.1	0	0.0	0	0.0
6. Increase in contract reserves.....	96,675,935	40.9	3,694,785	36.8	0	0.0	0	0.0	0	0.0	45,411	14.4	92,935,739	41.2	0	0.0	0	0.0
7. Commissions (a).....	52,360,385	22.2	2,912,497	29.0	.....	0.0	.....	0.0	.....	0.0	54,544	17.3	49,393,344	21.9	.....	0.0	0.0	0.0
8. Other general insurance expenses.....	22,641,956	9.6	963,129	9.6	.....	0.0	.....	0.0	.....	0.0	30,210	9.6	21,648,617	9.6	.....	0.0	0.0	0.0
9. Taxes, licenses and fees.....	5,617,900	2.4	238,971	2.4	.....	0.0	.....	0.0	.....	0.0	7,496	2.4	5,371,433	2.4	.....	0.0	0.0	0.0
10. Total other expenses incurred.....	80,620,241	34.1	4,114,597	41.0	0	0.0	0	0.0	0	0.0	92,250	29.3	76,413,394	33.8	0	0.0	0	0.0
11. Aggregate write-ins for deductions.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
12. Gain from underwriting before dividends or refunds.....	(1,139,593)	(0.5)	1,145,656	11.4	0	0.0	0	0.0	0	0.0	162,091	51.4	(2,447,340)	(1.1)	0	0.0	0	0.0
13. Dividends or refunds.....	0	0.0	0	0.0	.....	0.0	.....	0.0	.....	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
14. Gain from underwriting after dividends or refunds.....	(1,139,593)	(0.5)	1,145,656	11.4	0	0.0	0	0.0	0	0.0	162,091	51.4	(2,447,340)	(1.1)	0	0.0	0	0.0

DETAILS OF WRITE-INS

1101.	0	0.0	.....	0.0	.....	0.0	.....	0.0	.....	0.0	.....	0.0	.....	0.0	.....	0.0	.....	0.0
1102.	0	0.0	.....	0.0	.....	0.0	.....	0.0	.....	0.0	.....	0.0	.....	0.0	.....	0.0	.....	0.0
1103.	0	0.0	.....	0.0	.....	0.0	.....	0.0	.....	0.0	.....	0.0	.....	0.0	.....	0.0	.....	0.0
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1199. Total (Lines 1101 through 1103 plus 1198) (Line 11 above).	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0

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

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (continued)

	1 Total	2 Group Accident and Health	3 Credit A&H (Group and Individual)	4 Collectively Renewable	Other Individual Contracts				
					5 Non-Cancelable	6 Guaranteed Renewable	7 Non-Renewable for Stated Reasons Only	8 Other Accident Only	9 All Other
PART 2 - RESERVES AND LIABILITIES									
A. Premium Reserves:									
1. Unearned premiums.....	10,409,265	.567,822			12,358	.9,829,085			
2. Advance premiums.....	0								
3. Reserve for rate credits.....	0								
4. Total premium reserves, current year.....	10,409,265	.567,822		0	12,358	.9,829,085	0	0	0
5. Total premium reserves, prior year.....	9,945,439	.490,675			18,018	.9,436,746			
6. Increase in total premium reserves.....	463,826	.77,147		0	(5,660)	.392,339	0	0	0
B. Contract Reserves:									
1. Additional reserves (a).....	801,315,392	8,669,687			137,935	.792,507,770			
2. Reserve for future contingent benefits.....	0								
3. Total contract reserves, current year.....	801,315,392	8,669,687		0	137,935	.792,507,770	0	0	0
4. Total contract reserves, prior year.....	704,639,457	4,974,902			92,524	.699,572,031			
5. Increase in contract reserves.....	96,675,935	3,694,785		0	45,411	.92,935,739	0	0	0
C. Claim Reserves and Liabilities:									
1. Total current year.....	21,971,525	846,852		0	16,444	.21,108,229	0	0	0
2. Total prior year.....	19,908,799	836,390			20,476	.19,051,933			
3. Increase.....	2,062,726	10,462		0	(4,032)	.2,056,296	0	0	0

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PART 3 - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES

1. Claims Paid During the Year:									
1.1 On claims incurred prior to current year.....	13,837,611	328,913			10,635	.13,498,063			
1.2 On claims incurred during current year.....	44,150,025	753,214			8,799	.43,388,012			
2. Claim Reserves and Liabilities, December 31, current year:									
2.1 On claims incurred prior to current year.....	3,757,916	110,307			5,755	.3,641,854			
2.2 On claims incurred during current year.....	18,213,609	736,545			10,689	.17,466,375			
3. Test:									
3.1 Lines 1.1 and 2.1.....	17,595,527	439,220		0	16,390	.17,139,917	0	0	0
3.2 Claim reserves and liabilities, December 31, prior year.....	19,908,799	836,390			20,476	.19,051,933			
3.3 Line 3.1 minus Line 3.2.....	(2,313,272)	(397,170)		0	(4,086)	(1,912,016)	0	0	0

