

ANNUAL STATEMENT
For the Year Ended December 31, 2016
of the Condition and Affairs of the
U.S. FINANCIAL LIFE INSURANCE COMPANY

NAIC Group Code 0968 0968 NAIC Company Code 84530 Employer's ID Number 38-2046096
(Current) (Prior)

Organized under the Laws of Ohio State of Domicile or Port of Entry Ohio Country of Domicile United States of America

Incorporated/Organized: September 30, 1974 Commenced Business: September 30, 1974
Statutory Home Office: 4000 Smith Road, Suite 300, Cincinnati, Ohio 45209
Main Administrative Office: 525 Washington Boulevard Jersey City, New Jersey 07310 35th Floor - Telephone Number: (201) 743-5073
Mail Address: 525 Washington Boulevard Jersey City, New Jersey 07310 - Controllers 35th Floor, Telephone Number: (201) 743-5073
Primary Location of Books and Records: 525 Washington Boulevard Jersey City, New Jersey 07310 - Controllers 35th FL Telephone Number: (201) 743-5073
Internet Website Address: www.usfl.com
Statutory Statement Contact: Nicholas Gismondi, Vice President, (201) 743-5073
E-Mail Address: controllers@axa.us.com Fax Number: (201) 743-5006

OFFICERS

ANDERS BJÖRN MALMSTRÖM
Chairman of the Board

RONALD PAUL HERRMANN
President and Chief Executive Officer

JOSHUA ETHAN BRAVERMAN
Executive Vice President, Chief Financial Officer and Treasurer

ANDREA MARIE NITZAN
Executive Vice President,
Chief Accounting Officer and Controller

DOMINIQUE BAEDE
Senior Vice President and Actuary

WILLIAM CASILL
Senior Vice President and Actuary

KEITH ELLIOTT FLOMAN
Senior Vice President and Appointed Actuary

ANTHONY FRANK RECINE #
Senior Vice President and Chief Auditor

DENISE TEDESCHI
Assistant Vice President and Secretary

DIRECTORS

JOSHUA ETHAN BRAVERMAN
TODD PAUL SOLASH

RONALD PAUL HERRMANN
BRIAN ROSS WINIKOFF #

ANDERS BJÖRN MALMSTRÖM

State of New Jersey.....

} ss

County of Hudson.....

The officers of **U.S. FINANCIAL LIFE INSURANCE COMPANY** being duly sworn, each depose and say that they are the described officers of the 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.


RONALD PAUL HERRMANN
President and Chief Executive Officer


ANDREA MARIE NITZAN
Executive Vice President,
Chief Accounting Officer and Controller


KEITH ELLIOTT FLOMAN
Senior Vice President and Appointed Actuary


DENISE TEDESCHI
Assistant Vice President and Secretary

Subscribed and sworn to before me this
24th day of February, 2017

PAOLA T MIRABAL
ID# 2441705
NOTARY PUBLIC
STATE OF NEW JERSEY
MY COMMISSION EXPIRES 12/24/18

Yes (x) No ()

1. Is this a re-filing?
2. If yes, enter the amendment number
3. If yes, enter the file number
4. Number of pages attached



DIRECT BUSINESS IN Other Alien # 1 DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		40,034	0	0	0	40,034
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		40,034	0	0	0	40,034
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		0	0	0	0	0
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		0	0	0	0	0

DETAILS OF WRITE-INS

1301.....		0	0	0	0	0	0
1302.....		0	0	0	0	0	0
1303.....		0	0	0	0	0	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	0	0	0	0	0	0	0	0
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	0	0	0	(a) 0	0	0	0	0	0	0
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year.....	0	0	0	(a) 0	0	0	0	0	0	0

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

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

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

NONE

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).....	0	0	0	0	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0
Other Individual Policies:									
25.1 Non-cancelable (b).....	0	0	0	0	0	0	0	0	0
25.2 Guaranteed renewable (b).....	0	0	0	0	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	0	0	0	0	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	0	0	0	0	0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF ALASKA DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		143,418	0	0	0	143,418
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		143,418	0	0	0	143,418
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		0	0	0	0	0
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		23,525	0	0	0	23,525
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		23,525	0	0	0	23,525

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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	0	0	0	0	0	0	0	0
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	101	32,393,510	0	(a) 0	0	0	0	0	101	32,393,510
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(8)	(2,474,982)	0	0	0	0	0	0	(8)	(2,474,982)
23. In force December 31 of current year.....	93	29,918,528	0	(a) 0	0	0	0	0	93	29,918,528

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF ALABAMA DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		2,948,283	0	0	0	2,948,283
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		2,948,283	0	0	0	2,948,283
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		3,898,925	0	0	0	3,898,925
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		438,610	0	0	0	438,610
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		4,337,535	0	0	0	4,337,535

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	4	300,000	0	0	0	0	0	0	4	300,000
17. Incurred during current year.....	50	4,273,925	0	0	0	0	0	0	50	4,273,925
Settled during current year:										
18.1 By payment in full.....	51	3,898,925	0	0	0	0	0	0	51	3,898,925
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	51	3,898,925	0	0	0	0	0	0	51	3,898,925
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	51	3,898,925	0	0	0	0	0	0	51	3,898,925
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	3	675,000	0	0	0	0	0	0	3	675,000
POLICY EXHIBIT										
20. In force December 31, prior year.....	2,244	654,752,943	0	(a) 0	0	0	0	0	2,244	654,752,943
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(178)	(54,179,145)	0	0	0	0	0	0	(178)	(54,179,145)
23. In force December 31 of current year.....	2,066	600,573,798	0	(a) 0	0	0	0	0	2,066	600,573,798

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF ARKANSAS DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		1,233,997	0	0	0	1,233,997
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		1,233,997	0	0	0	1,233,997
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		1,120,000	0	0	0	1,120,000
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		17,517	0	0	0	17,517
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		1,137,517	0	0	0	1,137,517

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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	0	0	0	0	0	0	0	0
17. Incurred during current year.....	15	1,470,000	0	0	0	0	0	0	15	1,470,000
Settled during current year:										
18.1 By payment in full.....	14	1,120,000	0	0	0	0	0	0	14	1,120,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	14	1,120,000	0	0	0	0	0	0	14	1,120,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	14	1,120,000	0	0	0	0	0	0	14	1,120,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	350,000	0	0	0	0	0	0	1	350,000
POLICY EXHIBIT										
20. In force December 31, prior year.....	.831	248,137,297	0	(a) 0	0	0	0	0	.831	248,137,297
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(57)	(13,935,245)	0	0	0	0	0	0	(57)	(13,935,245)
23. In force December 31 of current year.....	.774	234,202,052	0	(a) 0	0	0	0	0	.774	234,202,052

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN AMERICAN SAMOA DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

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

DETAILS OF WRITE-INS

1301.....	.....0	.....0	.....0	.....0	.....0	.....0
1302.....	.....0	.....0	.....0	.....0	.....0	.....0
1303.....	.....0	.....0	.....0	.....0	.....0	.....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	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
17. Incurred during current year.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
Settled during current year:										
18.1 By payment in full.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.4 Reduction by compromise.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.5 Amount rejected.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.6 Total settlements.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
POLICY EXHIBIT										
20. In force December 31, prior year.....	.....0	.....0	.....0	(a).....0	.....0	.....0	.....0	.....0	.....0	.....0
21. Issued during year.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
22. Other changes to in force (Net).....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
23. In force December 31 of current year.....	.....0	.....0	.....0	(a).....0	.....0	.....0	.....0	.....0	.....0	.....0

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		.....0	.....0	.....0	.....0	.....0
24.1 Federal Employee Health Benefits Plan premium (b).....		.....0	.....0	.....0	.....0	.....0
24.2 Credit (group and individual).....		.....0	.....0	.....0	.....0	.....0
24.3 Collectively renewable policies (b).....		.....0	.....0	.....0	.....0	.....0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		.....0	.....0	.....0	.....0	.....0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		.....0	.....0	.....0	.....0	.....0
25.2 Guaranteed renewable (b).....		.....0	.....0	.....0	.....0	.....0
25.3 Non-renewable for stated reasons only (b).....		.....0	.....0	.....0	.....0	.....0
25.4 Other accident only.....		.....0	.....0	.....0	.....0	.....0
25.5 All other (b).....		.....0	.....0	.....0	.....0	.....0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		.....0	.....0	.....0	.....0	.....0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		.....0	.....0	.....0	.....0	.....0

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



DIRECT BUSINESS IN THE STATE OF ARIZONA DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		1,699,218	0	0	0	1,699,218
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		1,699,218	0	0	0	1,699,218
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		2,780,219	0	0	0	2,780,219
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		12,012	0	0	0	12,012
12. Surrender values and withdrawals for life contracts.....		14,591	0	0	0	14,591
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		2,806,822	0	0	0	2,806,822

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	1	150,000	0	0	0	0	0	0	1	150,000
17. Incurred during current year.....	23	2,630,219	0	0	0	0	0	0	23	2,630,219
Settled during current year:										
18.1 By payment in full.....	24	2,780,219	0	0	0	0	0	0	24	2,780,219
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	24	2,780,219	0	0	0	0	0	0	24	2,780,219
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	24	2,780,219	0	0	0	0	0	0	24	2,780,219
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.....	.865	292,539,987	0	(a) 0	0	0	0	0	.865	292,539,987
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(87)	(34,348,109)	0	0	0	0	0	0	(87)	(34,348,109)
23. In force December 31 of current year.....	.778	258,191,878	0	(a) 0	0	0	0	0	.778	258,191,878

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF CALIFORNIA DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		10,362,385	0	0	0	10,362,385
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		10,362,385	0	0	0	10,362,385
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		23,508,624	0	0	0	23,508,624
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		749,242	0	0	0	749,242
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		3,115	0	0	0	3,115
15. Totals.....		24,260,981	0	0	0	24,260,981

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	9	5,003,160	0	0	0	0	0	0	9	5,003,160
17. Incurred during current year.....	105	21,385,551	0	0	0	0	0	0	105	21,385,551
Settled during current year:										
18.1 By payment in full.....	104	23,508,624	0	0	0	0	0	0	104	23,508,624
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	104	23,508,624	0	0	0	0	0	0	104	23,508,624
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	104	23,508,624	0	0	0	0	0	0	104	23,508,624
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	10	2,880,087	0	0	0	0	0	0	10	2,880,087
POLICY EXHIBIT										
20. In force December 31, prior year.....	5,931	2,390,968,891	0	(a) 0	0	0	0	0	5,931	2,390,968,891
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(494)	(204,851,942)	0	0	0	0	0	0	(494)	(204,851,942)
23. In force December 31 of current year.....	5,437	2,186,116,949	0	(a) 0	0	0	0	0	5,437	2,186,116,949

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF CANADA DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		21,996	0	0	0	21,996
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		21,996	0	0	0	21,996
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		0	0	0	0	0
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		0	0	0	0	0

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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	0	0	0	0	0	0	0	0
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	0	0	0	(a) 0	0	0	0	0	0	0
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year.....	0	0	0	(a) 0	0	0	0	0	0	0

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

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

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

NONE

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF COLORADO DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		2,333,348	0	0	0	2,333,348
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		2,333,348	0	0	0	2,333,348
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		2,190,000	0	0	0	2,190,000
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		362,303	0	0	0	362,303
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		10,463	0	0	0	10,463
15. Totals.....		2,562,766	0	0	0	2,562,766

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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	0	0	0	0	0	0	0	0
17. Incurred during current year.....	26	2,451,936	0	0	0	0	0	0	26	2,451,936
Settled during current year:										
18.1 By payment in full.....	22	2,190,000	0	0	0	0	0	0	22	2,190,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	22	2,190,000	0	0	0	0	0	0	22	2,190,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	22	2,190,000	0	0	0	0	0	0	22	2,190,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	4	261,936	0	0	0	0	0	0	4	261,936
POLICY EXHIBIT										
20. In force December 31, prior year.....	1,834	577,751,510	0	(a) 0	0	0	0	0	1,834	577,751,510
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(154)	(55,329,106)	0	0	0	0	0	0	(154)	(55,329,106)
23. In force December 31 of current year.....	1,680	522,422,404	0	(a) 0	0	0	0	0	1,680	522,422,404

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF CONNECTICUT DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		2,452,046	0	0	0	2,452,046
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		2,452,046	0	0	0	2,452,046
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		5,160,079	0	0	0	5,160,079
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		242,656	0	0	0	242,656
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		5,402,735	0	0	0	5,402,735

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	1	185,079	0	0	0	0	0	0	1	185,079
17. Incurred during current year.....	15	5,800,000	0	0	0	0	0	0	15	5,800,000
Settled during current year:										
18.1 By payment in full.....	11	5,160,079	0	0	0	0	0	0	11	5,160,079
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	11	5,160,079	0	0	0	0	0	0	11	5,160,079
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	11	5,160,079	0	0	0	0	0	0	11	5,160,079
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	5	825,000	0	0	0	0	0	0	5	825,000
POLICY EXHIBIT										
20. In force December 31, prior year.....	1,890	703,067,874	0	(a) 0	0	0	0	0	1,890	703,067,874
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(149)	(61,245,674)	0	0	0	0	0	0	(149)	(61,245,674)
23. In force December 31 of current year.....	1,741	641,822,200	0	(a) 0	0	0	0	0	1,741	641,822,200

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



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

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		90,822	0	0	0	90,822
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		90,822	0	0	0	90,822
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		0	0	0	0	0
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		0	0	0	0	0

DETAILS OF WRITE-INS

1301.....		0	0	0	0	0	0
1302.....		0	0	0	0	0	0
1303.....		0	0	0	0	0	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	0	0	0	0	0	0	0	0
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	19	23,164,044	0	(a) 0	0	0	0	0	19	23,164,044
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(2)	(1,338,960)	0	0	0	0	0	0	(2)	(1,338,960)
23. In force December 31 of current year.....	17	21,825,084	0	(a) 0	0	0	0	0	17	21,825,084

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF DELAWARE DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		1,176,919	0	0	0	1,176,919
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		1,176,919	0	0	0	1,176,919
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		250,000	0	0	0	250,000
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		6,075	0	0	0	6,075
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		256,075	0	0	0	256,075

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	1	250,000	0	0	0	0	0	0	1	250,000
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	1	250,000	0	0	0	0	0	0	1	250,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	1	250,000	0	0	0	0	0	0	1	250,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	1	250,000	0	0	0	0	0	0	1	250,000
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.....	225	71,585,492	0	(a) 0	0	0	0	0	225	71,585,492
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(13)	(6,338,253)	0	0	0	0	0	0	(13)	(6,338,253)
23. In force December 31 of current year.....	212	65,247,239	0	(a) 0	0	0	0	0	212	65,247,239

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		9,111,233	0	0	0	9,111,233
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		9,111,233	0	0	0	9,111,233
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		18,061,103	0	0	0	18,061,103
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		19,912	0	0	0	19,912
12. Surrender values and withdrawals for life contracts.....		861,028	0	0	0	861,028
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		18,942,043	0	0	0	18,942,043

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	8	1,991,905	0	0	0	0	0	0	8	1,991,905
17. Incurred during current year.....	107	17,149,198	0	0	0	0	0	0	107	17,149,198
Settled during current year:										
18.1 By payment in full.....	108	18,061,103	0	0	0	0	0	0	108	18,061,103
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	108	18,061,103	0	0	0	0	0	0	108	18,061,103
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	108	18,061,103	0	0	0	0	0	0	108	18,061,103
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	7	1,080,000	0	0	0	0	0	0	7	1,080,000
POLICY EXHIBIT										
20. In force December 31, prior year.....	4,861	1,572,050,915	0	(a) 0	0	0	0	0	4,861	1,572,050,915
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(456)	(148,214,854)	0	0	0	0	0	0	(456)	(148,214,854)
23. In force December 31 of current year.....	4,405	1,423,836,061	0	(a) 0	0	0	0	0	4,405	1,423,836,061

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF GEORGIA DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		4,708,280	0	0	0	4,708,280
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		4,708,280	0	0	0	4,708,280
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		7,110,249	0	0	0	7,110,249
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		125,568	0	0	0	125,568
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		7,235,817	0	0	0	7,235,817

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	4	325,558	0	0	0	0	0	0	4	325,558
17. Incurred during current year.....	91	8,784,691	0	0	0	0	0	0	91	8,784,691
Settled during current year:										
18.1 By payment in full.....	85	7,110,249	0	0	0	0	0	0	85	7,110,249
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	85	7,110,249	0	0	0	0	0	0	85	7,110,249
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	85	7,110,249	0	0	0	0	0	0	85	7,110,249
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	10	2,000,000	0	0	0	0	0	0	10	2,000,000
POLICY EXHIBIT										
20. In force December 31, prior year.....	3,202	1,049,588,233	0	(a) 0	0	0	0	0	3,202	1,049,588,233
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(278)	(89,379,351)	0	0	0	0	0	0	(278)	(89,379,351)
23. In force December 31 of current year.....	2,924	960,208,882	0	(a) 0	0	0	0	0	2,924	960,208,882

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN GRAND TOTAL DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		143,359,679	0	0	0	143,359,679
2. Annuity considerations.....		24,648	0	0	0	24,648
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		143,384,327	0	0	0	143,384,327
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		220,839,880	0	0	0	220,839,880
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		572,268	0	0	0	572,268
12. Surrender values and withdrawals for life contracts.....		11,773,756	0	0	0	11,773,756
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		57,062	0	0	0	57,062
15. Totals.....		233,242,966	0	0	0	233,242,966