PART 4 - REINSURANCE

A. Reinsurance Assumed:									
1. Premiums written.....	0								
2. Premiums earned.....	0								
3. Incurred claims.....	0								
4. Commissions.....	0								
B. Reinsurance Ceded:									
1. Premiums written.....	2,446,233	.98,608			121,667	.2,225,958			
2. Premiums earned.....	2,439,722	.98,469			121,803	.2,219,450			
3. Incurred claims.....	298,666	6,298			13,839	.278,529			
4. Commissions.....	1,208,793	.59,741			62,798	.1,086,254			

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

Family Heritage Life Insurance Company of America
SCHEDULE H - PART 5 - HEALTH CLAIMS

	1 Medical	2 Dental	3 Other	4 Total
A. Direct:				
1. Incurred claims.....	.....	.....	60,349,028	60,349,028
2. Beginning claim reserves and liabilities.....	.....	.....	20,365,351	20,365,351
3. Ending claim reserves and liabilities.....	.....	.....	22,536,238	22,536,238
4. Claims paid.....	0	0	58,178,141	58,178,141
B. Assumed Reinsurance:				
5. Incurred claims.....	.....	.....	.....	0
6. Beginning claim reserves and liabilities.....	.....	.....	.....	0
7. Ending claim reserves and liabilities.....	.....	.....	.....	0
8. Claims paid.....	0	0	0	0
C. Ceded Reinsurance:				
9. Incurred claims.....	.....	.....	298,666	298,666
10. Beginning claim reserves and liabilities.....	.....	.....	456,552	456,552
11. Ending claim reserves and liabilities.....	.....	.....	564,713	564,713
12. Claims paid.....	0	0	190,505	190,505
D. Net:				
13. Incurred claims.....	0	0	60,050,362	60,050,362
14. Beginning claim reserves and liabilities.....	0	0	19,908,799	19,908,799
15. Ending claim reserves and liabilities.....	0	0	21,971,525	21,971,525
16. Claims paid.....	0	0	57,987,636	57,987,636
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred claims and cost containment expenses.....	.....	.....	60,050,362	60,050,362
18. Beginning reserves and liabilities.....	.....	.....	19,908,799	19,908,799
19. Ending reserves and liabilities.....	.....	.....	21,971,525	21,971,525
20. Paid claims and cost containment expenses.....	0	0	57,987,636	57,987,636

SCHEDULE S - PART 1 - SECTION 1

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

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

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

60577.....	74-1365936...	01/01/2014	American Income Life Insurance Company.....	IN.....	CO/I.....	10,204,162,000	71,146,504	168,145,555	2,349,216		
0299999.	Total - General Account - Affiliates - U.S. - Other.....					10,204,162,000	71,146,504	168,145,555	2,349,216	0	0
0399999.	Total - General Account - Affiliates - U.S. - Totals.....					10,204,162,000	71,146,504	168,145,555	2,349,216	0	0
0799999.	Total - General Account - Affiliates.....					10,204,162,000	71,146,504	168,145,555	2,349,216	0	0
1199999.	Total - General Account.....					10,204,162,000	71,146,504	168,145,555	2,349,216	0	0
2399999.	Total U.S.....					10,204,162,000	71,146,504	168,145,555	2,349,216	0	0
9999999.	Total.....					10,204,162,000	71,146,504	168,145,555	2,349,216	0	0

SCHEDULE S - PART 1 - SECTION 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Premiums	8 Unearned Premiums	9 Reserve Liability Other Than for Unearned Premiums	10 Reinsurance Payable on Paid and Unpaid Losses	11 Modified Coinsurance Reserve	12 Funds Withheld Under Coinsurance
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**4
NONE**

SCHEDULE S - PART 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 Unpaid Losses
------------------------------	-------------------	------------------------	----------------------	----------------------------------	------------------	--------------------

Life and Annuity - Affiliates - U.S. - Other

65331.....	63-0124600....	10/01/2015	Liberty National Life Insurance Company.....	NE.....	.....2,349,216	.....
0299999.	Total - Life and Annuity Affiliates - U.S. - Other.....				.....2,349,216	.....0
0399999.	Total - Life and Annuity Affiliates - U.S. - Total.....				.....2,349,216	.....0
0799999.	Total - Life and Annuity Affiliates.....				.....2,349,216	.....0

Life and Annuity - Non-Affiliates - U.S. Non-Affiliates

88099.....	75-1608507....	08/01/2007	OPTIMUM RE INS CO.....	TX.....	.....10,407	.....288,000
0899999.	Total - Life and Annuity Non-Affiliates - U.S. Non-Affiliates.....				.....10,407	.....288,000
1099999.	Total - Life and Annuity Non-Affiliates.....				.....10,407	.....288,000
1199999.	Total - Life and Annuity.....				.....2,359,623	.....288,000

Accident and Health - Non-Affiliates - U.S. Non-Affiliates

61832.....	52-0676509....	10/08/2010	Chesapeake Life Insurance Company.....	OK.....	.....	.....564,713
1999999.	Total - Accident and Health Non-Affiliates - U.S. Non-Affiliates.....				.....0	.....564,713
2199999.	Total - Accident and Health Non-Affiliates.....				.....0	.....564,713
2299999.	Total - Accident and Health.....				.....0	.....564,713
2399999.	Total U.S.....				.....2,359,623	.....852,713
9999999.	Total.....				.....2,359,623	.....852,713

SCHEDULE S - PART 3 - SECTION 1

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

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount In Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9 Current Year	10 Prior Year		12 Current Year	13 Prior Year		

General Account - Authorized - Affiliates - U.S. - Other

65331.....	63-0124600....	10/01/2015	Liberty National Life Insurance Company.....	NE.....	MCO/I.....	OL.....	10,204,162,000	.....	.....	143,275,761	.....	.....	71,146,504	.....
0299999.	Total - General Account - Authorized - Affiliates - U.S. - Other.....						10,204,162,000	.....	0	143,275,761	.....	0	71,146,504	.....
0399999.	Total - General Account - Authorized - Affiliates - U.S. - Total.....						10,204,162,000	.....	0	143,275,761	.....	0	71,146,504	.....
0799999.	Total - General Account - Authorized - Affiliates.....						10,204,162,000	.....	0	143,275,761	.....	0	71,146,504	.....

General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates

88099.....	75-1608507....	03/01/2007	OPTIMUM RE INS CO.....	TX.....	CO/I.....	OL.....	31,934	6,820	6,067	1,737	.....	.....	.....	.....
88099.....	75-1608507....	08/01/2007	OPTIMUM RE INS CO.....	TX.....	YRT/I.....	OL.....	28,127,181	7,084	7,306	80,690	.....	.....	.....	.....
0899999.	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates.....						28,159,115	13,904	13,373	82,427	.....	0	0	0
1099999.	Total - General Account - Authorized - Non-Affiliates.....						28,159,115	13,904	13,373	82,427	.....	0	0	0
1199999.	Total - General Account - Authorized.....						10,232,321,115	13,904	13,373	143,358,188	.....	0	0	71,146,504
3499999.	Total - General Account - Authorized, Unauthorized and Certified.....						10,232,321,115	13,904	13,373	143,358,188	.....	0	0	71,146,504
6999999.	Total U.S.....						10,232,321,115	13,904	13,373	143,358,188	.....	0	0	71,146,504
9999999.	Total.....						10,232,321,115	13,904	13,373	143,358,188	.....	0	0	71,146,504

SCHEDULE S - PART 3 - SECTION 2

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Premiums	9 Unearned Premiums (Estimated)	10 Reserve Credit Taken Other Than for Unearned Premiums	Outstanding Surplus Relief		13 Modified Ccoinsurance Reserve	14 Funds Withheld Under Ccoinsurance
										11 Current Year	12 Prior Year		

General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates

61832.....	52-0676509....	.10/08/2010	Chesapeake Life Insurance Company.....	OK.....	CO/I.....	SD.....	.....1,858,556	.....55,814	.....1,397,438	.....	.....	.....	.....
61832.....	52-0676509....	.10/08/2010	Chesapeake Life Insurance Company.....	OK.....	CO/I.....	A.....	.....536,221	.....14,847	.....285,516	.....	.....	.....	.....
61832.....	52-0676509....	.10/08/2010	Chesapeake Life Insurance Company.....	OK.....	CO/I.....	OM.....	.....51,456	.....1,790	.....31,730	.....	.....	.....	.....
0899999.	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates.....						.....2,446,233	.....72,451	.....1,714,684	.....0	.....0	.....0	.....0
1099999.	Total - General Account - Authorized - Non-Affiliates.....						.....2,446,233	.....72,451	.....1,714,684	.....0	.....0	.....0	.....0
1199999.	Total - General Account - Authorized.....						.....2,446,233	.....72,451	.....1,714,684	.....0	.....0	.....0	.....0
3499999.	Total - General Account - Authorized, Unauthorized and Certified.....						.....2,446,233	.....72,451	.....1,714,684	.....0	.....0	.....0	.....0
6999999.	Total - U.S.....						.....2,446,233	.....72,451	.....1,714,684	.....0	.....0	.....0	.....0
9999999.	Total.....						.....2,446,233	.....72,451	.....1,714,684	.....0	.....0	.....0	.....0