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	153	22,348,427	0	0	0	0	0	0	153	22,348,427
17. Incurred during current year.....	1,716	223,680,314	0	0	0	0	0	0	1,716	223,680,314
Settled during current year:										
18.1 By payment in full.....	1,681	220,839,880	0	0	0	0	0	0	1,681	220,839,880
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	1,681	220,839,880	0	0	0	0	0	0	1,681	220,839,880
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	1,681	220,839,880	0	0	0	0	0	0	1,681	220,839,880
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	188	25,188,861	0	0	0	0	0	0	188	25,188,861
POLICY EXHIBIT										
20. In force December 31, prior year.....	96,608	30,936,597,727	0	(a) 0	0	0	0	0	96,608	30,936,597,727
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(7,885)	(2,706,834,797)	0	0	0	0	0	0	(7,885)	(2,706,834,797)
23. In force December 31 of current year.....	88,723	28,229,762,930	0	(a) 0	0	0	0	0	88,723	28,229,762,930

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



* 8 4 5 3 0 2 0 1 6 4 3 0 5 3 1 0 0 *
 DIRECT BUSINESS IN GUAM DURING THE YEAR
 NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		2,487	0	0	0	2,487
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		2,487	0	0	0	2,487
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		0	0	0	0	0
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		0	0	0	0	0

DETAILS OF WRITE-INS

1301.....		0	0	0	0	0	0
1302.....		0	0	0	0	0	0
1303.....		0	0	0	0	0	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	0	0	0	0	0	0	0	0
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	0	0	0	(a) 0	0	0	0	0	0	0
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year.....	0	0	0	(a) 0	0	0	0	0	0	0

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF HAWAII DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		340,683	0	0	0	340,683
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		340,683	0	0	0	340,683
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		250,000	0	0	0	250,000
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		23,577	0	0	0	23,577
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		273,577	0	0	0	273,577

DETAILS OF WRITE-INS

1301.....		0	0	0	0	0	0
1302.....		0	0	0	0	0	0
1303.....		0	0	0	0	0	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	0	0	0	0	0	0	0	0
17. Incurred during current year.....	6	250,000	0	0	0	0	0	0	6	250,000
Settled during current year:										
18.1 By payment in full.....	6	250,000	0	0	0	0	0	0	6	250,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	6	250,000	0	0	0	0	0	0	6	250,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	6	250,000	0	0	0	0	0	0	6	250,000
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.....	242	57,486,704	0	(a) 0	0	0	0	0	242	57,486,704
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(13)	(3,275,992)	0	0	0	0	0	0	(13)	(3,275,992)
23. In force December 31 of current year.....	229	54,210,712	0	(a) 0	0	0	0	0	229	54,210,712

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF IOWA DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		1,571,132	0	0	0	1,571,132
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		1,571,132	0	0	0	1,571,132
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		2,142,000	0	0	0	2,142,000
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		105,055	0	0	0	105,055
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		657	0	0	0	657
15. Totals.....		2,247,712	0	0	0	2,247,712

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	1	100,000	0	0	0	0	0	0	1	100,000
17. Incurred during current year.....	15	3,229,959	0	0	0	0	0	0	15	3,229,959
Settled during current year:										
18.1 By payment in full.....	11	2,142,000	0	0	0	0	0	0	11	2,142,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	11	2,142,000	0	0	0	0	0	0	11	2,142,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	11	2,142,000	0	0	0	0	0	0	11	2,142,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	5	1,187,959	0	0	0	0	0	0	5	1,187,959
POLICY EXHIBIT										
20. In force December 31, prior year.....	1,537	400,524,439	0	(a) 0	0	0	0	0	1,537	400,524,439
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(112)	(36,288,502)	0	0	0	0	0	0	(112)	(36,288,502)
23. In force December 31 of current year.....	1,425	364,235,937	0	(a) 0	0	0	0	0	1,425	364,235,937

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF IDAHO DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		431,234	0	0	0	431,234
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		431,234	0	0	0	431,234
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		825,000	0	0	0	825,000
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		825,000	0	0	0	825,000

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	1	75,000	0	0	0	0	0	0	1	75,000
17. Incurred during current year.....	6	750,000	0	0	0	0	0	0	6	750,000
Settled during current year:										
18.1 By payment in full.....	7	825,000	0	0	0	0	0	0	7	825,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	7	825,000	0	0	0	0	0	0	7	825,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	7	825,000	0	0	0	0	0	0	7	825,000
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.....	265	93,388,244	0	(a) 0	0	0	0	0	265	93,388,244
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(21)	(9,488,781)	0	0	0	0	0	0	(21)	(9,488,781)
23. In force December 31 of current year.....	244	83,899,463	0	(a) 0	0	0	0	0	244	83,899,463

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		6,176,019	0	0	0	6,176,019
2. Annuity considerations.....		6,500	0	0	0	6,500
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		6,182,519	0	0	0	6,182,519
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		6,729,400	0	0	0	6,729,400
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		402,898	0	0	0	402,898
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		1,590	0	0	0	1,590
15. Totals.....		7,133,888	0	0	0	7,133,888

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	3	375,000	0	0	0	0	0	0	3	375,000
17. Incurred during current year.....	43	6,879,400	0	0	0	0	0	0	43	6,879,400
Settled during current year:										
18.1 By payment in full.....	43	6,729,400	0	0	0	0	0	0	43	6,729,400
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	43	6,729,400	0	0	0	0	0	0	43	6,729,400
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	43	6,729,400	0	0	0	0	0	0	43	6,729,400
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	3	525,000	0	0	0	0	0	0	3	525,000
POLICY EXHIBIT										
20. In force December 31, prior year.....	4,245	1,600,116,320	0	(a) 0	0	0	0	0	4,245	1,600,116,320
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(339)	(144,973,306)	0	0	0	0	0	0	(339)	(144,973,306)
23. In force December 31 of current year.....	3,906	1,455,143,014	0	(a) 0	0	0	0	0	3,906	1,455,143,014

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF INDIANA DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		2,584,377	0	0	0	2,584,377
2. Annuity considerations.....		2,175	0	0	0	2,175
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		2,586,552	0	0	0	2,586,552
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		11,266,175	0	0	0	11,266,175
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		11,321	0	0	0	11,321
12. Surrender values and withdrawals for life contracts.....		160,942	0	0	0	160,942
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		11,438,438	0	0	0	11,438,438

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	3	3,122,034	0	0	0	0	0	0	3	3,122,034
17. Incurred during current year.....	54	8,504,141	0	0	0	0	0	0	54	8,504,141
Settled during current year:										
18.1 By payment in full.....	54	11,266,175	0	0	0	0	0	0	54	11,266,175
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	54	11,266,175	0	0	0	0	0	0	54	11,266,175
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	54	11,266,175	0	0	0	0	0	0	54	11,266,175
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	3	360,000	0	0	0	0	0	0	3	360,000
POLICY EXHIBIT										
20. In force December 31, prior year.....	2,184	613,760,711	0	(a) 0	0	0	0	0	2,184	613,760,711
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(182)	(64,338,905)	0	0	0	0	0	0	(182)	(64,338,905)
23. In force December 31 of current year.....	2,002	549,421,806	0	(a) 0	0	0	0	0	2,002	549,421,806

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF KANSAS DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		1,866,346	0	0	0	1,866,346
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		1,866,346	0	0	0	1,866,346
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		4,423,000	0	0	0	4,423,000
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		94,991	0	0	0	94,991
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		4,517,991	0	0	0	4,517,991

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	1	200,000	0	0	0	0	0	0	1	200,000
17. Incurred during current year.....	35	5,015,000	0	0	0	0	0	0	35	5,015,000
Settled during current year:										
18.1 By payment in full.....	34	4,423,000	0	0	0	0	0	0	34	4,423,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	34	4,423,000	0	0	0	0	0	0	34	4,423,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	34	4,423,000	0	0	0	0	0	0	34	4,423,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	792,000	0	0	0	0	0	0	2	792,000
POLICY EXHIBIT										
20. In force December 31, prior year.....	1,349	401,175,611	0	(a) 0	0	0	0	0	1,349	401,175,611
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(118)	(33,706,348)	0	0	0	0	0	0	(118)	(33,706,348)
23. In force December 31 of current year.....	1,231	367,469,263	0	(a) 0	0	0	0	0	1,231	367,469,263

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF KENTUCKY DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		2,410,728	0	0	0	2,410,728
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		2,410,728	0	0	0	2,410,728
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		2,486,910	0	0	0	2,486,910
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		7,057	0	0	0	7,057
12. Surrender values and withdrawals for life contracts.....		333,778	0	0	0	333,778
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		2,827,745	0	0	0	2,827,745

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	1	250,000	0	0	0	0	0	0	1	250,000
17. Incurred during current year.....	38	2,311,910	0	0	0	0	0	0	38	2,311,910
Settled during current year:										
18.1 By payment in full.....	37	2,486,910	0	0	0	0	0	0	37	2,486,910
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	37	2,486,910	0	0	0	0	0	0	37	2,486,910
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	37	2,486,910	0	0	0	0	0	0	37	2,486,910
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	75,000	0	0	0	0	0	0	2	75,000
POLICY EXHIBIT										
20. In force December 31, prior year.....	2,035	565,478,683	0	(a) 0	0	0	0	0	2,035	565,478,683
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(169)	(43,108,525)	0	0	0	0	0	0	(169)	(43,108,525)
23. In force December 31 of current year.....	1,866	522,370,158	0	(a) 0	0	0	0	0	1,866	522,370,158

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF LOUISIANA DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		1,461,114	0	0	0	1,461,114
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		1,461,114	0	0	0	1,461,114
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		2,594,000	0	0	0	2,594,000
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		22,591	0	0	0	22,591
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		2,616,591	0	0	0	2,616,591

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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	0	0	0	0	0	0	0	0
17. Incurred during current year.....	18	2,669,000	0	0	0	0	0	0	18	2,669,000
Settled during current year:										
18.1 By payment in full.....	16	2,594,000	0	0	0	0	0	0	16	2,594,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	16	2,594,000	0	0	0	0	0	0	16	2,594,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	16	2,594,000	0	0	0	0	0	0	16	2,594,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	75,000	0	0	0	0	0	0	2	75,000
POLICY EXHIBIT										
20. In force December 31, prior year.....	.966	299,624,587	0	(a) 0	0	0	0	0	.966	299,624,587
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(72)	(18,294,691)	0	0	0	0	0	0	(72)	(18,294,691)
23. In force December 31 of current year.....	.894	281,329,896	0	(a) 0	0	0	0	0	.894	281,329,896

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF MASSACHUSETTS DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		3,797,663	0	0	0	3,797,663
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		3,797,663	0	0	0	3,797,663
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		3,046,736	0	0	0	3,046,736
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		188,724	0	0	0	188,724
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		3,957	0	0	0	3,957
15. Totals.....		3,239,417	0	0	0	3,239,417

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	6	1,075,000	0	0	0	0	0	0	6	1,075,000
17. Incurred during current year.....	27	2,021,736	0	0	0	0	0	0	27	2,021,736
Settled during current year:										
18.1 By payment in full.....	32	3,046,736	0	0	0	0	0	0	32	3,046,736
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	32	3,046,736	0	0	0	0	0	0	32	3,046,736
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	32	3,046,736	0	0	0	0	0	0	32	3,046,736
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	50,000	0	0	0	0	0	0	1	50,000
POLICY EXHIBIT										
20. In force December 31, prior year.....	2,848	968,181,837	0	(a) 0	0	0	0	0	2,848	968,181,837
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(203)	(63,971,326)	0	0	0	0	0	0	(203)	(63,971,326)
23. In force December 31 of current year.....	2,645	904,210,511	0	(a) 0	0	0	0	0	2,645	904,210,511

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF MARYLAND DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		2,440,912	0	0	0	2,440,912
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		2,440,912	0	0	0	2,440,912
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		2,310,671	0	0	0	2,310,671
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		150,924	0	0	0	150,924
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		1,649	0	0	0	1,649
15. Totals.....		2,463,244	0	0	0	2,463,244

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	1	25,000	0	0	0	0	0	0	1	25,000
17. Incurred during current year.....	29	2,311,682	0	0	0	0	0	0	29	2,311,682
Settled during current year:										
18.1 By payment in full.....	28	2,310,671	0	0	0	0	0	0	28	2,310,671
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	28	2,310,671	0	0	0	0	0	0	28	2,310,671
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	28	2,310,671	0	0	0	0	0	0	28	2,310,671
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	26,011	0	0	0	0	0	0	2	26,011
POLICY EXHIBIT										
20. In force December 31, prior year.....	1,687	585,654,017	0	(a) 0	0	0	0	0	1,687	585,654,017
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(145)	(63,174,470)	0	0	0	0	0	0	(145)	(63,174,470)
23. In force December 31 of current year.....	1,542	522,479,547	0	(a) 0	0	0	0	0	1,542	522,479,547

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF MAINE DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		594,482	0	0	0	594,482
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		594,482	0	0	0	594,482
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		400,000	0	0	0	400,000
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		6,006	0	0	0	6,006
12. Surrender values and withdrawals for life contracts.....		19,432	0	0	0	19,432
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		425,438	0	0	0	425,438

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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	0	0	0	0	0	0	0	0
17. Incurred during current year.....	5	400,000	0	0	0	0	0	0	5	400,000
Settled during current year:										
18.1 By payment in full.....	5	400,000	0	0	0	0	0	0	5	400,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	5	400,000	0	0	0	0	0	0	5	400,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	5	400,000	0	0	0	0	0	0	5	400,000
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.....	541	167,273,818	0	(a) 0	0	0	0	0	541	167,273,818
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(36)	(8,267,031)	0	0	0	0	0	0	(36)	(8,267,031)
23. In force December 31 of current year.....	505	159,006,787	0	(a) 0	0	0	0	0	505	159,006,787

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		7,689,926	0	0	0	7,689,926
2. Annuity considerations.....		6,695	0	0	0	6,695
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		7,696,621	0	0	0	7,696,621
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		10,008,484	0	0	0	10,008,484
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		217,391	0	0	0	217,391
12. Surrender values and withdrawals for life contracts.....		1,070,756	0	0	0	1,070,756
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		18,453	0	0	0	18,453
15. Totals.....		11,315,083	0	0	0	11,315,083

DETAILS OF WRITE-INS

1301.....		0	0	0	0	0	0
1302.....		0	0	0	0	0	0
1303.....		0	0	0	0	0	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.....	12	970,800	0	0	0	0	0	0	12	970,800
17. Incurred during current year.....	66	9,251,484	0	0	0	0	0	0	66	9,251,484
Settled during current year:										
18.1 By payment in full.....	70	10,008,484	0	0	0	0	0	0	70	10,008,484
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	70	10,008,484	0	0	0	0	0	0	70	10,008,484
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	70	10,008,484	0	0	0	0	0	0	70	10,008,484
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	8	213,800	0	0	0	0	0	0	8	213,800
POLICY EXHIBIT										
20. In force December 31, prior year.....	6,064	1,690,866,047	0	(a) 0	0	0	0	0	6,064	1,690,866,047
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(461)	(134,323,554)	0	0	0	0	0	0	(461)	(134,323,554)
23. In force December 31 of current year.....	5,603	1,556,542,493	0	(a) 0	0	0	0	0	5,603	1,556,542,493

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF MINNESOTA DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		5,339,847	0	0	0	5,339,847
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		5,339,847	0	0	0	5,339,847
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		1,420,000	0	0	0	1,420,000
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		11,228	0	0	0	11,228
12. Surrender values and withdrawals for life contracts.....		282,775	0	0	0	282,775
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		1,714,003	0	0	0	1,714,003

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	2	350,000	0	0	0	0	0	0	2	350,000
17. Incurred during current year.....	13	1,170,000	0	0	0	0	0	0	13	1,170,000
Settled during current year:										
18.1 By payment in full.....	14	1,420,000	0	0	0	0	0	0	14	1,420,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	14	1,420,000	0	0	0	0	0	0	14	1,420,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	14	1,420,000	0	0	0	0	0	0	14	1,420,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	100,000	0	0	0	0	0	0	1	100,000
POLICY EXHIBIT										
20. In force December 31, prior year.....	1,509	621,683,151	0	(a) 0	0	0	0	0	1,509	621,683,151
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(125)	(70,110,629)	0	0	0	0	0	0	(125)	(70,110,629)
23. In force December 31 of current year.....	1,384	551,572,522	0	(a) 0	0	0	0	0	1,384	551,572,522

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF MISSOURI DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		2,954,555	0	0	0	2,954,555
2. Annuity considerations.....		6,678	0	0	0	6,678
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		2,961,233	0	0	0	2,961,233
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		6,833,544	0	0	0	6,833,544
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		4,024	0	0	0	4,024
12. Surrender values and withdrawals for life contracts.....		181,201	0	0	0	181,201
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		2,958	0	0	0	2,958
15. Totals.....		7,021,726	0	0	0	7,021,726

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	5	156,012	0	0	0	0	0	0	5	156,012
17. Incurred during current year.....	49	6,902,610	0	0	0	0	0	0	49	6,902,610
Settled during current year:										
18.1 By payment in full.....	52	6,833,544	0	0	0	0	0	0	52	6,833,544
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	52	6,833,544	0	0	0	0	0	0	52	6,833,544
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	52	6,833,544	0	0	0	0	0	0	52	6,833,544
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	225,078	0	0	0	0	0	0	2	225,078
POLICY EXHIBIT										
20. In force December 31, prior year.....	2,372	690,811,825	0	(a) 0	0	0	0	0	2,372	690,811,825
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(213)	(68,663,119)	0	0	0	0	0	0	(213)	(68,663,119)
23. In force December 31 of current year.....	2,159	622,148,706	0	(a) 0	0	0	0	0	2,159	622,148,706

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF NORTHERN MARIANA ISLANDS DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