Sch. S - Pt. 4
NONE

Sch. S - Pt. 5
NONE

Family Heritage Life Insurance Company of America
SCHEDULE S - PART 6

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

	1 2016	2 2015	3 2014	4 2013	5 2012
A. OPERATIONS ITEMS					
1. Premiums and annuity considerations for life and accident and health contracts.....	145,804	91,225	33,547	1,414	1,222
2. Commissions and reinsurance expense allowances.....	142,963	119,595	66,560	711	805
3. Contract claims.....	9,127	6,468	2,314	316	320
4. Surrender benefits and withdrawals for life contracts.....					
5. Dividends to policyholders.....					
6. Reserve adjustments on reinsurance ceded.....	27,106	10,499	532		
7. Increase in aggregate reserves for life and accident and health contracts.....	628	490	360	241	7
B. BALANCE SHEET ITEMS					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected.....	36	27	22	19	17
9. Aggregate reserves for life and accident and health contracts.....	1,801	1,174	684	324	83
10. Liability for deposit-type contracts.....					
11. Contract claims unpaid.....	853	728	550	327	180
12. Amounts recoverable on reinsurance.....	2,360	1,878	703		36
13. Experience rating refunds due or unpaid.....					
14. Policyholders' dividends (not included in Line 10).....					
15. Commissions and reinsurance expense allowances due.....	36,429	32,109	28,288		
16. Unauthorized reinsurance offset.....					
17. Offset for reinsurance with certified reinsurers.....					
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
18. Funds deposited by and withheld from (F).....					
19. Letters of credit (L).....					
20. Trust agreements (T).....					
21. Other (O).....					
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
22. Multiple beneficiary trust.....					
23. Funds deposited by and withheld from (F).....					
24. Letters of credit (L).....					
25. Trust agreements (T).....					
26. Other (O).....					

Family Heritage Life Insurance Company of America
SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12).....	953,148,804		953,148,804
2. Reinsurance (Line 16).....	88,063,136		88,063,136
3. Premiums and considerations (Line 15).....	37,079,029	35,627	37,114,656
4. Net credit for ceded reinsurance.....	XXX.....	2,618,125	2,618,125
5. All other admitted assets (balance).....	30,525,344		30,525,344
6. Total assets excluding Separate Accounts (Line 26).....	1,108,816,313	2,653,752	1,111,470,065
7. Separate Account assets (Line 27).....			0
8. Total assets (Line 28).....	1,108,816,313	2,653,752	1,111,470,065
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9. Contract reserves (Lines 1 and 2).....	890,154,076	1,801,039	891,955,115
10. Liability for deposit-type contracts (Line 3).....			0
11. Claim reserves (Line 4).....	23,188,199	852,713	24,040,912
12. Policyholder dividends/reserves (Lines 5 through 7).....			0
13. Premium & annuity considerations received in advance (Line 8).....	35,441		35,441
14. Other contract liabilities (Line 9).....	42,690,880		42,690,880
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount).....			0
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount).....			0
17. Reinsurance with certified reinsurers (Line 24.02 inset amount).....			0
18. Funds held under reinsurance treaties with certified reinsurers (Line 24.03 inset amount).....			0
19. All other liabilities (balance).....	48,520,026		48,520,026
20. Total liabilities excluding Separate Accounts (Line 26).....	1,004,588,622	2,653,752	1,007,242,374
21. Separate Account liabilities (Line 27).....			0
22. Total liabilities (Line 28).....	1,004,588,622	2,653,752	1,007,242,374
23. Capital & surplus (Line 38).....	104,227,691	XXX.....	104,227,691
24. Total liabilities, capital & surplus (Line 39).....	1,108,816,313	2,653,752	1,111,470,065
NET CREDIT FOR CEDED REINSURANCE			
25. Contract reserves.....	1,801,039		
26. Claim reserves.....	852,713		
27. Policyholder dividends/reserves.....	0		
28. Premium & annuity considerations received in advance.....	0		
29. Liability for deposit-type contracts.....	0		
30. Other contract liabilities.....	0		
31. Reinsurance ceded assets.....	0		
32. Other ceded reinsurance recoverables.....	0		
33. Total ceded reinsurance recoverables.....	2,653,752		
34. Premiums and considerations.....	35,627		
35. Reinsurance in unauthorized companies.....	0		
36. Funds held under reinsurance treaties with unauthorized reinsurers.....	0		
37. Reinsurance with certified reinsurers.....	0		
38. Funds held under reinsurance treaties with certified reinsurers.....	0		
39. Other ceded reinsurance payables/offsets.....	0		
40. Total ceded reinsurance payables/offsets.....	35,627		
41. Total net credit for ceded reinsurance.....	2,618,125		