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

DETAILS OF WRITE-INS

1301.....	.....0	.....0	.....0	.....0	.....0	.....0
1302.....	.....0	.....0	.....0	.....0	.....0	.....0
1303.....	.....0	.....0	.....0	.....0	.....0	.....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	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
17. Incurred during current year.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
Settled during current year:										
18.1 By payment in full.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.4 Reduction by compromise.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.5 Amount rejected.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.6 Total settlements.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
POLICY EXHIBIT										
20. In force December 31, prior year.....	.....0	.....0	.....0	(a).....0	.....0	.....0	.....0	.....0	.....0	.....0
21. Issued during year.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
22. Other changes to in force (Net).....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
23. In force December 31 of current year.....	.....0	.....0	.....0	(a).....0	.....0	.....0	.....0	.....0	.....0	.....0

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF MISSISSIPPI DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		2,168,999	0	0	0	2,168,999
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		2,168,999	0	0	0	2,168,999
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		2,630,169	0	0	0	2,630,169
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		4,404	0	0	0	4,404
12. Surrender values and withdrawals for life contracts.....		173,317	0	0	0	173,317
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		2,807,890	0	0	0	2,807,890

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	3	128,806	0	0	0	0	0	0	3	128,806
17. Incurred during current year.....	29	2,701,363	0	0	0	0	0	0	29	2,701,363
Settled during current year:										
18.1 By payment in full.....	31	2,630,169	0	0	0	0	0	0	31	2,630,169
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	31	2,630,169	0	0	0	0	0	0	31	2,630,169
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	31	2,630,169	0	0	0	0	0	0	31	2,630,169
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	200,000	0	0	0	0	0	0	1	200,000
POLICY EXHIBIT										
20. In force December 31, prior year.....	1,540	443,134,695	0	(a) 0	0	0	0	0	1,540	443,134,695
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(101)	(30,025,343)	0	0	0	0	0	0	(101)	(30,025,343)
23. In force December 31 of current year.....	1,439	413,109,352	0	(a) 0	0	0	0	0	1,439	413,109,352

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF MONTANA DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		502,330	0	0	0	502,330
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		502,330	0	0	0	502,330
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		765,001	0	0	0	765,001
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		19,576	0	0	0	19,576
12. Surrender values and withdrawals for life contracts.....		60,371	0	0	0	60,371
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		844,948	0	0	0	844,948

DETAILS OF WRITE-INS

1301.....		0	0	0	0	0	0
1302.....		0	0	0	0	0	0
1303.....		0	0	0	0	0	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.....	1	65,000	0	0	0	0	0	0	1	65,000
17. Incurred during current year.....	7	700,001	0	0	0	0	0	0	7	700,001
Settled during current year:										
18.1 By payment in full.....	8	765,001	0	0	0	0	0	0	8	765,001
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	8	765,001	0	0	0	0	0	0	8	765,001
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	8	765,001	0	0	0	0	0	0	8	765,001
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.....	392	84,908,279	0	(a) 0	0	0	0	0	392	84,908,279
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(32)	(5,234,949)	0	0	0	0	0	0	(32)	(5,234,949)
23. In force December 31 of current year.....	360	79,673,330	0	(a) 0	0	0	0	0	360	79,673,330

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		6,412,814	0	0	0	6,412,814
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		6,412,814	0	0	0	6,412,814
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		11,915,288	0	0	0	11,915,288
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		4,204	0	0	0	4,204
12. Surrender values and withdrawals for life contracts.....		783,875	0	0	0	783,875
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		4,773	0	0	0	4,773
15. Totals.....		12,708,140	0	0	0	12,708,140

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	7	444,165	0	0	0	0	0	0	7	444,165
17. Incurred during current year.....	125	12,951,123	0	0	0	0	0	0	125	12,951,123
Settled during current year:										
18.1 By payment in full.....	124	11,915,288	0	0	0	0	0	0	124	11,915,288
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	124	11,915,288	0	0	0	0	0	0	124	11,915,288
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	124	11,915,288	0	0	0	0	0	0	124	11,915,288
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	8	1,480,000	0	0	0	0	0	0	8	1,480,000
POLICY EXHIBIT										
20. In force December 31, prior year.....	4,233	1,049,307,224	0	(a) 0	0	0	0	0	4,233	1,049,307,224
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(336)	(82,206,034)	0	0	0	0	0	0	(336)	(82,206,034)
23. In force December 31 of current year.....	3,897	967,101,190	0	(a) 0	0	0	0	0	3,897	967,101,190

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF NORTH DAKOTA DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		802,418	0	0	0	802,418
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		802,418	0	0	0	802,418
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		2,719,973	0	0	0	2,719,973
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		3,998	0	0	0	3,998
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		2,723,971	0	0	0	2,723,971

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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	0	0	0	0	0	0	0	0
17. Incurred during current year.....	22	2,930,000	0	0	0	0	0	0	22	2,930,000
Settled during current year:										
18.1 By payment in full.....	16	2,719,973	0	0	0	0	0	0	16	2,719,973
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	16	2,719,973	0	0	0	0	0	0	16	2,719,973
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	16	2,719,973	0	0	0	0	0	0	16	2,719,973
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	6	210,027	0	0	0	0	0	0	6	210,027
POLICY EXHIBIT										
20. In force December 31, prior year.....	693	203,523,988	0	(a) 0	0	0	0	0	693	203,523,988
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(69)	(22,410,553)	0	0	0	0	0	0	(69)	(22,410,553)
23. In force December 31 of current year.....	624	181,113,435	0	(a) 0	0	0	0	0	624	181,113,435

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF NEBRASKA DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		1,100,370	0	0	0	1,100,370
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		1,100,370	0	0	0	1,100,370
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		186,500	0	0	0	186,500
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		98,270	0	0	0	98,270
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		284,770	0	0	0	284,770

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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	0	0	0	0	0	0	0	0
17. Incurred during current year.....	8	198,500	0	0	0	0	0	0	8	198,500
Settled during current year:										
18.1 By payment in full.....	7	186,500	0	0	0	0	0	0	7	186,500
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	7	186,500	0	0	0	0	0	0	7	186,500
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	7	186,500	0	0	0	0	0	0	7	186,500
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	12,000	0	0	0	0	0	0	1	12,000
POLICY EXHIBIT										
20. In force December 31, prior year.....	931	257,227,589	0	(a) 0	0	0	0	0	931	257,227,589
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(62)	(17,407,848)	0	0	0	0	0	0	(62)	(17,407,848)
23. In force December 31 of current year.....	869	239,819,741	0	(a) 0	0	0	0	0	869	239,819,741

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF NEW HAMPSHIRE DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		581,104	0	0	0	581,104
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		581,104	0	0	0	581,104
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		1,450,000	0	0	0	1,450,000
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		12,099	0	0	0	12,099
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		1,462,099	0	0	0	1,462,099

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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	0	0	0	0	0	0	0	0
17. Incurred during current year.....	6	1,450,000	0	0	0	0	0	0	6	1,450,000
Settled during current year:										
18.1 By payment in full.....	6	1,450,000	0	0	0	0	0	0	6	1,450,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	6	1,450,000	0	0	0	0	0	0	6	1,450,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	6	1,450,000	0	0	0	0	0	0	6	1,450,000
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.....	503	156,712,861	0	(a) 0	0	0	0	0	503	156,712,861
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(46)	(15,099,412)	0	0	0	0	0	0	(46)	(15,099,412)
23. In force December 31 of current year.....	457	141,613,449	0	(a) 0	0	0	0	0	457	141,613,449

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF NEW JERSEY DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		4,213,754	0	0	0	4,213,754
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		4,213,754	0	0	0	4,213,754
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		5,355,000	0	0	0	5,355,000
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		207,286	0	0	0	207,286
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		5,562,286	0	0	0	5,562,286

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	1	30,000	0	0	0	0	0	0	1	30,000
17. Incurred during current year.....	19	6,575,000	0	0	0	0	0	0	19	6,575,000
Settled during current year:										
18.1 By payment in full.....	16	5,355,000	0	0	0	0	0	0	16	5,355,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	16	5,355,000	0	0	0	0	0	0	16	5,355,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	16	5,355,000	0	0	0	0	0	0	16	5,355,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	4	1,250,000	0	0	0	0	0	0	4	1,250,000
POLICY EXHIBIT										
20. In force December 31, prior year.....	2,157	997,114,011	0	(a) 0	0	0	0	0	2,157	997,114,011
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(160)	(82,250,487)	0	0	0	0	0	0	(160)	(82,250,487)
23. In force December 31 of current year.....	1,997	914,863,524	0	(a) 0	0	0	0	0	1,997	914,863,524

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF NEW MEXICO DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		.567,578	.....0	.....0	.....0	.....567,578
2. Annuity considerations.....		.....0	.....0	.....0	.....0	.....0
3. Deposit-type contract funds.....		.....0	....XXX	.....0	....XXX	.....0
4. Other considerations.....		.....0	.....0	.....0	.....0	.....0
5. Totals (Sum of Lines 1 to 4).....		.567,578	.....0	.....0	.....0	.....567,578
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		.....0	.....0	.....0	.....0	.....0
6.2 Applied to pay renewal premiums.....		.....0	.....0	.....0	.....0	.....0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		.....0	.....0	.....0	.....0	.....0
6.4 Other.....		.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		.....0	.....0	.....0	.....0	.....0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		.....0	.....0	.....0	.....0	.....0
7.2 Applied to provide paid-up annuities.....		.....0	.....0	.....0	.....0	.....0
7.3 Other.....		.....0	.....0	.....0	.....0	.....0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		.....0	.....0	.....0	.....0	.....0
8. Grand Totals (Lines 6.5 + 7.4).....		.....0	.....0	.....0	.....0	.....0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		.570,000	.....0	.....0	.....0	.....570,000
10. Matured endowments.....		.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....		.....0	.....0	.....0	.....0	.....0
12. Surrender values and withdrawals for life contracts.....		69,616	.....0	.....0	.....0	.....69,616
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		.....0	.....0	.....0	.....0	.....0
14. All other benefits, except accident and health.....		.....0	.....0	.....0	.....0	.....0
15. Totals.....		.639,616	.....0	.....0	.....0	.....639,616

DETAILS OF WRITE-INS

1301.....	.....0	.....0	.....0	.....0	.....0	.....0
1302.....	.....0	.....0	.....0	.....0	.....0	.....0
1303.....	.....0	.....0	.....0	.....0	.....0	.....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.....	1	.....50,000	.....0	.....0	.....0	.....0	.....0	.....0	1	.....50,000
17. Incurred during current year.....	5	.....520,000	.....0	.....0	.....0	.....0	.....0	.....0	5	.....520,000
Settled during current year:										
18.1 By payment in full.....	6	.....570,000	.....0	.....0	.....0	.....0	.....0	.....0	6	.....570,000
18.2 By payment on compromised claims.....	0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	0	.....0
18.3 Totals paid.....	6	.....570,000	.....0	.....0	.....0	.....0	.....0	.....0	6	.....570,000
18.4 Reduction by compromise.....	0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	0	.....0
18.5 Amount rejected.....	0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	0	.....0
18.6 Total settlements.....	6	.....570,000	.....0	.....0	.....0	.....0	.....0	.....0	6	.....570,000
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.....	373	.....103,196,855	.....0	(a).....0	.....0	.....0	.....0	.....0	373	.....103,196,855
21. Issued during year.....	0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	0	.....0
22. Other changes to in force (Net).....	(31)	.....(10,244,531)	.....0	.....0	.....0	.....0	.....0	.....0	(31)	.....(10,244,531)
23. In force December 31 of current year.....	342	.....92,952,324	.....0	(a).....0	.....0	.....0	.....0	.....0	342	.....92,952,324

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		.....0	.....0	.....0	.....0	.....0
24.1 Federal Employee Health Benefits Plan premium (b).....		.....0	.....0	.....0	.....0	.....0
24.2 Credit (group and individual).....		.....0	.....0	.....0	.....0	.....0
24.3 Collectively renewable policies (b).....		.....0	.....0	.....0	.....0	.....0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		.....0	.....0	.....0	.....0	.....0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		.....0	.....0	.....0	.....0	.....0
25.2 Guaranteed renewable (b).....		.....0	.....0	.....0	.....0	.....0
25.3 Non-renewable for stated reasons only (b).....		.....0	.....0	.....0	.....0	.....0
25.4 Other accident only.....		.....0	.....0	.....0	.....0	.....0
25.5 All other (b).....		.....0	.....0	.....0	.....0	.....0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		.....0	.....0	.....0	.....0	.....0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		.....0	.....0	.....0	.....0	.....0

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



DIRECT BUSINESS IN THE STATE OF NEVADA DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		640,338	0	0	0	640,338
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		640,338	0	0	0	640,338
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		250,000	0	0	0	250,000
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		250,000	0	0	0	250,000

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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	0	0	0	0	0	0	0	0
17. Incurred during current year.....	1	250,000	0	0	0	0	0	0	1	250,000
Settled during current year:										
18.1 By payment in full.....	1	250,000	0	0	0	0	0	0	1	250,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	1	250,000	0	0	0	0	0	0	1	250,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	1	250,000	0	0	0	0	0	0	1	250,000
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.....	203	78,354,134	0	(a) 0	0	0	0	0	203	78,354,134
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(19)	(9,599,971)	0	0	0	0	0	0	(19)	(9,599,971)
23. In force December 31 of current year.....	184	68,754,163	0	(a) 0	0	0	0	0	184	68,754,163

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF NEW YORK DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		1,165,233	0	0	0	1,165,233
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		1,165,233	0	0	0	1,165,233
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		0	0	0	0	0
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		16,842	0	0	0	16,842
12. Surrender values and withdrawals for life contracts.....		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		16,842	0	0	0	16,842

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	1	20,097	0	0	0	0	0	0	1	20,097
17. Incurred during current year.....	1	(20,097)	0	0	0	0	0	0	1	(20,097)
Settled during current year:										
18.1 By payment in full.....	2	0	0	0	0	0	0	0	2	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	2	0	0	0	0	0	0	0	2	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	2	0	0	0	0	0	0	0	2	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.....	0	0	0	(a) 0	0	0	0	0	0	0
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year.....	0	0	0	(a) 0	0	0	0	0	0	0

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF OHIO DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		7,913,780	0	0	0	7,913,780
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		7,913,780	0	0	0	7,913,780
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		12,747,958	0	0	0	12,747,958
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		70,832	0	0	0	70,832
12. Surrender values and withdrawals for life contracts.....		985,357	0	0	0	985,357
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		279	0	0	0	279
15. Totals.....		13,804,426	0	0	0	13,804,426

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	5	260,000	0	0	0	0	0	0	5	260,000
17. Incurred during current year.....	132	13,133,046	0	0	0	0	0	0	132	13,133,046
Settled during current year:										
18.1 By payment in full.....	129	12,747,959	0	0	0	0	0	0	129	12,747,959
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	129	12,747,959	0	0	0	0	0	0	129	12,747,959
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	129	12,747,959	0	0	0	0	0	0	129	12,747,959
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	8	645,087	0	0	0	0	0	0	8	645,087
POLICY EXHIBIT										
20. In force December 31, prior year.....	6,867	1,963,528,789	0	(a) 0	0	0	0	0	6,867	1,963,528,789
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(571)	(175,801,872)	0	0	0	0	0	0	(571)	(175,801,872)
23. In force December 31 of current year.....	6,296	1,787,726,917	0	(a) 0	0	0	0	0	6,296	1,787,726,917

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF OKLAHOMA DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		1,530,231	0	0	0	1,530,231
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		1,530,231	0	0	0	1,530,231
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		4,107,000	0	0	0	4,107,000
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		20,606	0	0	0	20,606
12. Surrender values and withdrawals for life contracts.....		171,669	0	0	0	171,669
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		4,299,275	0	0	0	4,299,275

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	1	500,000	0	0	0	0	0	0	1	500,000
17. Incurred during current year.....	17	3,730,000	0	0	0	0	0	0	17	3,730,000
Settled during current year:										
18.1 By payment in full.....	17	4,107,000	0	0	0	0	0	0	17	4,107,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	17	4,107,000	0	0	0	0	0	0	17	4,107,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	17	4,107,000	0	0	0	0	0	0	17	4,107,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	123,000	0	0	0	0	0	0	1	123,000
POLICY EXHIBIT										
20. In force December 31, prior year.....	1,069	316,255,529	0	(a) 0	0	0	0	0	1,069	316,255,529
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(104)	(40,773,283)	0	0	0	0	0	0	(104)	(40,773,283)
23. In force December 31 of current year.....	965	275,482,246	0	(a) 0	0	0	0	0	965	275,482,246

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF OREGON DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		1,211,282	0	0	0	1,211,282
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		1,211,282	0	0	0	1,211,282
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		2,359,900	0	0	0	2,359,900
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		14,414	0	0	0	14,414
12. Surrender values and withdrawals for life contracts.....		92,794	0	0	0	92,794
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		2,467,108	0	0	0	2,467,108

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	1	25,000	0	0	0	0	0	0	1	25,000
17. Incurred during current year.....	28	2,412,400	0	0	0	0	0	0	28	2,412,400
Settled during current year:										
18.1 By payment in full.....	18	2,359,900	0	0	0	0	0	0	18	2,359,900
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	18	2,359,900	0	0	0	0	0	0	18	2,359,900
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	18	2,359,900	0	0	0	0	0	0	18	2,359,900
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	11	77,500	0	0	0	0	0	0	11	77,500
POLICY EXHIBIT										
20. In force December 31, prior year.....	.968	316,131,219	0	(a) 0	0	0	0	0	.968	316,131,219
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(.89)	(29,051,344)	0	0	0	0	0	0	(.89)	(29,051,344)
23. In force December 31 of current year.....	.879	287,079,875	0	(a) 0	0	0	0	0	.879	287,079,875

(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).....		0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....		0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0
25.4 Other accident only.....		0	0	0	0
25.5 All other (b).....		0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0

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



DIRECT BUSINESS IN OTHER ALIEN GRAND TOTAL DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		40,034	0	0	0	40,034
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		40,034	0	0	0	40,034
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		0	0	0	0	0
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		0	0	0	0	0

DETAILS OF WRITE-INS

1301.....		0	0	0	0	0	0
1302.....		0	0	0	0	0	0
1303.....		0	0	0	0	0	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	0	0	0	0	0	0	0	0
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	0	0	0	(a) 0	0	0	0	0	0	0
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year.....	0	0	0	(a) 0	0	0	0	0	0	0

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

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

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

NONE

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).....	0	0	0	0	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0
Other Individual Policies:									
25.1 Non-cancelable (b).....	0	0	0	0	0	0	0	0	0
25.2 Guaranteed renewable (b).....	0	0	0	0	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	0	0	0	0	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	0	0	0	0	0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		7,670,352	0	0	0	7,670,352
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		7,670,352	0	0	0	7,670,352
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		7,560,634	0	0	0	7,560,634
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		18,017	0	0	0	18,017
12. Surrender values and withdrawals for life contracts.....		469,295	0	0	0	469,295
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		2,791	0	0	0	2,791
15. Totals.....		8,050,737	0	0	0	8,050,737

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	18	974,063	0	0	0	0	0	0	18	974,063
17. Incurred during current year.....	83	8,024,426	0	0	0	0	0	0	83	8,024,426
Settled during current year:										
18.1 By payment in full.....	77	7,560,634	0	0	0	0	0	0	77	7,560,634
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	77	7,560,634	0	0	0	0	0	0	77	7,560,634
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	77	7,560,634	0	0	0	0	0	0	77	7,560,634
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	24	1,437,855	0	0	0	0	0	0	24	1,437,855
POLICY EXHIBIT										
20. In force December 31, prior year.....	5,837	1,761,792,232	0	(a) 0	0	0	0	0	5,837	1,761,792,232
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(417)	(125,453,633)	0	0	0	0	0	0	(417)	(125,453,633)
23. In force December 31 of current year.....	5,420	1,636,338,599	0	(a) 0	0	0	0	0	5,420	1,636,338,599

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN PUERTO RICO DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

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

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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	0	0	0	0	0	0	0	0
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	0	0	0	(a) 0	0	0	0	0	0	0
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year.....	0	0	0	(a) 0	0	0	0	0	0	0

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

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

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

NONE

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).....	0	0	0	0	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0
Other Individual Policies:									
25.1 Non-cancelable (b).....	0	0	0	0	0	0	0	0	0
25.2 Guaranteed renewable (b).....	0	0	0	0	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	0	0	0	0	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	0	0	0	0	0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF RHODE ISLAND DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		618,588	0	0	0	618,588
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		618,588	0	0	0	618,588
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		2,566,266	0	0	0	2,566,266
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		1,562	0	0	0	1,562
12. Surrender values and withdrawals for life contracts.....		2,194	0	0	0	2,194
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		2,570,022	0	0	0	2,570,022

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	2	501,266	0	0	0	0	0	0	2	501,266
17. Incurred during current year.....	14	2,065,000	0	0	0	0	0	0	14	2,065,000
Settled during current year:										
18.1 By payment in full.....	16	2,566,266	0	0	0	0	0	0	16	2,566,266
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	16	2,566,266	0	0	0	0	0	0	16	2,566,266
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	16	2,566,266	0	0	0	0	0	0	16	2,566,266
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.....	590	175,038,007	0	(a) 0	0	0	0	0	590	175,038,007
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(44)	(16,010,941)	0	0	0	0	0	0	(44)	(16,010,941)
23. In force December 31 of current year.....	546	159,027,066	0	(a) 0	0	0	0	0	546	159,027,066

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF SOUTH CAROLINA DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		2,693,878	0	0	0	2,693,878
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		2,693,878	0	0	0	2,693,878
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		3,445,479	0	0	0	3,445,479
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		46,696	0	0	0	46,696
12. Surrender values and withdrawals for life contracts.....		231,438	0	0	0	231,438
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		2,367	0	0	0	2,367
15. Totals.....		3,725,980	0	0	0	3,725,980

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	8	710,000	0	0	0	0	0	0	8	710,000
17. Incurred during current year.....	63	3,960,479	0	0	0	0	0	0	63	3,960,479
Settled during current year:										
18.1 By payment in full.....	66	3,445,479	0	0	0	0	0	0	66	3,445,479
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	66	3,445,479	0	0	0	0	0	0	66	3,445,479
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	66	3,445,479	0	0	0	0	0	0	66	3,445,479
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	5	1,225,000	0	0	0	0	0	0	5	1,225,000
POLICY EXHIBIT										
20. In force December 31, prior year.....	1,802	488,137,184	0	(a) 0	0	0	0	0	1,802	488,137,184
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(142)	(46,995,805)	0	0	0	0	0	0	(142)	(46,995,805)
23. In force December 31 of current year.....	1,660	441,141,379	0	(a) 0	0	0	0	0	1,660	441,141,379

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF SOUTH DAKOTA DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		1,068,263	0	0	0	1,068,263
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		1,068,263	0	0	0	1,068,263
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		1,287,967	0	0	0	1,287,967
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		141,814	0	0	0	141,814
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		1,429,781	0	0	0	1,429,781

DETAILS OF WRITE-INS

1301.....		0	0	0	0	0	0
1302.....		0	0	0	0	0	0
1303.....		0	0	0	0	0	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.....	1	100,000	0	0	0	0	0	0	1	100,000
17. Incurred during current year.....	19	1,187,967	0	0	0	0	0	0	19	1,187,967
Settled during current year:										
18.1 By payment in full.....	20	1,287,967	0	0	0	0	0	0	20	1,287,967
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	20	1,287,967	0	0	0	0	0	0	20	1,287,967
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	20	1,287,967	0	0	0	0	0	0	20	1,287,967
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.....	941	246,705,291	0	(a) 0	0	0	0	0	941	246,705,291
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(76)	(20,222,790)	0	0	0	0	0	0	(76)	(20,222,790)
23. In force December 31 of current year.....	865	226,482,501	0	(a) 0	0	0	0	0	865	226,482,501

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF TENNESSEE DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		4,859,009	0	0	0	4,859,009
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		4,859,009	0	0	0	4,859,009
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		7,845,341	0	0	0	7,845,341
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		3,153	0	0	0	3,153
12. Surrender values and withdrawals for life contracts.....		44,118	0	0	0	44,118
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		1,493	0	0	0	1,493
15. Totals.....		7,894,104	0	0	0	7,894,104

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	15	372,500	0	0	0	0	0	0	15	372,500
17. Incurred during current year.....	75	8,768,173	0	0	0	0	0	0	75	8,768,173
Settled during current year:										
18.1 By payment in full.....	74	7,845,341	0	0	0	0	0	0	74	7,845,341
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	74	7,845,341	0	0	0	0	0	0	74	7,845,341
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	74	7,845,341	0	0	0	0	0	0	74	7,845,341
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	16	1,295,332	0	0	0	0	0	0	16	1,295,332
POLICY EXHIBIT										
20. In force December 31, prior year.....	3,772	1,267,083,565	0	(a) 0	0	0	0	0	3,772	1,267,083,565
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(286)	(89,494,566)	0	0	0	0	0	0	(286)	(89,494,566)
23. In force December 31 of current year.....	3,486	1,177,588,999	0	(a) 0	0	0	0	0	3,486	1,177,588,999

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF TEXAS DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		12,458,713	0	0	0	12,458,713
2. Annuity considerations.....		2,600	0	0	0	2,600
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		12,461,313	0	0	0	12,461,313
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		23,371,527	0	0	0	23,371,527
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		30,905	0	0	0	30,905
12. Surrender values and withdrawals for life contracts.....		1,678,189	0	0	0	1,678,189
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		487	0	0	0	487
15. Totals.....		25,081,108	0	0	0	25,081,108

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	16	2,550,055	0	0	0	0	0	0	16	2,550,055
17. Incurred during current year.....	133	25,582,631	0	0	0	0	0	0	133	25,582,631
Settled during current year:										
18.1 By payment in full.....	132	23,371,527	0	0	0	0	0	0	132	23,371,527
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	132	23,371,527	0	0	0	0	0	0	132	23,371,527
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	132	23,371,527	0	0	0	0	0	0	132	23,371,527
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	17	4,761,160	0	0	0	0	0	0	17	4,761,160
POLICY EXHIBIT										
20. In force December 31, prior year.....	7,210	2,553,847,321	0	(a) 0	0	0	0	0	7,210	2,553,847,321
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(606)	(247,886,473)	0	0	0	0	0	0	(606)	(247,886,473)
23. In force December 31 of current year.....	6,604	2,305,960,848	0	(a) 0	0	0	0	0	6,604	2,305,960,848

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF UTAH DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		1,048,605	0	0	0	1,048,605
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		1,048,605	0	0	0	1,048,605
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		1,977,399	0	0	0	1,977,399
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		28,911	0	0	0	28,911
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		2,006,310	0	0	0	2,006,310

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	2	502,399	0	0	0	0	0	0	2	502,399
17. Incurred during current year.....	10	1,475,000	0	0	0	0	0	0	10	1,475,000
Settled during current year:										
18.1 By payment in full.....	12	1,977,399	0	0	0	0	0	0	12	1,977,399
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	12	1,977,399	0	0	0	0	0	0	12	1,977,399
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	12	1,977,399	0	0	0	0	0	0	12	1,977,399
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.....	672	204,941,815	0	(a) 0	0	0	0	0	672	204,941,815
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(56)	(18,974,156)	0	0	0	0	0	0	(56)	(18,974,156)
23. In force December 31 of current year.....	616	185,967,659	0	(a) 0	0	0	0	0	616	185,967,659

(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	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF VIRGINIA DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		2,108,815	0	0	0	2,108,815
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		2,108,815	0	0	0	2,108,815
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		2,448,000	0	0	0	2,448,000
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		4,604	0	0	0	4,604
12. Surrender values and withdrawals for life contracts.....		82,532	0	0	0	82,532
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		2,535,136	0	0	0	2,535,136

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	1	25,000	0	0	0	0	0	0	1	25,000
17. Incurred during current year.....	25	2,528,000	0	0	0	0	0	0	25	2,528,000
Settled during current year:										
18.1 By payment in full.....	17	2,448,000	0	0	0	0	0	0	17	2,448,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	17	2,448,000	0	0	0	0	0	0	17	2,448,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	17	2,448,000	0	0	0	0	0	0	17	2,448,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	9	105,000	0	0	0	0	0	0	9	105,000
POLICY EXHIBIT										
20. In force December 31, prior year.....	1,347	458,871,678	0	(a) 0	0	0	0	0	1,347	458,871,678
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(94)	(41,819,028)	0	0	0	0	0	0	(94)	(41,819,028)
23. In force December 31 of current year.....	1,253	417,052,650	0	(a) 0	0	0	0	0	1,253	417,052,650

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN U.S. VIRGIN ISLANDS DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		3,759	0	0	0	3,759
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		3,759	0	0	0	3,759
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		0	0	0	0	0
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		0	0	0	0	0

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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	0	0	0	0	0	0	0	0
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	0	0	0	(a) 0	0	0	0	0	0	0
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year.....	0	0	0	(a) 0	0	0	0	0	0	0

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

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

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

NONE

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).....	0	0	0	0	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0	0	0	0	0
Other Individual Policies:									
25.1 Non-cancelable (b).....	0	0	0	0	0	0	0	0	0
25.2 Guaranteed renewable (b).....	0	0	0	0	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	0	0	0	0	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	0	0	0	0	0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF VERMONT DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		336,518	0	0	0	336,518
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		336,518	0	0	0	336,518
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		250,000	0	0	0	250,000
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		250,000	0	0	0	250,000

DETAILS OF WRITE-INS

1301.....		0	0	0	0	0	0
1302.....		0	0	0	0	0	0
1303.....		0	0	0	0	0	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	0	0	0	0	0	0	0	0
17. Incurred during current year.....	1	250,000	0	0	0	0	0	0	1	250,000
Settled during current year:										
18.1 By payment in full.....	1	250,000	0	0	0	0	0	0	1	250,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	1	250,000	0	0	0	0	0	0	1	250,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	1	250,000	0	0	0	0	0	0	1	250,000
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.....	106	41,691,261	0	(a) 0	0	0	0	0	106	41,691,261
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(15)	(4,354,176)	0	0	0	0	0	0	(15)	(4,354,176)
23. In force December 31 of current year.....	91	37,337,085	0	(a) 0	0	0	0	0	91	37,337,085

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF WASHINGTON DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		2,570,742	0	0	0	2,570,742
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		2,570,742	0	0	0	2,570,742
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		975,000	0	0	0	975,000
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		54,836	0	0	0	54,836
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		1,029,836	0	0	0	1,029,836

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	1	25,000	0	0	0	0	0	0	1	25,000
17. Incurred during current year.....	11	1,465,000	0	0	0	0	0	0	11	1,465,000
Settled during current year:										
18.1 By payment in full.....	9	975,000	0	0	0	0	0	0	9	975,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	9	975,000	0	0	0	0	0	0	9	975,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	9	975,000	0	0	0	0	0	0	9	975,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	3	515,000	0	0	0	0	0	0	3	515,000
POLICY EXHIBIT										
20. In force December 31, prior year.....	1,799	619,520,361	0	(a) 0	0	0	0	0	1,799	619,520,361
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(178)	(60,781,274)	0	0	0	0	0	0	(178)	(60,781,274)
23. In force December 31 of current year.....	1,621	558,739,087	0	(a) 0	0	0	0	0	1,621	558,739,087

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF WISCONSIN DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		2,420,511	0	0	0	2,420,511
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		2,420,511	0	0	0	2,420,511
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		4,493,860	0	0	0	4,493,860
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		20,595	0	0	0	20,595
12. Surrender values and withdrawals for life contracts.....		400,317	0	0	0	400,317
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		4,914,772	0	0	0	4,914,772

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	3	110,528	0	0	0	0	0	0	3	110,528
17. Incurred during current year.....	37	4,533,360	0	0	0	0	0	0	37	4,533,360
Settled during current year:										
18.1 By payment in full.....	37	4,493,860	0	0	0	0	0	0	37	4,493,860
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	37	4,493,860	0	0	0	0	0	0	37	4,493,860
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	37	4,493,860	0	0	0	0	0	0	37	4,493,860
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	3	150,028	0	0	0	0	0	0	3	150,028
POLICY EXHIBIT										
20. In force December 31, prior year.....	2,263	626,474,457	0	(a) 0	0	0	0	0	2,263	626,474,457
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(220)	(70,130,176)	0	0	0	0	0	0	(220)	(70,130,176)
23. In force December 31 of current year.....	2,043	556,344,281	0	(a) 0	0	0	0	0	2,043	556,344,281

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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



DIRECT BUSINESS IN THE STATE OF WEST VIRGINIA DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		397,576	0	0	0	397,576
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		397,576	0	0	0	397,576
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		50,000	0	0	0	50,000
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....		102,700	0	0	0	102,700
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		2,031	0	0	0	2,031
15. Totals.....		154,731	0	0	0	154,731

DETAILS OF WRITE-INS

1301.....	0	0	0	0	0	0
1302.....	0	0	0	0	0	0
1303.....	0	0	0	0	0	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.....	1	50,000	0	0	0	0	0	0	1	50,000
17. Incurred during current year.....	4	0	0	0	0	0	0	0	4	0
Settled during current year:										
18.1 By payment in full.....	5	50,000	0	0	0	0	0	0	5	50,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	5	50,000	0	0	0	0	0	0	5	50,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	5	50,000	0	0	0	0	0	0	5	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.....	318	80,737,508	0	(a) 0	0	0	0	0	318	80,737,508
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(25)	(4,485,949)	0	0	0	0	0	0	(25)	(4,485,949)
23. In force December 31 of current year.....	293	76,251,559	0	(a) 0	0	0	0	0	293	76,251,559

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF WYOMING DURING THE YEAR

NAIC Group Code.....968

NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS						
1. Life insurance.....		306,757	0	0	0	306,757
2. Annuity considerations.....		0	0	0	0	0
3. Deposit-type contract funds.....		0	XXX	0	XXX	0
4. Other considerations.....		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....		306,757	0	0	0	306,757
DIRECT DIVIDENDS TO POLICYHOLDERS						
6.1 Paid in cash or left on deposit.....		0	0	0	0	0
6.2 Applied to pay renewal premiums.....		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		0	0	0	0	0
6.4 Other.....		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
ANNUITIES:						
7.1 Paid in cash or left on deposit.....		0	0	0	0	0
7.2 Applied to provide paid-up annuities.....		0	0	0	0	0
7.3 Other.....		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits.....		696,500	0	0	0	696,500
10. Matured endowments.....		0	0	0	0	0
11. Annuity benefits.....		6,907	0	0	0	6,907
12. Surrender values and withdrawals for life contracts.....		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....		0	0	0	0	0
15. Totals.....		703,407	0	0	0	703,407