SCHEDULE T - PART 2**INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN**

Allocated by States and Territories

States, Etc.	Direct Business Only					
	1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1. Alabama.....AL	32,733					32,733
2. Alaska.....AK	187					187
3. Arizona.....AZ	61,216					61,216
4. Arkansas.....AR	131,474					131,474
5. California.....CA	48,522					48,522
6. Colorado.....CO	49,527					49,527
7. Connecticut.....CT						0
8. Delaware.....DE	1,928					1,928
9. District of Columbia.....DC						0
10. Florida.....FL	53,947					53,947
11. Georgia.....GA	75,168					75,168
12. Hawaii.....HI						0
13. Idaho.....ID	1,703					1,703
14. Illinois.....IL	66,238					66,238
15. Indiana.....IN	17,147					17,147
16. Iowa.....IA	26,796					26,796
17. Kansas.....KS	37,056					37,056
18. Kentucky.....KY	85,088					85,088
19. Louisiana.....LA	11,988					11,988
20. Maine.....ME						0
21. Maryland.....MD	2,651					2,651
22. Massachusetts.....MA	1,250					1,250
23. Michigan.....MI	2,186					2,186
24. Minnesota.....MN	22,777					22,777
25. Mississippi.....MS	9,815					9,815
26. Missouri.....MO	51,332					51,332
27. Montana.....MT	10,090					10,090
28. Nebraska.....NE	18,088					18,088
29. Nevada.....NV	12,616					12,616
30. New Hampshire.....NH	11,186					11,186
31. New Jersey.....NJ	3,159					3,159
32. New Mexico.....NM	19,016					19,016
33. New York.....NY						0
34. North Carolina.....NC	114,907					114,907
35. North Dakota.....ND	4,805					4,805
36. Ohio.....OH	86,520					86,520
37. Oklahoma.....OK	52,916					52,916
38. Oregon.....OR	5,815					5,815
39. Pennsylvania.....PA	14,726					14,726
40. Rhode Island.....RI						0
41. South Carolina.....SC	37,206					37,206
42. South Dakota.....SD	10,022					10,022
43. Tennessee.....TN	116,984					116,984
44. Texas.....TX	1,373,136					1,373,136
45. Utah.....UT	357					357
46. Vermont.....VT	3,934					3,934
47. Virginia.....VA	89,621					89,621
48. Washington.....WA	103,647					103,647
49. West Virginia.....WV	60,794					60,794
50. Wisconsin.....WI	9,150					9,150
51. Wyoming.....WY	11,406					11,406
52. American Samoa.....AS						0
53. Guam.....GU						0
54. Puerto Rico.....PR						0
55. US Virgin Islands.....VI						0
56. Northern Mariana Islands.....MP						0
57. Canada.....CAN						0
58. Aggregate Other Alien.....OT						0
59. Totals.....	2,960,830	0	0	0	0	2,960,830

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
Members															
	Torchmark Corporation.....		63-0780404..		320335	NYSE.....	Torchmark Corporation.....	DE.....	UDP.....						Y.....
			20-5817522..				TMK Buildings Corp.....	TX.....	NIA.....	Torchmark Corporation.....	Ownership.....	100.000	Torchmark Corporation.....		N.....
			20-5817632..				TMK Properties LLP.....	TX.....	NIA.....	Torchmark Corporation.....	Ownership.....	.99.000	Torchmark Corporation.....		N.....
			98-0230789..				TMK RE Ltd.....	BMU.....	NIA.....	Torchmark Corporation.....	Ownership.....	100.000	Torchmark Corporation.....		N.....
			63-1235881..				Torchmark Insurance Agency, Inc.....	AL.....	NIA.....	Torchmark Corporation.....	Ownership.....	100.000	Torchmark Corporation.....		N.....
			73-1209844..				Specialized Marketing Group, Inc.....	TX.....	NIA.....	Torchmark Corporation.....	Ownership.....	100.000	Torchmark Corporation.....		N.....
			47-4172726..				Globe Life Insurance Agency, Inc.....	TX.....	NIA.....	Torchmark Corporation.....	Ownership.....	100.000	Torchmark Corporation.....		N.....
							Family Heritage Life Insurance Company of America	OH.....	RE.....	Torchmark Corporation.....	Ownership.....	100.000	Torchmark Corporation.....		N.....
0290	Torchmark Corporation.....	77968..	34-1626521..				Royalton 6001Ltd. (Joint Venture).....	OH.....	DS.....	Family Heritage Life Insurance Company of America	Ownership.....	.50.000	Torchmark Corporation.....		N.....
0290	Torchmark Corporation.....	65331..	63-0124600..				Liberty National Life Insurance Company.....	NE.....	IA.....	Torchmark Corporation.....	Ownership.....	100.000	Torchmark Corporation.....		N.....
			63-0031059..				Brown-Service Funeral Homes Company Inc.....	AL.....	NIA.....	Liberty National Life Insurance Company.....	Ownership.....	100.000	Torchmark Corporation.....		N.....
			63-0909884..				Liberty National Auto Club, Inc.....	AL.....	NIA.....	Liberty National Life Insurance Company.....	Ownership.....	100.000	Torchmark Corporation.....		N.....
0290	Torchmark Corporation.....	91472..	63-0782739..	1610611			Globe Life and Accident Insurance Company....	NE.....	IA.....	Torchmark Corporation.....	Ownership.....	100.000	Torchmark Corporation.....		Y.....
			73-1458991..				Globe Marketing Services, Inc.....	OK.....	NIA.....	Globe Life and Accident Insurance Company..	Ownership.....	100.000	Torchmark Corporation.....		N.....
			20-8022184..				Globe Marketing and Advertising Distributors, LLC	DE.....	NIA.....	Globe Life and Accident Insurance Company..	Ownership.....	100.000	Torchmark Corporation.....		N.....
0290	Torchmark Corporation.....	60577..	74-1365936..	1102198			American Income Life Insurance Company.....	IN.....	IA.....	Torchmark Corporation.....	Ownership.....	100.000	Torchmark Corporation.....		N.....
0290	Torchmark Corporation.....	10093..	22-3711800..				National Income Life Insurance Company.....	NY.....	IA.....	American Income Life Insurance Company....	Ownership.....	100.000	Torchmark Corporation.....		N.....
			75-2852508..				AILIC Receivables Corporation.....	IN.....	NIA.....	Torchmark Corporation.....	Ownership.....	100.000	Torchmark Corporation.....		N.....
			75-2872627..				American Income Marketing Services, Inc.....	TX.....	NIA.....	American Income Life Insurance Company....	Ownership.....	100.000	Torchmark Corporation.....		N.....
							Union Heritage Life Assurance Company Limited	IRL.....	IA.....	American Income Life Insurance Company....	Ownership.....	100.000	Torchmark Corporation.....		Y.....
0290	Torchmark Corporation.....	92916..	73-1128555..				United American Insurance Company.....	NE.....	IA.....	Torchmark Corporation.....	Ownership.....	100.000	Torchmark Corporation.....		N.....
0290	Torchmark Corporation.....	74101..	13-3156923..				Globe Life Insurance Company of New York (formerly First United American Life Insurance Company)	NY.....	IA.....	United American Insurance Company.....	Ownership.....	100.000	Torchmark Corporation.....		N.....

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
Affiliated Transactions												
00000.....	63-0780404.....	Torchmark Corporation.....	437,566,000	.....(55,000,000)	.....	.....	.....	88,591,806	.....	.....	.....	471,157,806
77968.....	34-1626521.....	Family Heritage Life Insurance Company of America.....	(19,096,000)	.....	.....	.....	.....	(4,512,000)	27,822,664	.....	.....	4,214,664
65331.....	63-0124600.....	Liberty National Life Insurance Company.....	(69,186,000)	.....	.....	.....	.....	(42,173,686)	(41,030,286)	.....	.....	(152,389,972)
91472.....	63-0782739.....	Globe Life and Accident Insurance Company.....	(83,979,000)	30,000,000	.....	.....	.....	(12,452,018)	(14,858,467)	.....	.....	(81,289,485)
92916.....	73-1128555.....	United American Insurance Company.....	(76,657,125)	.....	.....	.....	.....	(23,941,947)	(16,886,631)	.....	.....	(117,485,703)
60577.....	74-1365936.....	American Income Life Insurance Company.....	(138,495,014)	25,000,000	.....	.....	.....	(608,113)	(2,091,654)	.....	.....	(116,194,781)
74101.....	13-3156923.....	Globe Life Insurance Company of New York (formerly First United American Life Ins.....	(3,000,875)	.....	.....	.....	.....	(5,936,478)	.....	.....	.....	(8,937,353)
10093.....	22-3711800.....	National Income Life Insurance Company.....	(3,211,986)	.....	.....	.....	.....	(4,625,564)	.....	.....	.....	(7,837,550)
00000.....	98-0230789.....	TMK Re. , LTD.....	(38,000,000)	.....	.....	.....	.....	.....	47,044,374	.....	.....	9,044,374
00000.....	20-5817632.....	TMK Properties. LP.....	(5,880,000)	.....	.....	.....	.....	.....	5,658,000	.....	.....	(222,000)
00000.....	20-5817522.....	TMK Buildings Corp.....	(60,000)	.....	.....	.....	.....	.....	.....	.....	.....	(60,000)
9999999.....	Control Totals.....	.....	0	0	0	0	0	0	0	XXX	0	0

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

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

APRIL FILING

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

JUNE FILING

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

AUGUST FILING

11. Will regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1?

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

MARCH FILING

- | | |
|---|-----|
| 12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? | NO |
| 13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1? | NO |
| 14. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1? | NO |
| 15. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 16. Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 17. Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 18. Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 19. Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 20. Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 21. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 22. Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 23. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 24. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 25. Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 26. Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 27. Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 28. Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 29. Will the Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 30. Will the Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 31. Will the Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 32. Will the Actuarial Certification Related to the Reserves required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 33. Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1? | NO |
| 34. Will the Workers' Compensation Carve-Out Supplement be filed by March 1? | NO |
| 35. Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1? | YES |
| 36. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1? | NO |
| 37. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1? | NO |
| 38. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1? | NO |
| 39. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1? | NO |
| 40. Will the confidential Regulatory Asset Adequacy Issues Summary (RAAIS) required by Actuarial Opinion and Memorandum Regulation (Model 822, Section 7A(5)) be filed with the state of domicile by March 15? | YES |

APPENDIX

- APRIL FILING**
41. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?
 42. Will the Interest-Sensitive Life Insurance Products Report Forms be filed with the state of domicile and the NAIC by April 1?
 43. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?
 44. Will the Accident and Health Policy Experience Exhibit be filed by April 1?
 45. Will the Analysis of Annuity Operations by Lines of Business be filed with the state of domicile and the NAIC by April 1?
 46. Will the Analysis of Increase in Annuity Reserves During the Year be filed with the state of domicile and the NAIC by April 1?
 47. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?
 48. Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?
 49. Will the confidential Actuarial Memorandum required by Actuarial Guideline XXXVIII 8D be filed with the state of domicile by April 30?
 50. Will the Supplemental XXX/XXXX Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1?