DETAILS OF WRITE-INS

1301.....		0	0	0	0	0	0
1302.....		0	0	0	0	0	0
1303.....		0	0	0	0	0	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	0	0	0	0	0	0	0	0
17. Incurred during current year.....	5	696,500	0	0	0	0	0	0	5	696,500
Settled during current year:										
18.1 By payment in full.....	5	696,500	0	0	0	0	0	0	5	696,500
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	5	696,500	0	0	0	0	0	0	5	696,500
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	5	696,500	0	0	0	0	0	0	5	696,500
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	70,335,184	0	(a) 0	0	0	0	0	175	70,335,184
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(21)	(6,499,403)	0	0	0	0	0	0	(21)	(6,499,403)
23. In force December 31 of current year.....	154	63,835,781	0	(a) 0	0	0	0	0	154	63,835,781

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

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

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....		0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....		0	0	0	0	0
24.2 Credit (group and individual).....		0	0	0	0	0
24.3 Collectively renewable policies (b).....		0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....		0	0	0	0	0
Other Individual Policies:		NONE				
25.1 Non-cancelable (b).....		0	0	0	0	0
25.2 Guaranteed renewable (b).....		0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....		0	0	0	0	0
25.4 Other accident only.....		0	0	0	0	0
25.5 All other (b).....		0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	0	0

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

U.S. FINANCIAL LIFE INSURANCE COMPANY
FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

Interest Maintenance Reserve

	1 Amount
1. Reserve as of December 31, prior year.....	560,906
2. Current year's realized pre-tax capital gains/(losses) of \$....817,523 transferred into the reserve net of taxes of \$....286,133.....	531,390
3. Adjustment for current year's liability gains/(losses) released from the reserve.....	0
4. Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3).....	1,092,296
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4).....	195,658
6. Reserve as of December 31, current year (Line 4 minus Line 5).....	896,638

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.....	146,487	49,170	0	195,658
2. 2017.....	106,247	32,571	0	138,819
3. 2018.....	69,364	33,478	0	102,842
4. 2019.....	32,556	44,936	0	77,492
5. 2020.....	12,599	57,070	0	69,669
6. 2021.....	13,060	70,219	0	83,280
7. 2022.....	13,367	69,850	0	83,218
8. 2023.....	11,702	57,767	0	69,468
9. 2024.....	12,484	44,650	0	57,134
10. 2025.....	13,824	31,016	0	44,840
11. 2026.....	15,163	16,454	0	31,617
12. 2027.....	15,448	8,489	0	23,936
13. 2028.....	16,620	6,812	0	23,432
14. 2029.....	17,460	4,925	0	22,386
15. 2030.....	18,334	2,934	0	21,268
16. 2031.....	16,727	1,048	0	17,775
17. 2032.....	13,286	0	0	13,286
18. 2033.....	9,308	0	0	9,308
19. 2034.....	5,164	0	0	5,164
20. 2035.....	1,706	0	0	1,706
21. 2036.....	0	0	0	0
22. 2037.....	0	0	0	0
23. 2038.....	0	0	0	0
24. 2039.....	0	0	0	0
25. 2040.....	0	0	0	0
26. 2041.....	0	0	0	0
27. 2042.....	0	0	0	0
28. 2043.....	0	0	0	0
29. 2044.....	0	0	0	0
30. 2045.....	0	0	0	0
31. 2046 and Later.....	0	0	0	0
32. Total (Lines 1 to 31).....	560,907	531,390	0	1,092,296

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.....	2,746,048	0	2,746,048	0	0	0	2,746,048
2. Realized capital gains/(losses) net of taxes - General Account.....	(64,764)	0	(64,764)	0	0	0	(64,764)
3. Realized capital gains/(losses) net of taxes - Separate Accounts.....	0	0	0	0	0	0	0
4. Unrealized capital gains/(losses) - net of deferred taxes - General Account.....	0	0	0	0	0	0	0
5. Unrealized capital gains/(losses) - net of deferred taxes - Separate Accounts.....	0	0	0	0	0	0	0
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves.....	0	0	0	0	0	0	0
7. Basic contribution.....	.419,722	0	.419,722	0	0	0	.419,722
8. Accumulated balances (Lines 1 through 5, minus 6 plus 7).....	3,101,006	0	3,101,006	0	0	0	3,101,006
9. Maximum reserve.....	2,272,960	0	2,272,960	0	0	0	2,272,960
10. Reserve objective.....	1,575,158	0	1,575,158	0	0	0	1,575,158
11. 20% of (Line 10 minus Line 8).....	(305,170)	0	(305,170)	0	0	0	(305,170)
12. Balance before transfers (Lines 8 + 11).....	2,795,836	0	2,795,836	0	0	0	2,795,836
13. Transfers.....	0	0	0	0	0	0	0
14. Voluntary contribution.....	0	0	0	0	0	0	0
15. Adjustment down to maximum/up to zero.....	(522,876)	0	(522,876)	0	0	0	(522,876)
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15).....	2,272,960	0	2,272,960	0	0	0	2,272,960

ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

Line Number	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Factor	Amount (Cols. 4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
LONG-TERM BONDS												
1		Exempt obligations.....	33,477,895	XXX.....	XXX.....	33,477,895	0.0000	0	0.0000	0	0.0000	0
2	1	Highest quality.....	252,067,857	XXX.....	XXX.....	252,067,857	0.0004	100,827	0.0023	579,756	0.0030	756,204
3	2	High quality.....	147,336,469	XXX.....	XXX.....	147,336,469	0.0019	279,939	0.0058	854,552	0.0090	1,326,028
4	3	Medium quality.....	3,373,452	XXX.....	XXX.....	3,373,452	0.0093	31,373	0.0230	77,589	0.0340	114,697
5	4	Low quality.....	0	XXX.....	XXX.....	0	0.0213	0	0.0530	0	0.0750	0
6	5	Lower quality.....	0	XXX.....	XXX.....	0	0.0432	0	0.1100	0	0.1700	0
7	6	In or near default.....	200,577	XXX.....	XXX.....	200,577	0.0000	0	0.2000	40,115	0.2000	40,115
8		Total unrated multi-class securities acquired by conversion.....	0	XXX.....	XXX.....	0	XXX.....	0	XXX.....	0	XXX.....	0
9		Total long-term bonds (sum of Lines 1 through 8).....	436,456,249	XXX.....	XXX.....	436,456,249	XXX.....	412,140	XXX.....	1,552,012	XXX.....	2,237,044
PREFERRED STOCKS												
10	1	Highest quality.....	0	XXX.....	XXX.....	0	0.0004	0	0.0023	0	0.0030	0
11	2	High quality.....	3,990,630	XXX.....	XXX.....	3,990,630	0.0019	7,582	0.0058	23,146	0.0090	35,916
12	3	Medium quality.....	0	XXX.....	XXX.....	0	0.0093	0	0.0230	0	0.0340	0
13	4	Low quality.....	0	XXX.....	XXX.....	0	0.0213	0	0.0530	0	0.0750	0
14	5	Lower quality.....	0	XXX.....	XXX.....	0	0.0432	0	0.1100	0	0.1700	0
15	6	In or near default.....	0	XXX.....	XXX.....	0	0.0000	0	0.2000	0	0.2000	0
16		Affiliated life with AVR.....	0	XXX.....	XXX.....	0	0.0000	0	0.0000	0	0.0000	0
17		Total preferred stocks (sum of Lines 10 through 16).....	3,990,630	XXX.....	XXX.....	3,990,630	XXX.....	7,582	XXX.....	23,146	XXX.....	35,916
SHORT-TERM BONDS												
18		Exempt obligations.....	58,077,640	XXX.....	XXX.....	58,077,640	0.0000	0	0.0000	0	0.0000	0
19	1	Highest quality.....	0	XXX.....	XXX.....	0	0.0004	0	0.0023	0	0.0030	0
20	2	High quality.....	0	XXX.....	XXX.....	0	0.0019	0	0.0058	0	0.0090	0
21	3	Medium quality.....	0	XXX.....	XXX.....	0	0.0093	0	0.0230	0	0.0340	0
22	4	Low quality.....	0	XXX.....	XXX.....	0	0.0213	0	0.0530	0	0.0750	0
23	5	Lower quality.....	0	XXX.....	XXX.....	0	0.0432	0	0.1100	0	0.1700	0
24	6	In or near default.....	0	XXX.....	XXX.....	0	0.0000	0	0.2000	0	0.2000	0
25		Total short-term bonds (sum of Lines 18 through 24).....	58,077,640	XXX.....	XXX.....	58,077,640	XXX.....	0	XXX.....	0	XXX.....	0
DERIVATIVE INSTRUMENTS												
26		Exchange traded.....	0	XXX.....	XXX.....	0	0.0004	0	0.0023	0	0.0030	0
27	1	Highest quality.....	0	XXX.....	XXX.....	0	0.0004	0	0.0023	0	0.0030	0
28	2	High quality.....	0	XXX.....	XXX.....	0	0.0019	0	0.0058	0	0.0090	0
29	3	Medium quality.....	0	XXX.....	XXX.....	0	0.0093	0	0.0230	0	0.0340	0
30	4	Low quality.....	0	XXX.....	XXX.....	0	0.0213	0	0.0530	0	0.0750	0
31	5	Lower quality.....	0	XXX.....	XXX.....	0	0.0432	0	0.1100	0	0.1700	0
32	6	In or near default.....	0	XXX.....	XXX.....	0	0.0000	0	0.2000	0	0.2000	0
33		Total derivative instruments.....	0	XXX.....	XXX.....	0	XXX.....	0	XXX.....	0	XXX.....	0
34		Total (Lines 9 + 17 + 25 + 33).....	498,524,519	XXX.....	XXX.....	498,524,519	XXX.....	419,722	XXX.....	1,575,158	XXX.....	2,272,960

Asset Valuation Reserve - Default
NONE

Asset Valuation Reserve - Equity
NONE

Asset Valuation Reserve - Equity
NONE

Asset Valuation Reserve - Equity
NONE

Asset Valuation Reserve - Replications (Synthetic) Assets
NONE

Sch. F - Claims
NONE

Sch. H - Pt. 1
NONE

Sch. H - Pt. 2
NONE

Sch. H - Pt. 3
NONE

Sch. H - Pt. 4
NONE

Sch. H - Pt. 5
NONE

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

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

U.S. FINANCIAL LIFE INSURANCE COMPANY
SCHEDULE S - PART 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 Unpaid Losses
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Life and Annuity - Affiliates - U.S. - Captive

14355.....	14-1903564....	12/31/2004	AXA RE ARIZONA COMPANY.....	AZ.....	36,214,796	16,778,000
0199999.	Total - Life and Annuity Affiliates - U.S. - Captive.....				36,214,796	16,778,000

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

62944.....	13-5570651....	03/01/2005	AXA EQUITABLE LIFE INS CO.....	NY.....	150,000	1,560,704
0299999.	Total - Life and Annuity Affiliates - U.S. - Other.....				150,000	1,560,704
0399999.	Total - Life and Annuity Affiliates - U.S. - Total.....				36,364,796	18,338,704
0799999.	Total - Life and Annuity Affiliates.....				36,364,796	18,338,704

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

88340.....	59-2859797....	10/01/1996	HANNOVER LIFE REASSURANCE CO OF AMERICA.....	FL.....	3,361,489	742,840
65676.....	35-0472300....	01/01/1996	LINCOLN NATIONAL LIFE INS CO.....	IN.....	202,833	0
88099.....	75-1608507....	04/01/2003	OPTIMUM RE INS CO.....	TX.....	825,000	852,580
64688.....	75-6020048....	01/01/1997	SCOR GLOBAL LIFE AMERICAS REINSURANCE CO.....	DE.....	1,611,489	237,320
80659.....	38-0397420....	01/01/1996	US BUSINESS OF CANADA LIFE ASSUR CO.....	MI.....	1,075,000	1,356,404
66133.....	41-1760577....	07/01/2006	WILTON REASSURANCE COMPANY.....	MN.....	0	34,560
0899999.	Total - Life and Annuity Non-Affiliates - U.S. Non-Affiliates.....				7,075,811	3,223,704
1099999.	Total - Life and Annuity Non-Affiliates.....				7,075,811	3,223,704
1199999.	Total - Life and Annuity.....				43,440,607	21,562,408
2399999.	Total U.S.....				43,440,607	21,562,408
9999999.	Total.....				43,440,607	21,562,408

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	12 Outstanding Current Year	13 Surplus Relief Prior Year	14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9 Current Year	10 Prior Year					

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

62944....	13-5570651....	03/01/2005	AXA EQUITABLE LIFE INS CO.....	NY.....	YRT/I.....	OL.....	580,427,349	3,830,925	3,843,196	3,819,610	0	0	0	0
0299999....	Total - General Account - Authorized - Affiliates - U.S. - Other.....						580,427,349	3,830,925	3,843,196	3,819,610	0	0	0	0
0399999....	Total - General Account - Authorized - Affiliates - U.S. - Total.....						580,427,349	3,830,925	3,843,196	3,819,610	0	0	0	0
0799999....	Total - General Account - Authorized - Affiliates.....						580,427,349	3,830,925	3,843,196	3,819,610	0	0	0	0

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

10348....	06-1430254....	02/01/2012	ARCH REINSURANCE COMPANY.....	DE.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
86258....	13-2572994....	11/01/1996	GENERAL RE LIFE CORP.....	CT.....	YRT/I.....	OL.....	50,488,143	155,577	160,001	393,960	0	0	0	0
88340....	59-2859797....	10/01/1996	HANNOVER LIFE REASSURANCE CO OF AMERICA.....	FL.....	CO/I.....	AXXX.....	995,617,303	26,750,490	29,717,553	3,270,743	0	0	0	0
88340....	59-2859797....	01/22/1997	HANNOVER LIFE REASSURANCE CO OF AMERICA.....	FL.....	CO/I.....	OL.....	2,872,494	23,180	22,171	8,936	0	0	0	0
88340....	59-2859797....	01/22/1997	HANNOVER LIFE REASSURANCE CO OF AMERICA.....	FL.....	YRT/I.....	OL.....	89,058,159	1,222,547	1,255,345	1,091,274	0	0	0	0
23043....	04-1543470....	04/01/2013	LIBERTY MUTUAL INSURANCE CO.....	MA.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
65676....	35-0472300....	01/01/1986	LINCOLN NATIONAL LIFE INS CO.....	IN.....	CO/I.....	OL.....	31,775,648	4,328,382	4,657,642	420,463	0	0	0	0
88099....	75-1608507....	04/01/2003	OPTIMUM RE INS CO.....	TX.....	YRT/I.....	OL.....	686,292,793	3,539,954	3,594,976	4,747,141	0	0	0	0
93572....	43-1235868....	10/01/1990	RGA REINSURANCE CO.....	MO.....	CO/I.....	AXXX.....	525,000	2,757	18,890	2,327	0	0	0	0
93572....	43-1235868....	10/01/1990	RGA REINSURANCE CO.....	MO.....	CO/I.....	OL.....	1,525,000	13,515	12,283	3,301	0	0	0	0
93572....	43-1235868....	05/01/1991	RGA REINSURANCE CO.....	MO.....	YRT/I.....	OL.....	1,938,422	19,581	17,429	25,911	0	0	0	0
64688....	75-6020048....	01/01/1997	SCOR GLOBAL LIFE AMERICAS REINSURANCE CO.....	DE.....	CO/I.....	AXXX.....	307,887,402	2,511,976	2,685,976	.976,597	0	0	0	0
64688....	75-6020048....	01/01/1997	SCOR GLOBAL LIFE AMERICAS REINSURANCE CO.....	DE.....	CO/I.....	OL.....	2,724,843	20,775	19,974	8,158	0	0	0	0
64688....	75-6020048....	01/01/1997	SCOR GLOBAL LIFE AMERICAS REINSURANCE CO.....	DE.....	YRT/I.....	OL.....	75,615,407	.988,767	1,051,303	.695,446	0	0	0	0
87572....	23-2038295....	10/01/1990	SCOTTISH RE US INC.....	DE.....	CO/I.....	AXXX.....	750,000	11,173	10,147	8,970	0	0	0	0
87572....	23-2038295....	10/01/1990	SCOTTISH RE US INC.....	DE.....	CO/I.....	OL.....	3,365,000	28,671	26,547	40,544	0	0	0	0
87572....	23-2038295....	06/15/1991	SCOTTISH RE US INC.....	DE.....	YRT/I.....	OL.....	4,273,136	85,025	78,674	.131,082	0	0	0	0
80659....	38-0397420....	01/01/2001	US BUSINESS OF CANADA LIFE ASSUR CO.....	MI.....	YRT/I.....	OL.....	950,264,541	6,245,508	6,403,654	6,814,080	0	0	0	0
66133....	41-1760577....	07/01/2006	WILTON REASSURANCE COMPANY.....	MN.....	YRT/I.....	OL.....	151,464,264	466,714	479,987	1,062,878	0	0	0	0
0899999....	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates.....						3,356,437,555	46,414,592	50,212,553	19,701,811	0	0	0	0
1099999....	Total - General Account - Authorized - Non-Affiliates.....						3,356,437,555	46,414,592	50,212,553	19,701,811	0	0	0	0
1199999....	Total - General Account - Authorized.....						3,936,864,904	50,245,517	54,055,749	23,521,421	0	0	0	0

General Account - Unauthorized - Affiliates - U.S. - Captive

14355....	14-1903564....	12/31/2004	AXA RE ARIZONA COMPANY.....	AZ.....	CO/I.....	XXXL.....	21,819,080,172	812,835,248	877,233,189	.75,454,555	0	0	0	0
1288888....	Total - General Account - Unauthorized - Affiliates - U.S. - Captive.....						21,819,080,172	812,835,248	877,233,189	.75,454,555	0	0	0	0
1499999....	Total - General Account - Unauthorized - Affiliates - U.S. - Total.....						21,819,080,172	812,835,248	877,233,189	.75,454,555	0	0	0	0
1899999....	Total - General Account - Unauthorized - Affiliates.....						21,819,080,172	812,835,248	877,233,189	.75,454,555	0	0	0	0