AUGUST FILING

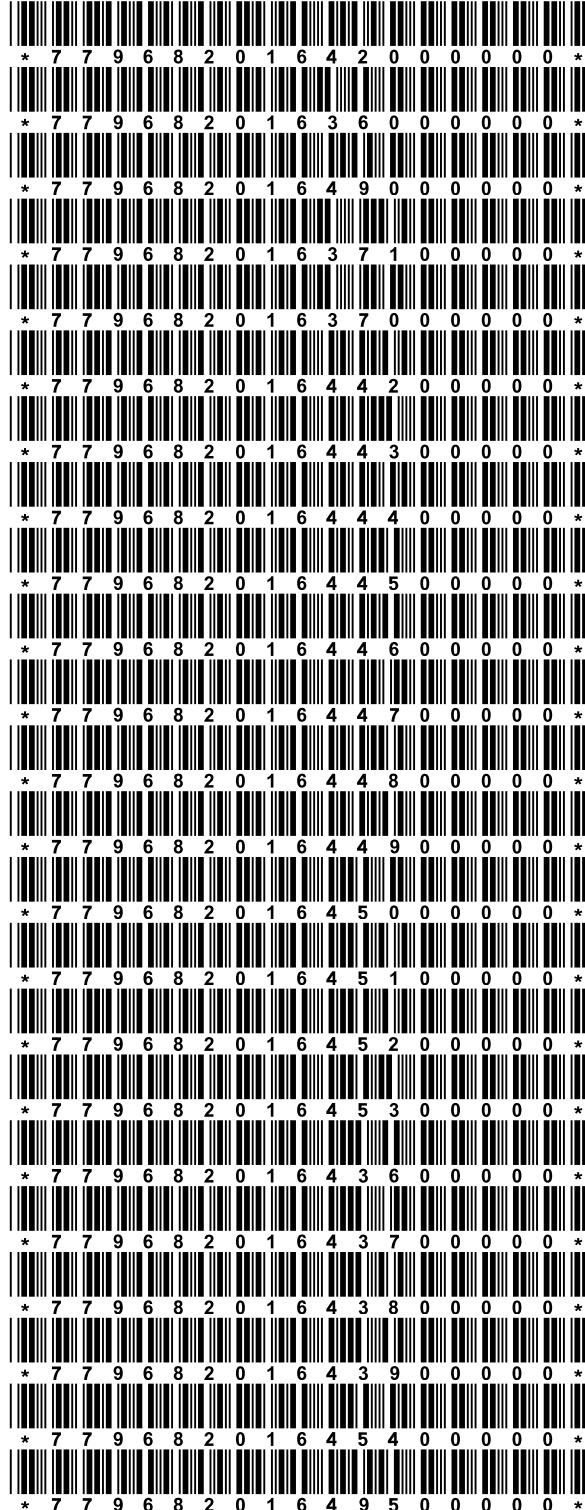
51. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

EXPLANATIONS:

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

BAR CODE:

Family Heritage Life Insurance Company of America
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

35.

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



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



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



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

40.

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



42.

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

44.

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

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

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

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

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

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

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



Annual Statement for the year 2016 of the **Family Heritage Life Insurance Company of America**
Overflow Page for Write-Ins

Additional Write-ins for Exhibit 2:

	Insurance				5	6		
	1	Accident and Health		4				
		2 Cost Containment	3 All Other					
09.304. Seminars.....			135,936			135,936		
09.305. Investigation & Testing Fees.....	2,223		7,370			9,593		
09.306. Sales Awards and Incentives.....	65,700		3,061,310			3,127,010		
09.307. Office Services.....			13,634			13,634		
09.308. Litigation Settlements.....			.600			.600		
09.309. Life Administrator.....	208,252					208,252		
09.397. Summary of remaining write-ins for Line 9.3.....	276,175	0	3,218,850	0	0	3,495,025		

Overflow Page for Write-Ins

NONE



* 7 7 9 6 8 2 0 1 6 4 6 5 0 0 0 0 *

SCHEDULE O SUPPLEMENT

For the year ended December 31, 2016

(To Be Filed March 1)