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

20370....	51-0434766....	02/01/2012	AXIS REINSURANCE COMPANY.....	NY.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
16535....	36-4233459....	02/01/2012	ZURICH AMERICAN INSURANCE COMPANY.....	NY.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
1999999....	Total - General Account - Unauthorized - Non-Affiliates - U.S. Non-Affiliates.....						0	0	0	0	0	0	0	0

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

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		
00000....	AA-3194128...	02/01/2012	ALLIED WORLD ASSURANCE COMPANY LIMITED...	BMU.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
00000....	AA-1340028...	02/01/2012	DEVK RUCKVERSICHERUNGS-UND BETELLIGUNGS-AG	DEU.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
00000....	AA-5340310...	02/01/2012	GENERAL INSURANCE CORPORATION OF INDIA	IND.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
00000....	AA-3190060...	02/01/2012	HANNOVER RE (BERMUDA) LIMITED	BMU.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
00000....	AA-1126033...	04/01/2016	LLOYD'S UNDERWRITER SYNDICATE NO. 033HIS	GBR.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
00000....	AA-1127200...	02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 1200AMA	GBR.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
00000....	AA-1127206...	02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 1206ATL	GBR.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
00000....	AA-1127301...	04/01/2016	LLOYD'S UNDERWRITER SYNDICATE NO. 1301SCC	GBR.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
00000....	AA-1127861...	02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 1861ANV	GBR.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
00000....	AA-1120064...	04/01/2014	LLOYD'S UNDERWRITER SYNDICATE NO. 1919 CVS	GBR.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
00000....	AA-1120124...	02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 1945SII	GBR.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
00000....	AA-1120106...	04/01/2016	LLOYD'S UNDERWRITER SYNDICATE NO. 1969APL	GBR.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
00000....	AA-1128987...	04/01/2016	LLOYD'S UNDERWRITER SYNDICATE NO. 2987BRT	GBR.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
00000....	AA-1129000...	04/01/2014	LLOYD'S UNDERWRITER SYNDICATE NO. 3000 MKL	GBR.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
00000....	AA-1120055...	02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 3623AFB	GBR.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
00000....	AA-1126005...	02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 4000PEM	GBR.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
00000....	AA-1120075...	02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 4020ARK	GBR.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
00000....	AA-1126006...	04/01/2013	LLOYD'S UNDERWRITER SYNDICATE NO. 4472 LIB	GBR.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
00000....	AA-1120090...	04/01/2016	LLOYD'S UNDERWRITER SYNDICATE NO. 4711ASP	GBR.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
00000....	AA-1120163...	04/01/2016	LLOYD'S UNDERWRITER SYNDICATE NO. 5678VSM	GBR.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
00000....	AA-1120048...	04/01/2016	LLOYD'S UNDERWRITER SYNDICATE NO. 5820ANV	GBR.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
00000....	AA-1840000...	02/01/2012	MAPFRE RE COMPANIADA REASERGUROS S A	ESP.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
00000....	AA-1840680...	02/01/2012	NACIONAL DE REASERGUROS SA	ESP.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
00000....	AA-1120159...	04/01/2016	TRANSRE LONDON LIMITED	GBR.....	CAT/I.....	OL.....	0	0	0	0	0	0	0	0
2099999.	Total - General Account - Unauthorized - Non-Affiliates - Non-U.S. Non-Affiliates						0	0	0	0	0	0	0	0
2199999.	Total - General Account - Unauthorized - Non-Affiliates						0	0	0	0	0	0	0	0
2299999.	Total - General Account - Unauthorized						21,819,080,172	812,835,248	877,233,189	75,454,555	0	0	0	0
3499999.	Total - General Account - Authorized, Unauthorized and Certified						25,755,945,076	863,080,765	931,288,937	98,975,976	0	0	0	0
6999999.	Total U.S.						25,755,945,076	863,080,765	931,288,937	98,975,976	0	0	0	0
7099999.	Total Non-U.S.						0	0	0	0	0	0	0	0
9999999.	Total						25,755,945,076	863,080,765	931,288,937	98,975,976	0	0	0	0

SCHEDULE S - PART 3 - SECTION 2

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

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

NONE

SCHEDULE S - PART 4

Reinsurance Ceded To Unauthorized Companies

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Reserve Credit Taken	6 Paid and Unpaid Losses Recoverable (Debit)	7 Other Debits	8 Total (Cols. 5 + 6 + 7)	9 Letters of Credit	10 Issuing or Confirming Bank Reference Number (a)	11 Trust Agreements	12 Funds Deposited by and Withheld from Reinsurers	13 Other	14 Miscellaneous Balances (Credit)	15 Sum of Cols. 9 + 11 + 12 + 13 + 14 But Not in Excess of Col. 8	
General Account - Life and Annuity - Affiliates - U.S. - Captive															
14355.....	14-1903564.	.12/31/2004	AXA RE ARIZONA COMPANY.....812,835,24852,992,7964,099,716869,927,761225,000,000	0001.....620,026,41600082,859,320869,927,761
0199999.	Total - General Account - Life and Annuity - Affiliates - U.S. - Captive.....		.....812,835,248	.....52,992,796	.....4,099,716	....869,927,761	....225,000,000	.....XXX.....	....620,026,416	.....0	.....0	.....0	....82,859,320	....869,927,761
0399999.	Total - General Account - Life and Annuity - Affiliates - U.S. - Total.....		.....812,835,248	.....52,992,796	.....4,099,716	....869,927,761	....225,000,000	.....XXX.....	....620,026,416	.....0	.....0	.....0	....82,859,320	....869,927,761
General Account - Life and Annuity - Affiliates - Non-U.S. - Other															
20370.....	51-0434766.	.02/01/2012	AXIS REINSURANCE COMPANY.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
16535.....	36-4233459.	.02/01/2012	ZURICH AMERICAN INSURANCE COMPANY.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
0599999.	Total - General Account - Life and Annuity - Affiliates - Non-U.S. - Other.....		.....0	.....0	.....0	.....0	.....0	.....XXX.....	.....0	.....0	.....0	.....0	.....0	.....0
0699999.	Total - General Account - Life and Annuity - Affiliates - Non-U.S. - Total.....		.....0	.....0	.....0	.....0	.....0	.....XXX.....	.....0	.....0	.....0	.....0	.....0	.....0
0799999.	Total - General Account - Life and Annuity - Affiliates.....		.....812,835,248	.....52,992,796	.....4,099,716	....869,927,761	....225,000,000	.....XXX.....	....620,026,416	.....0	.....0	.....0	....82,859,320	....869,927,761
General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates															
00000.....	AA-1120841	.02/01/2012	AIG EUROPE LTD.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
00000.....	AA-3194128	.02/01/2012	ALLIED WORLD ASSURANCE COMPANY LIMITED.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
00000.....	AA-1340028	.02/01/2012	DEVK RUCKVERSICHERUNGS-UND BETELLIGUNGS-AG.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
00000.....	AA-5340310	.02/01/2012	GENERAL INSURANCE CORPORATION OF INDIA.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
00000.....	AA-3190060	.02/01/2012	HANNOVER RE (BERMUDA) LIMITED.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
00000.....	AA-1126033	.04/01/2016	LLOYD'S UNDERWRITER SYNDICATE NO. 033HIS.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
00000.....	AA-1127200	.02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 1200AMA.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
00000.....	AA-1127206	.02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 1206ATL.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
00000.....	AA-1127301	.02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 1301SCC.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
00000.....	AA-1127861	.02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 1861ANV.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
00000.....	AA-1120064	.04/01/2014	LLOYD'S UNDERWRITER SYNDICATE NO. 1919 CVS.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
00000.....	AA-1120124	.02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 1945SII.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
00000.....	AA-1120103	.02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 1967WRB.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
00000.....	AA-1120106	.04/01/2016	LLOYD'S UNDERWRITER SYNDICATE NO. 1969APL.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
00000.....	AA-1128987	.04/01/2016	LLOYD'S UNDERWRITER SYNDICATE NO. 2987BRT.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
00000.....	AA-1129000	.04/01/2014	LLOYD'S UNDERWRITER SYNDICATE NO. 3000 MKL.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
00000.....	AA-1120055	.02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 3623AFB.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
00000.....	AA-1126005	.02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 4000PEM.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
00000.....	AA-1120075	.02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 4020ARK.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
00000.....	AA-1126006	.04/01/2013	LLOYD'S UNDERWRITER SYNDICATE NO. 4472 LIB.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
00000.....	AA-1120090	.04/01/2016	LLOYD'S UNDERWRITER SYNDICATE NO. 4711ASP.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
00000.....	AA-1120163	.04/01/2016	LLOYD'S UNDERWRITER SYNDICATE NO. 5678VSM.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
00000.....	AA-1120048	.04/01/2016	LLOYD'S UNDERWRITER SYNDICATE NO. 5820ANV.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
00000.....	AA-1840000	.02/01/2012	MAPFRE RE COMPANIA DE REASERGUROS S.A.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
00000.....	AA-1840680	.02/01/2012	NACIONAL DE REASERGUROS SA.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
00000.....	AA-1120159	.04/01/2016	TRANSRE LONDON LIMITED.....	.....0	.....0	.....0	.....0	.....0	0.....	.....0	.....0	.....0	.....0	.....0
0999999.	Total - General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates.....		.....0	.....0	.....0	.....0	.....0	.....XXX.....	.....0	.....0	.....0	.....0	.....0	.....0

SCHEDULE S - PART 4

Reinsurance Ceded To Unauthorized Companies

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Reserve Credit Taken	6 Paid and Unpaid Losses Recoverable (Debit)	7 Other Debits	8 Total (Cols. 5 + 6 + 7)	9 Letters of Credit	10 Issuing or Confirming Bank Reference Number (a)	11 Trust Agreements	12 Funds Deposited by and Withheld from Reinsurers	13 Other	14 Miscellaneous Balances (Credit)	15 Sum of Cols. 9 + 11 + 12 + 13 + 14 But Not in Excess of Col. 8
1099999.	Total - General Account - Life and Annuity - Non-Affiliates.....			0	0	0	0	0	XXX.....	0	0	0	0	0
1199999.	Total - General Account - Life and Annuity.....			812,835,248	52,992,796	4,099,716	869,927,761	225,000,000	XXX.....	620,026,416	0	0	82,859,320	869,927,761
2399999.	Total - General Account.....			812,835,248	52,992,796	4,099,716	869,927,761	225,000,000	XXX.....	620,026,416	0	0	82,859,320	869,927,761
3599999.	Total - U.S.....			812,835,248	52,992,796	4,099,716	869,927,761	225,000,000	XXX.....	620,026,416	0	0	82,859,320	869,927,761
3699999.	Total - Non-U.S.....			0	0	0	0	0	XXX.....	0	0	0	0	0
9999999.	Total.....			812,835,248	52,992,796	4,099,716	869,927,761	225,000,000	XXX.....	620,026,416	0	0	82,859,320	869,927,761

(a)	Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name		Letters of Credit Amount
001.....	1.....	026009593.....		Bank of America, N.A.....		27,142,857
001.....	1.....	026002574.....		Barclays Bank PLC.....		9,693,878
001.....	1.....	026007689.....		BNP Paribas, New York Branch.....		27,142,857
001.....	1.....	021000089.....		Citibank, N.A.....		23,265,306
001.....	1.....	026008044.....		Commerzbank Aktiengesellschaft, New York Branch.....		15,000,000
001.....	1.....	026008073.....		Credit Aghcole Corporate and Investment Bank, New York Branch.....		27,142,857
001.....	1.....	026003780.....		Deutsche Bank AG, New York Branch.....		17,448,980
001.....	1.....	021000021.....		JPMorgan Chase Bank, N.A., Paris Branch.....		31,020,408
001.....	1.....	026002545.....		Landesbank Hessen- Thuringen Girozentrale, New York Branch.....		12,500,000
001.....	1.....	026004307.....		Mizuho Corporate Bank, Ltd. acting through its New York Branch.....		17,448,980
001.....	1.....	011001438.....		State Street Bank and Trust Company, Boston MA.....		7,500,000
001.....	1.....	021000018.....		The Bank of New York Mellon.....		9,693,878

SCHEDULE S - PART 5

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Domi- ciliary Juri- siction	6 Certified Rein- surer Rating	7 1 thru 6)	8 Percent Collateral Required for Full Credit (0% - 100%)	9 Reserve Credit Taken	10 Paid and Unpaid Losses Recoverable (Debit)	11 Other Debits	12 Total Recoverable Reserve Credit Taken (Cols. 9 + 10 + 11)	13 Miscellaneous Balances (Credit)	14 Net Obligation Subject to Collateral (Col. 12 - 13)	15 Dollar Amount of Collateral Required for Full Credit (Col. 14 x Col. 8)	Collateral						23 Percent of Collateral Provided for Net Obligation Subject to Collateral (Col. 23 / Col. 8, not to Exceed 100%)	24 Percent Credit Allowed on Net Obligation Subject to Collateral (Col. 22 / Col. 14)	25 Amount of Credit Allowed for Net Obligation Subject to Collateral (Col. 22 / Col. 21)	26 Liability for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 14 - Col. 25)	
															16	17	18	19	20	21	22				

NONE

U.S. FINANCIAL LIFE INSURANCE COMPANY
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.....	98,976	111,700	133,015	135,625	149,825
2. Commissions and reinsurance expense allowances.....	19,289	21,814	24,178	27,997	29,913
3. Contract claims.....	168,530	165,578	170,641	171,790	195,949
4. Surrender benefits and withdrawals for life contracts.....	204	621	273	181	153
5. Dividends to policyholders.....	0	0	0	0	0
6. Reserve adjustments on reinsurance ceded.....	0	0	0	0	0
7. Increase in aggregate reserves for life and accident and health contracts.....	(68,208)	(77,883)	(54,356)	(42,746)	(21,383)
B. BALANCE SHEET ITEMS					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected.....	56,335	66,707	74,913	74,150	79,471
9. Aggregate reserves for life and accident and health contracts.....	863,080	931,289	1,009,172	1,063,528	1,073,300
10. Liability for deposit-type contracts.....	0	0	0	0	0
11. Contract claims unpaid.....	21,562	21,404	32,078	27,396	36,302
12. Amounts recoverable on reinsurance.....	43,441	42,121	34,649	38,945	50,065
13. Experience rating refunds due or unpaid.....	0	0	0	0	0
14. Policyholders' dividends (not included in Line 10).....	0	0	0	0	0
15. Commissions and reinsurance expense allowances due.....	4,265	4,819	5,589	6,046	6,393
16. Unauthorized reinsurance offset.....	0	0	0	0	0
17. Offset for reinsurance with certified reinsurers.....	0	0	0	0	0
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
18. Funds deposited by and withheld from (F).....	0	0	0	0	0
19. Letters of credit (L).....	225,000	335,000	340,000	440,000	440,000
20. Trust agreements (T).....	620,026	602,495	593,611	567,277	576,560
21. Other (O).....	0	0	0	0	0
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
22. Multiple beneficiary trust.....	0	0	0	0	0
23. Funds deposited by and withheld from (F).....	0	0	0	0	0
24. Letters of credit (L).....	0	0	0	0	0
25. Trust agreements (T).....	0	0	0	0	0
26. Other (O).....	0	0	0	0	0

U.S. FINANCIAL LIFE INSURANCE COMPANY
SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12).....	523,063,657	0	523,063,657
2. Reinsurance (Line 16).....	50,086,634	(50,086,634)	0
3. Premiums and considerations (Line 15).....	1,179,620	63,901,006	65,080,626
4. Net credit for ceded reinsurance.....	XXX.....	849,174,580	849,174,580
5. All other admitted assets (balance).....	24,826,126	0	24,826,126
6. Total assets excluding Separate Accounts (Line 26).....	599,156,037	862,988,952	1,462,144,989
7. Separate Account assets (Line 27).....	0	0	0
8. Total assets (Line 28).....	599,156,037	862,988,952	1,462,144,989
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9. Contract reserves (Lines 1 and 2).....	446,406,127	863,080,765	1,309,486,892
10. Liability for deposit-type contracts (Line 3).....	825,803	0	825,803
11. Claim reserves (Line 4).....	10,826,451	21,562,408	32,388,859
12. Policyholder dividends/reserves (Lines 5 through 7).....	0	0	0
13. Premium & annuity considerations received in advance (Line 8).....	621,459	0	621,459
14. Other contract liabilities (Line 9).....	22,550,859	(21,654,221)	896,638
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount).....	0	0	0
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount).....	0	0	0
17. Reinsurance with certified reinsurers (Line 24.02 inset amount).....	0	0	0
18. Funds held under reinsurance treaties with certified reinsurers (Line 24.03 inset amount).....	0	0	0
19. All other liabilities (balance).....	9,128,306	0	9,128,306
20. Total liabilities excluding Separate Accounts (Line 26).....	490,359,005	862,988,952	1,353,347,957
21. Separate Account liabilities (Line 27).....	0	0	0
22. Total liabilities (Line 28).....	490,359,005	862,988,952	1,353,347,957
23. Capital & surplus (Line 38).....	108,797,032	XXX.....	108,797,032
24. Total liabilities, capital & surplus (Line 39).....	599,156,037	862,988,952	1,462,144,989
NET CREDIT FOR CEDED REINSURANCE			
25. Contract reserves.....	863,080,765		
26. Claim reserves.....	21,562,408		
27. Policyholder dividends/reserves.....	0		
28. Premium & annuity considerations received in advance.....	0		
29. Liability for deposit-type contracts.....	0		
30. Other contract liabilities.....	(21,654,221)		
31. Reinsurance ceded assets.....	50,086,634		
32. Other ceded reinsurance recoverables.....	0		
33. Total ceded reinsurance recoverables.....	913,075,586		
34. Premiums and considerations.....	63,901,006		
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.....	63,901,006		
41. Total net credit for ceded reinsurance.....	849,174,580		

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	2,948,283	0	0	0	0	2,948,283
2. Alaska.....AK	143,418	0	0	0	0	143,418
3. Arizona.....AZ	1,699,218	0	0	0	0	1,699,218
4. Arkansas.....AR	1,233,997	0	0	0	0	1,233,997
5. California.....CA	10,362,385	0	0	0	0	10,362,385
6. Colorado.....CO	2,333,348	0	0	0	0	2,333,348
7. Connecticut.....CT	2,452,046	0	0	0	0	2,452,046
8. Delaware.....DE	1,176,919	0	0	0	0	1,176,919
9. District of Columbia.....DC	90,822	0	0	0	0	90,822
10. Florida.....FL	9,111,233	0	0	0	0	9,111,233
11. Georgia.....GA	4,708,280	0	0	0	0	4,708,280
12. Hawaii.....HI	340,683	0	0	0	0	340,683
13. Idaho.....ID	431,234	0	0	0	0	431,234
14. Illinois.....IL	6,176,019	6,500	0	0	0	6,182,519
15. Indiana.....IN	2,584,377	2,175	0	0	0	2,586,552
16. Iowa.....IA	1,571,132	0	0	0	0	1,571,132
17. Kansas.....KS	1,866,346	0	0	0	0	1,866,346
18. Kentucky.....KY	2,410,728	0	0	0	0	2,410,728
19. Louisiana.....LA	1,461,114	0	0	0	0	1,461,114
20. Maine.....ME	594,482	0	0	0	0	594,482
21. Maryland.....MD	2,440,912	0	0	0	0	2,440,912
22. Massachusetts.....MA	3,797,663	0	0	0	0	3,797,663
23. Michigan.....MI	7,689,927	6,695	0	0	0	7,696,622
24. Minnesota.....MN	5,339,847	0	0	0	0	5,339,847
25. Mississippi.....MS	2,168,999	0	0	0	0	2,168,999
26. Missouri.....MO	2,954,555	6,678	0	0	0	2,961,233
27. Montana.....MT	502,330	0	0	0	0	502,330
28. Nebraska.....NE	1,100,370	0	0	0	0	1,100,370
29. Nevada.....NV	640,338	0	0	0	0	640,338
30. New Hampshire.....NH	581,104	0	0	0	0	581,104
31. New Jersey.....NJ	4,213,754	0	0	0	0	4,213,754
32. New Mexico.....NM	567,578	0	0	0	0	567,578
33. New York.....NY	1,165,233	0	0	0	0	1,165,233
34. North Carolina.....NC	6,412,814	0	0	0	0	6,412,814
35. North Dakota.....ND	802,418	0	0	0	0	802,418
36. Ohio.....OH	7,913,780	0	0	0	0	7,913,780
37. Oklahoma.....OK	1,530,231	0	0	0	0	1,530,231
38. Oregon.....OR	1,211,282	0	0	0	0	1,211,282
39. Pennsylvania.....PA	7,670,352	0	0	0	0	7,670,352
40. Rhode Island.....RI	618,588	0	0	0	0	618,588
41. South Carolina.....SC	2,693,878	0	0	0	0	2,693,878
42. South Dakota.....SD	1,068,263	0	0	0	0	1,068,263
43. Tennessee.....TN	4,859,009	0	0	0	0	4,859,009
44. Texas.....TX	12,458,713	2,600	0	0	0	12,461,313
45. Utah.....UT	1,048,605	0	0	0	0	1,048,605
46. Vermont.....VT	336,518	0	0	0	0	336,518
47. Virginia.....VA	2,108,815	0	0	0	0	2,108,815
48. Washington.....WA	2,570,742	0	0	0	0	2,570,742
49. West Virginia.....WV	397,576	0	0	0	0	397,576
50. Wisconsin.....WI	2,420,511	0	0	0	0	2,420,511
51. Wyoming.....WY	306,757	0	0	0	0	306,757
52. American Samoa.....AS	0	0	0	0	0	0
53. Guam.....GU	2,487	0	0	0	0	2,487
54. Puerto Rico.....PR	3,873	0	0	0	0	3,873
55. US Virgin Islands.....VI	3,759	0	0	0	0	3,759
56. Northern Mariana Islands.....MP	0	0	0	0	0	0
57. Canada.....CAN	21,996	0	0	0	0	21,996
58. Aggregate Other Alien.....OT	40,038	0	0	0	0	40,038
59. Totals.....	143,359,679	24,648	0	0	0	143,384,327

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															
0968	AXA.....	00000...	00-0000000...	.....898427	.....898427	Paris Stock Exchange	AXA SA.....	FRA.....	UIP.....	.....	.....	.....0.000	.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA Assistance SA.....	.....	FRA.....	NIA.....	AXA.....	.....	.....100.000	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA Inter Partner Assistance - Belgium.....	.....	BEL.....	NIA.....	AXA.....	.....	.....100.000	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA France Assurance SAS.....	.....	FRA.....	NIA.....	AXA.....	.....	.....100.000	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA Corporate Solutions Assurance - France.....	.....	FRA.....	NIA.....	AXA.....	.....	.....98.750	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA Matrix Risk Consultants SA (France).....	.....	FRA.....	NIA.....	AXA Corporate Solutions Assurance - Fr.....	.....	.....100.000	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA Matrix Risk Consultants Shanghai Co.Ltd.....	.....	CHN.....	NIA.....	AXA Matrix Risk Consultants SA (France).....	.....	.....100.000	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA Matrix Risk Consultants India Pvt Ltd.....	.....	IND.....	NIA.....	AXA Matrix Risk Consultants SA (France).....	.....	.....100.000	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA Matrix Risk Consultants US Inc.....	.....	USA.....	NIA.....	AXA Matrix Risk Consultants SA (France).....	.....	.....100.000	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA Matrix Risk Consultants Brazil Ltd.....	.....	BRA.....	NIA.....	AXA Matrix Risk Consultants SA (France).....	.....	.....100.000	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA Group Solutions - France.....	.....	FRA.....	NIA.....	AXA.....	.....	.....100.000	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA Assistance Inc. USA.....	.....	USA.....	NIA.....	AXA.....	.....	.....100.000	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA Investment Managers.....	.....	FRA.....	NIA.....	AXA.....	.....	.....73.770	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA Investment Managers - France.....	.....	FRA.....	NIA.....	AXA.....	.....	.....100.000	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA Investment Managers Holdings US.....	.....	USA.....	NIA.....	AXA Investment Managers - France.....	.....	.....100.000	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA Rosenberg Group LLC.....	.....	USA.....	NIA.....	AXA Investment Managers.....	.....	.....100.000	AXA.....	.....	.....N.....0.....
0000	00000...	22-3624513...	.....1459848	.....1459848	AXA IM Rose Inc.....	.....	USA.....	NIA.....	AXA Investment Managers.....	.....	.....100.000	AXA.....	.....	.....N.....0.....
0000	00000...	13-4064930...	.....1109448	.....1109448	AllianceBernstein LP.....	.....	USA.....	NIA.....	AXA IM Rose Inc.....	.....	.....14.970	AXA.....	.....	.....Y.....0.....
0000	00000...	.....	.....0	.....0	AXA Mediterranean Holdings, S.A.U.....	.....	ESP.....	NIA.....	AXA.....	.....	.....100.000	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA Millésimes.....	.....	PRT.....	NIA.....	AXA.....	.....	.....42.340	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA Real Estate Investment Managers.....	.....	FRA.....	NIA.....	AXA.....	.....	.....100.000	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA Technology Services.....	.....	FRA.....	IA.....	AXA.....	.....	.....100.000	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA Belgium.....	.....	BEL.....	IA.....	AXA.....	.....	.....100.000	AXA.....	.....	.....N.....0.....
0000	00000...	13-3623351...	.....0	.....888002	AXA Financial, Inc.....	.....	USA.....	UIP.....	AXA Belgium.....	.....	.....0.460	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA Life Insurance Company Ltd. - Hong Kong	.....	CHN.....	IA.....	AXA.....	.....	.....100.000	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA General Ins. Hong Kong Ltd.- Hong Kong	.....	CHN.....	IA.....	AXA.....	.....	.....100.000	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA General Insurance China Ltd.....	.....	CHN.....	IA.....	AXA.....	.....	.....100.000	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA China - France.....	.....	FRA.....	NIA.....	AXA.....	.....	.....51.000	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA-Mimentals Assurance Company Limited...	.....	CHN.....	IA.....	AXA China - France.....	.....	.....51.000	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA Societe Beaujon.....	.....	FRA.....	NIA.....	AXA.....	.....	.....100.000	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA Pojistovna a.s.....	.....	CZE.....	IA.....	AXA Societe Beaujon.....	.....	.....100.000	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA Zivtni Pojistovna a.s.....	.....	CZE.....	IA.....	AXA Societe Beaujon.....	.....	.....100.000	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA Penzijni Fond a.s.....	.....	CZE.....	IA.....	AXA Societe Beaujon.....	.....	.....99.980	AXA.....	.....	.....N.....0.....
0000	00000...	.....	.....0	.....0	AXA Bzitosito Zrt.....	.....	HUN.....	IA.....	AXA Societe Beaujon.....	.....	.....100.000	AXA.....	.....	.....N.....0.....

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)	*
0000		00000...		0	0	AXA Zycie Towarzystwo Ubezpieczen S.A.	POL	IA	AXA Societe Beaujon	Ownership	90.240	AXA	N	0	
0000		00000...		0	0	AXA Powszechnie Towarzystwo Emerytalne S.A.	POL	IA	AXA Societe Beaujon	Ownership	100.000	AXA	N	0	
0000		00000...		0	0	AXA Towarzystwo Ubezpieczen i Reasekuracji S.A.	POL	IA	AXA Societe Beaujon	Ownership	100.000	AXA	N	0	
0000		00000...		0	0	AXA Life Insurance SA	ROU	IA	AXA Societe Beaujon	Ownership	99.900	AXA	N	0	
0000		00000...		0	0	AXA Business Services Private Limited	IND	NIA	AXA Societe Beaujon	Ownership	99.990	AXA	N	0	
0000		00000...		0	0	Compagnie Financiere de Paris	FRA	IA	AXA	Ownership	100.000	AXA	N	0	
0000		00000...		0	0	AXA France Assurance	FRA	IA	AXA	Ownership	100.000	AXA	N	0	
0000		00000...		0	0	AXA Corporate Solutions Assurance	FRA	IA	AXA France Assurance	Ownership	98.750	AXA	N	0	
0000		00000...		0	0	AXA Global Life	FRA	IA	AXA	Ownership	100.000	AXA	N	0	
0000		00000...		0	0	AXA Global P&C	FRA	IA	AXA	Ownership	100.000	AXA	N	0	
0000		00000...		0	0	AXA Liabilities Managers- France	FRA	IA	AXA	Ownership	99.900	AXA	N	0	
0000		00000...		0	0	AXA Liabilities Managers-US	USA	IA	AXA Liabilities Managers- France	Ownership	100.000	AXA	N	0	
0000		00000...		0	0	AXA DBIO GP S.à.r.l.	LUX	IA	AXA Liabilities Managers- France	Ownership	100.000	AXA	N	0	
0000		00000...		0	0	AXA DBIO S.C.A.	LUX	IA	AXA DBIO GP S.à.r.l.	Ownership	9.740	AXA	N	0	
0000		00000...		0	0	GLOBALE Ruckversicherungs-AG	CHE	IA	AXA DBIO S.C.A.	Ownership	100.000	AXA	N	0	
0000		00000...		0	0	GLOBAL Group of Australia Pty. Ltd	AUS	IA	AXA DBIO S.C.A.	Ownership	100.000	AXA	N	0	
						GLOBAL Life Reinsurance Company of Australia	AUS	IA	GLOBAL Group of Australia Pty. Ltd	Ownership	100.000	AXA	N	0	
0000		00000...	13-3907460...	0	0	GLOBAL U.S. Holdings, Inc	USA	NIA	AXA DBIO S.C.A.	Ownership	100.000	AXA	N	0	
0968		21032...	13-5009848...	0	0	GLOBAL Reinsurance Corporation of America	USA	IA	GLOBAL U.S. Holdings, Inc	Ownership	100.000	AXA	N	0	
0000		00000...		0	0	GLOBAL Reinsurance Canada Holdings Inc	CAN	NIA	AXA DBIO S.C.A.	Ownership	100.000	AXA	N	0	
0000		00000...		0	0	GLOBAL Reinsurance Company	CAN	IA	GLOBAL Reinsurance Canada Holdings Inc	Ownership	100.000	AXA	N	0	
0000		00000...	AA-1320035...	0	0	Colisee Re - France	FRA	IA	AXA	Ownership	99.900	AXA	N	0	
0000		00000...		0	0	AXA DBIO S.C.A.	LUX	NIA	Colisee Re - France	Ownership	21.670	AXA	N	0	
0000		00000...	36-3044045...	0	1456276	AXA America Corporate Solutions, Inc	USA	NIA	Colisee Re - France	Ownership	21.006	AXA	N	0	
0000		00000...		0	0	AXA Konzern AG	DEU	NIA	AXA	Ownership	100.000	AXA	N	0	
0000		00000...		0	0	AXA Investment Managers	FRA	NIA	AXA Konzern AG	Ownership	5.200	AXA	N	0	
0000		00000...		0	0	WinCom Versicherungs-Holding AG	DEU	NIA	AXA Konzern AG	Ownership	100.000	AXA	N	0	
				0	0	DBV Deutsche Beamtenversicherung Leben AG	DEU	IA	WinCom Versicherungs-Holding AG	Ownership	94.900	AXA	N	0	
				0	0	DBV Deutsche Beamtenversicherung AG	DEU	IA	WinCom Versicherungs-Holding AG	Ownership	100.000	AXA	N	0	
				0	0	DBV Deutsche Lebensversicherung AG	DEU	IA	WinCom Versicherungs-Holding AG	Ownership	100.000	AXA	N	0	
				0	0	AXA Versicherung AG	DEU	IA	AXA Konzern AG	Ownership	100.000	AXA	N	0	
				0	0	AXA ART Versicherung AG - Cologne	DEU	IA	AXA Konzern AG	Ownership	100.000	AXA	N	0	

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? *	
0000	00000...	00000...	00000...	00000...	00000...	00000...	AXA Art Holdings Inc.	USA	NIA	AXA ART Versicherung AG - Cologne	Ownership	100.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	Fine Art Service International Inc.	USA	NIA	AXA Art Holdings Inc.	Ownership	100.000	AXA	N	0
0000	29530...	13-3368745...	00000...	00000...	00000...	00000...	AXA Art Insurance Corporation	USA	IA	AXA Art Holdings Inc.	Ownership	100.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	AXA Szolgaltato Kft.	HUN	IA	AXA	Ownership	100.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	AXA India Holdings	IND	NIA	AXA	Ownership	100.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	Bharti AXA Life Insurance Company	IND	IA	AXA India Holdings	Ownership	22.220	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	Bharti AXA General Insurance	IND	IA	AXA	Ownership	100.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	National Mutual International Pty Limited	AUS	IA	AXA	Ownership	100.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	AXA-AFFIN Life Insurance Berhad	MYS	IA	National Mutual International Pty Limited	Ownership	49.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	AXA Financial Services (Singapore) Pte Ltd	SGP	NIA	National Mutual International Pty Limited	Ownership	100.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	ipac financial planning Taiwan Limited	TWN	NIA	National Mutual International Pty Limited	Ownership	100.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	AXA Insurance Singapore Pte Ltd	SGP	IA	National Mutual International Pty Limited	Ownership	100.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	AXA Asia Regional Centre Pte Ltd	SGP	IA	National Mutual International Pty Limited	Ownership	100.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	P.T. Asuransi AXA Indonesia	IDN	IA	AXA	Ownership	80.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	P.T. Life Indonesia	IDN	IA	AXA	Ownership	80.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	AXA Financial Services (Singapore) Pte Ltd	SGP	IA	AXA	Ownership	100.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	AXA Life Europe	IRL	IA	AXA	Ownership	100.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	AXA Global Distributors (Ireland) Limited	IRL	NIA	AXA	Ownership	100.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	AXA Ireland Limited	IRL	IA	AXA	Ownership	100.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	AXA mps Financial Ltd	IRL	IA	AXA	Ownership	100.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	AXA Italia S.p.A.	ITA	NIA	AXA	Ownership	98.240	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	AXA Assicurazioni S.p.A.	ITA	IA	AXA Italia S.p.A.	Ownership	98.110	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	AXA Japan Holding Co., Ltd	JPN	NIA	AXA	Ownership	78.670	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	AXA Life Insurance Co.,	JPN	IA	AXA Japan Holding Co., Ltd	Ownership	100.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	AXA General Insurance Co., Ltd	JPN	IA	AXA Japan Holding Co., Ltd	Ownership	100.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	AXA Collection Services Co. Ltd	JPN	IA	AXA Japan Holding Co., Ltd	Ownership	100.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	Nextia Life Insurance Co., Ltd	JPN	IA	AXA Japan Holding Co., Ltd	Ownership	97.250	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	AXA Seguros, S.A. de CV	MEX	IA	AXA	Ownership	99.940	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	Voltaire Participacoes	BRA	IA	AXA	Ownership	100.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	AXA Luxembourg SA	LUX	IA	AXA	Ownership	99.990	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	Finance Solutions S.ar.l. (Finso)	LUX	NIA	AXA	Ownership	100.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	Matignon Finance S.A.	LUX	NIA	AXA	Ownership	100.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	AXA-AFFIN General Insurance Berhad	MYS	IA	AXA	Ownership	42.400	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	Philippine AXA Life Insurance Corporation	MYS	IA	AXA	Ownership	45.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	AXA Middle East SAL Lebanon	LBN	NIA	AXA	Ownership	49.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	AXA Holding SAL	LBN	NIA	AXA	Ownership	100.000	AXA	N	0
0000	00000...	00000...	00000...	00000...	00000...	00000...	AXA Gulf Holding W.L.L.	BHR	NIA	AXA	Ownership	95.000	AXA	N	0