Of The.....Family Heritage Life Insurance Company of America

Address (City, State, Zip Code)....Cleveland, OH 44147-3529

NAIC Group Code.....0290

NAIC Company Code.....77968

Employer's ID Number.....34-1626521

NONE**SUPPLEMENTAL SCHEDULE O - PART 1**

Development of Incurred Losses

(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Net Amounts Paid Policyholders				
	1 2012	2 2013	3 2014	4 2015	5 2016 (a)
1. Prior.....	68	3	4		
2. 2012.....	245	135	6	7	1
3. 2013.....	XXX	343	117	13	1
4. 2014.....	XXX	XXX	421	250	36
5. 2015.....	XXX	XXX	XXX	474	290
6. 2016.....	XXX	XXX	XXX	XXX	753

Section B - Other Accident and Health

1. Prior.....	11,621	1,690	.902	708	388
2. 2012.....	32,302	9,544	.832	476	222
3. 2013.....	XXX	37,401	.9,894	.934	347
4. 2014.....	XXX	XXX	.37,826	.9,869	998
5. 2015.....	XXX	XXX	XXX	39,790	11,554
6. 2016.....	XXX	XXX	XXX	XXX	43,397

Section C - Credit Accident and Health

1. Prior.....					
2. 2012.....					
3. 2013.....	XXX				
4. 2014.....	XXX	XXX			
5. 2015.....	XXX	XXX	XXX		
6. 2016.....	XXX	XXX	XXX	XXX	

NONE

(a) See the Annual Audited Financial Reports section of the Annual Statement Instructions.

Annual Statement for the year 2016 of the **Family Heritage Life Insurance Company of America**
SCHEDULE O SUPPLEMENT
SUPPLEMENTAL SCHEDULE O - PART 2

Development of Incurred Losses
 (\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Net Amounts Paid for Cost Containment Expenses				
	1 2012	2 2013	3 2014	4 2015	5 2016
1. Prior.....					
2. 2012.....					
3. 2013.....	XXX.....				
4. 2014.....	XXX.....	XXX.....			
5. 2015.....	XXX.....	XXX.....	XXX.....		
6. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....

Section B - Other Accident and Health

1. Prior.....					
2. 2012.....					
3. 2013.....	XXX.....				
4. 2014.....	XXX.....	XXX.....			
5. 2015.....	XXX.....	XXX.....	XXX.....		
6. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....

Section C - Credit Accident and Health

1. Prior.....					
2. 2012.....					
3. 2013.....	XXX.....				
4. 2014.....	XXX.....	XXX.....			
5. 2015.....	XXX.....	XXX.....	XXX.....		
6. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....

SCHEDULE O SUPPLEMENT**SUPPLEMENTAL SCHEDULE O - PART 3**

Development of Incurred Losses

(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders and Claim Liability and Reserve Outstanding at End of Year				
	1 2012	2 2013	3 2014	4 2015	5 2016
1. 2012.....	492	498	403	XXX	XXX
2. 2013.....	XXX	705	499	496	XXX
3. 2014.....	XXX	XXX	945	728	736
4. 2015.....	XXX	XXX	XXX	1,214	826
5. 2016.....	XXX	XXX	XXX	XXX	1,490

Section B - Other Accident and Health

1. 2012.....	45,090	43,384	43,606	XXX	XXX
2. 2013.....	XXX	51,112	49,195	49,296	XXX
3. 2014.....	XXX	XXX	50,753	49,947	49,641
4. 2015.....	XXX	XXX	XXX	54,676	53,298
5. 2016.....	XXX	XXX	XXX	XXX	60,874

Section C - Credit Accident and Health

1. 2012.....				XXX	XXX
2. 2013.....	XXX				XXX
3. 2014.....	XXX	XXX			
4. 2015.....	XXX	XXX	XXX		
5. 2016.....	XXX	XXX	XXX	XXX	

NONE

SCHEDULE O SUPPLEMENT**SUPPLEMENTAL SCHEDULE O - PART 4**

Development of Incurred Losses

(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at End of Year				
	1 2012	2 2013	3 2014	4 2015	5 2016
1. 2012.....					
2. 2013.....	XXX.....				
3. 2014.....	XXX.....	XXX.....			
4. 2015.....	XXX.....	XXX.....	XXX.....		
5. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	

Section B - Other Accident and Health

1. 2012.....					
2. 2013.....	XXX.....				
3. 2014.....	XXX.....	XXX.....			
4. 2015.....	XXX.....	XXX.....	XXX.....		
5. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	

Section C - Credit Accident and Health

1. 2012.....					
2. 2013.....	XXX.....				
3. 2014.....	XXX.....	XXX.....			
4. 2015.....	XXX.....	XXX.....	XXX.....		
5. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	

SUPPLEMENTAL SCHEDULE O - PART 5

(\$000 OMITTED)

Reserve and Liability Methodology - Exhibits 6 and 8

Line of Business	1 Methodology	2 Amount
1. Industrial life.....		
2. Ordinary life.....	Development.....	3,602
3. Individual annuity.....		
4. Supplementary contracts.....		
5. Credit life.....		
6. Group life.....		
7. Group annuities.....		
8. Group accident and health.....	Development.....	847
9. Credit accident and health.....		
10. Other accident and health.....	Development.....	21,125
11. Total.....		25,574

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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NONE

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