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? *	
0000	00000...		0	0		AXA Holding Maroc.....	MAR.....	NIA.....	AXA.....		Ownership.....	....100.000	AXA.....	.N.....	0.....
0000	00000...		0	0		AXA Assurance Maroc.....	MAR.....	IA.....	AXA Holding Maroc.....		Ownership.....	....100.000	AXA.....	.N.....	0.....
0000	00000...		0	0		Seguro Directo Gere Compania de Seguros SA.....	PRT.....	IA.....	AXA.....		Ownership.....	....100.000	AXA.....	.N.....	0.....
0000	00000...		0	0		AXA Portugal Companhia de Seguros SA.....	PRT.....	IA.....	AXA.....		Ownership.....	....83.020	AXA.....	.N.....	0.....
0000	00000...		0	0		AXA Portugal Companhia de Seguros Vida SA.....	PRT.....	IA.....	AXA.....		Ownership.....	....87.630	AXA.....	.N.....	0.....
0000	00000...		0	0		AXA Services s.r.o.....	SVK.....	NIA.....	AXA.....		Ownership.....	....100.000	AXA.....	.N.....	0.....
0000	00000...		0	0		EX-SR a.s. v likvdacil.....	SVK.....	IA.....	AXA.....		Ownership.....	....100.000	AXA.....	.N.....	0.....
0000	00000...		0	0		AXA d.s.s., a.s.....	SVK.....	IA.....	AXA.....		Ownership.....	....100.000	AXA.....	.N.....	0.....
0000	00000...		0	0		AXA d.d.s., a.s.....	SVK.....	IA.....	AXA.....		Ownership.....	....100.000	AXA.....	.N.....	0.....
0000	00000...		0	0		AXA General Insurance.....	KOR.....	IA.....	AXA.....		Ownership.....	....94.130	AXA.....	.N.....	0.....
0000	00000...		0	0		AXA Mediterranen Holding, S.A.U.....	ESP.....	NIA.....	AXA.....		Ownership.....	....100.000	AXA.....	.N.....	0.....
0000	00000...		0	0		Hilo Direct, Seguros y Reaseguros S.A.....	ESP.....	IA.....	AXA Mediterranen Holding, S.A.U.....		Ownership.....	....99.990	AXA.....	.N.....	0.....
52.3															
0000	00000...		0	0		AXA MEDLA IT & Local Support Services, S.A.....	ESP.....	NIA.....	AXA Mediterranen Holding, S.A.U.....		Ownership.....	....100.000	AXA.....	.N.....	0.....
0000	00000...		0	0		AXA Regional Services, S.A.....	ESP.....	NIA.....	AXA Mediterranen Holding, S.A.U.....		Ownership.....	....100.000	AXA.....	.N.....	0.....
0000	00000...		0	0		AXA Seguros Generales, S.A. de Seguros y Reaseguros.....	ESP.....	IA.....	AXA Mediterranen Holding, S.A.U.....		Ownership.....	....99.890	AXA.....	.N.....	0.....
0000	00000...		0	0		AXA Pensiones, S.A. E.G.F.P.....	ESP.....	IA.....	AXA Mediterranen Holding, S.A.U.....		Ownership.....	....100.000	AXA.....	.N.....	0.....
0000	00000...		0	0		AXA Tigris, S.A.....	ESP.....	IA.....	AXA Mediterranen Holding, S.A.U.....		Ownership.....	....100.000	AXA.....	.N.....	0.....
0000	00000...		0	0		AXA Vida, S.A.de Seguros y Reaseguros.....	ESP.....	IA.....	AXA Mediterranen Holding, S.A.U.....		Ownership.....	....99.800	AXA.....	.N.....	0.....
0000	00000...		0	0		AXA Senegal.....	SEN.....	IA.....	AXA.....		Ownership.....	....51.530	AXA.....	.N.....	0.....
0000	00000...		0	0		AXA Cote d'Ivoire.....	CIV.....	IA.....	AXA.....		Ownership.....	....78.640	AXA.....	.N.....	0.....
0000	00000...		0	0		AXA Cameroun @.....	CMR.....	IA.....	AXA.....		Ownership.....	....99.900	AXA.....	.N.....	0.....
0000	00000...		0	0		AXA Gabon.....	GAB.....	IA.....	AXA.....		Ownership.....	....86.490	AXA.....	.N.....	0.....
0000	00000...		0	0		AXA Versicherungen AG.....	CHE.....	IA.....	AXA.....		Ownership.....	....100.000	AXA.....	.N.....	0.....
0000	00000...		0	0		AXA Leben AG.....	CHE.....	IA.....	AXA Versicherungen AG.....		Ownership.....	....100.000	AXA.....	.N.....	0.....
0000	00000...		0	0		Rechtsschutz AG.....	CHE.....	IA.....	AXA Versicherungen AG.....		Ownership.....	....66.670	AXA.....	.N.....	0.....
0000	00000...		0	0		AXA Insurance Public Co. Ltd.....	THA.....	IA.....	AXA.....		Ownership.....	....24.990	AXA.....	.N.....	0.....
0000	00000...		0	0		ASM Holdings Limited.....	THA.....	NIA.....	AXA.....		Ownership.....	....48.800	AXA.....	.N.....	0.....
0000	00000...		0	0		Krungthai-AXA Life Insurance Company Limited.....	THA.....	IA.....	AXA.....		Ownership.....	....25.000	AXA.....	.N.....	0.....
0000	00000...		0	0		AXA Hayat ve Emeklilik A.S.....	TUR.....	IA.....	AXA.....		Ownership.....	....100.000	AXA.....	.N.....	0.....
0000	00000...		0	0		AXA Sigorta A.S.....	TUR.....	IA.....	AXA.....		Ownership.....	....72.550	AXA.....	.N.....	0.....
0000	00000...		0	0		AXA Insurance.....	UKR.....	IA.....	AXA.....		Ownership.....	....50.290	AXA.....	.N.....	0.....
0000	00000...		0	0		AXA Ukraine.....	UKR.....	IA.....	AXA.....		Ownership.....	....50.000	AXA.....	.N.....	0.....
0000	00000...		0	0		AXA Global Risks (Uk) Limited.....	GBR.....	IA.....	AXA.....		Ownership.....	....100.000	AXA.....	.N.....	0.....

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? *	
0000		00000...		0	0	Hordel FV.		GBR.	NIA.	AXA.	Ownership.	100.000	AXA.	N.	0.
0000		00000...		0	0	AXA Equity & Law Plc.		GBR.	IA.	AXA.	Ownership.	99.900	AXA.	N.	0.
0000		00000...		0	0	AXA UK PLC		GBR.	IA.	AXA Equity & Law Plc.	Ownership.	46.900	AXA.	N.	0.
0000		00000...		0	0	AXA UK PLC		GBR.	IA.	AXA.	Ownership.	53.100	AXA.	N.	0.
0000		00000...		0	0	Bluefin Group Limited		GBR.	IA.	AXA UK PLC.	Ownership.	100.000	AXA.	N.	0.
0000		00000...		0	0	GBI Holdings Limited		GBR.	IA.	AXA UK PLC.	Ownership.	100.000	AXA.	N.	0.
0000		00000...		0	0	Guardian Royal Exchange PLC		GBR.	NIA.	AXA UK PLC.	Ownership.	100.000	AXA.	N.	0.
0000		00000...		0	0	Architas Advisory Services Limited		GBR.	NIA.	AXA UK PLC.	Ownership.	100.000	AXA.	N.	0.
0000		00000...		0	0	Architas Multi-Manager Limited		GBR.	NIA.	AXA UK PLC.	Ownership.	100.000	AXA.	N.	0.
0000		00000...		0	0	AXA Sun Direct Limited		GBR.	IA.	AXA UK PLC.	Ownership.	100.000	AXA.	N.	0.
0000		00000...		0	0	Oudinot Participations (France)		USA.	UIP.	AXA.	Ownership.	100.000	AXA.	N.	0.
0000		00000...	81-3019204..	0	0	Broad Vista Partners, LLC		USA.	IA.	AXA.	Ownership.	30.000	AXA.	N.	0.
0000		00000...	90-0226248..	0	1333986	AXA America Holdings, Inc.		USA.	UIP.	Oudinot Participation France	Ownership.	100.000	AXA.	N.	0.
0000		00000...	30-0011728..	0	0	AXA Technology Services America Inc		USA.	NIA.	AXA America Holdings, Inc.	Ownership.	100.000	AXA.	N.	0.
0968		68365...	04-2729166..	0	0	AXA Corporate Solutions Life Reinsurance Company		USA.	IA.	AXA America Holdings, Inc.	Ownership.	100.000	AXA.	N.	0.
0968		15502...	46-5697182..	0	0	CS Life Re Company		USA.	IA.	AXA Corporate Solutions Life Reinsurance Company	Ownership.	100.000	AXA.	N.	0.
0000		00000...	36-3044045..	0	1456276	AXA America Corporate Solutions, Inc.		USA.	NIA.	AXA America Holdings, Inc.	Ownership.	78.994	AXA.	N.	0.
0968		36552...	36-2994662..	0	1456280	Coliseum Reinsurance Company		USA.	IA.	AXA America Corporate Solutions, Inc.	Ownership.	100.000	AXA.	N.	0.
0000		00000...	13-4064930..	0	1109448	AllianceBernstein LP		USA.	NIA.	Coliseum Reinsurance Company	Ownership.	3.000	AXA.	Y.	0.
0000		00000...	13-3623351..	0	888002	AXA Financial, Inc.		USA.	UIP.	Coliseum Reinsurance Company	Ownership.	0.030	AXA.	N.	0.
0000		00000...	13-4177328..	0	0	AXA Delaware LLC		USA.	NIA.	Coliseum Reinsurance Company	Ownership.	100.000	AXA.	N.	0.
0968		33022...	13-3594502..	0	0	AXA Insurance Company		USA.	IA.	AXA Delaware LLC	Ownership.	100.000	AXA.	N.	0.
0000		00000...	13-3623351..	0	888002	AXA Financial, Inc.		USA.	UIP.	AXA America Holdings, Inc.	Ownership.	99.490	AXA.	N.	0.
0000		00000...	27-0294443..	0	0	787 Holdings, LLC		USA.	NIA.	AXA Financial, Inc.	Ownership.	100.000	AXA.	N.	0.
0000		00000...	46-1106388..	0	0	1285 Holdings, LLC		USA.	NIA.	AXA Financial, Inc.	Ownership.	100.000	AXA.	N.	0.
0000		00000...	13-4064930..	0	1109448	AllianceBernstein LP		USA.	NIA.	AXA Financial, Inc.	Ownership.	15.840	AXA.	Y.	0.
0000		00000...	47-2605009..	0	0	AXA Strategic Ventures US, LLC		USA.	NIA.	AXA Financial, Inc.	Ownership.	100.000	AXA.	N.	0.
0000		00000...	52-2197822..	0	1257148	AXA Equitable Financial Services, LLC		USA.	UDP.	AXA Financial, Inc.	Ownership.	100.000	AXA.	N.	0.
0000		00000...	13-4078005..	0	0	AXA Distribution Holding Corporation		USA.	NIA.	AXA Equitable Financial Services, LLC	Ownership.	100.000	AXA.	N.	0.
0000		00000...	13-4071393..	0	33179	AXA Advisors, LLC		USA.	NIA.	AXA Distribution Holding Corporation	Ownership.	100.000	AXA.	N.	0.
0000		00000...	06-1555494..	0	1292309	AXA Network, LLC		USA.	NIA.	AXA Distribution Holding Corporation	Ownership.	100.000	AXA.	N.	0.
0000		00000...	27-1540220..	0	0	PlanConnect, LLC		USA.	NIA.	AXA Distribution Holding Corporation	Ownership.	100.000	AXA.	N.	0.
0968		14355...	14-1903564..	0	1450152	AXA RE Arizona Company		USA.	IA.	AXA Equitable Financial Services, LLC	Ownership.	100.000	AXA.	N.	0.
0968		62944...	13-5570651..	0	727920	AXA Equitable Life Insurance Company		USA.	IA.	AXA Equitable Financial Services, LLC	Ownership.	100.000	AXA.	N.	0.

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)	*
		00000...	27-5373651...	0	0		AXA Equitable Funds Management Group, LLC	USA.....	NIA.....	AXA Equitable Life Insurance Company.....	Ownership.....	100.000	AXA.....	N.....	0.....
		00000...	23-2671508...	0	0		EVSA, Inc.....	USA.....	NIA.....	AXA Equitable Life Insurance Company.....	Ownership.....	100.000	AXA.....	N.....	0.....
		00000...	81-3019204...	0	0		Broad Vista Partners, LLC.....	USA.....	NIA.....	AXA Equitable Life Insurance Company.....	Ownership.....	70.000	AXA.....	N.....	0.....
		00000...	81-4093983...	0	0		Long Creek Club Partners, LLC.....	USA.....	NIA.....	AXA Equitable Life Insurance Company.....	Ownership.....	100.000	AXA.....	N.....	0.....
		00000...	22-2766036...	0	1257149		Equitable Holdings, LLC.....	USA.....	NIA.....	AXA Equitable Life Insurance Company.....	Ownership.....	100.000	AXA.....	N.....	0.....
0968		10589...	06-1166226...	0	0		Equitable Casualty Insurance Company.....	USA.....	NIA.....	Equitable Holdings, LLC.....	Ownership.....	100.000	AXA.....	N.....	0.....
		00000...	13-3633538...	0	0		AllianceBernstein Corporation.....	USA.....	NIA.....	Equitable Holdings, LLC.....	Ownership.....	100.000	AXA.....	N.....	0.....
		00000...	52-2233674...	0	.858875		AXA Distributors, LLC.....	USA.....	NIA.....	Equitable Holdings, LLC.....	Ownership.....	100.000	AXA.....	N.....	0.....
		00000...	13-3813232...	0	0		JMR Reality services, Inc.....	USA.....	NIA.....	Equitable Holdings, LLC.....	Ownership.....	100.000	AXA.....	N.....	0.....
		00000...	13-2677213...	0	3798		ACMC, LLC.....	USA.....	NIA.....	AXA Equitable Life Insurance Company.....	Ownership.....	100.000	AXA.....	N.....	0.....
		00000...	13-4064930...	0	1109448		AllianceBernstein LP.....	USA.....	NIA.....	ACMC, LLC.....	Ownership.....	28.960	AXA.....	Y.....	0.....
0968		62880...	13-3198083...	0	1342913		AXA Equitable Life and Annuity Company.....	USA.....	IA.....	AXA Equitable Financial Services, LLC.....	Ownership.....	100.000	AXA.....	N.....	0.....
0968		78077...	86-0222062...	0	.835357		MONY Life Insurance Company of America.....	USA.....	IA.....	AXA Equitable Financial Services, LLC.....	Ownership.....	100.000	AXA.....	N.....	0.....
		00000...	13-4064930...	0	1109448		AllianceBernstein LP.....	USA.....	NIA.....	MONY Life Insurance Company of America.....	Ownership.....	0.950	AXA.....	Y.....	0.....
0968		84530...	38-2046096...	0	0		U.S. Financial Life Insurance Company.....	USA.....	RE.....	AXA Equitable Financial Services, LLC.....	Ownership.....	100.000	AXA.....	N.....	0.....
		00000...	13-3790446...	0	0		MONY International Holdings, LLC.....	USA.....	NIA.....	AXA Equitable Financial Services, LLC.....	Ownership.....	100.000	AXA.....	N.....	0.....
		00000...	98-0152046...	0	0		MONY Life Insurance Company of the Americas, Ltd.....	USA.....	IA.....	MONY International Holdings, LLC.....	Ownership.....	100.000	AXA.....	N.....	0.....
		00000...	11-3722370...	0	0		MONY Financial Services, Inc.....	USA.....	NIA.....	AXA Equitable Financial Services, LLC.....	Ownership.....	100.000	AXA.....	N.....	0.....
		00000...	31-1465146...	0	0		Financial Marketing Agency, Inc.....	USA.....	NIA.....	MONY Financial Services, Inc.....	Ownership.....	100.000	AXA.....	N.....	0.....
		00000...	13-2645490...	0	0		1740 Advisors, Inc.....	USA.....	NIA.....	MONY Financial Services, Inc.....	Ownership.....	100.000	AXA.....	N.....	0.....
		00000...	41-1941465...	0	0		Trusted Insurance Advisors General Agency Corp.....	USA.....	NIA.....	MONY Financial Services, Inc.....	Ownership.....	100.000	AXA.....	N.....	0.....
		00000...	41-1941464...	0	0		Trusted Insurance Advisors Corp.....	USA.....	NIA.....	MONY Financial Services, Inc.....	Ownership.....	100.000	AXA.....	N.....	0.....

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.....	00-0000000.....	AXA SA.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	(38,940,271).....	(38,940,271).....	0.....
00000.....	00-0000000.....	AXA Business Services Private Limited.....	0.....	0.....	0.....	0.....	14,401,225.....	0.....	0.....	14,401,225.....	0.....	0.....
00000.....	90-0226248.....	AXA America Holdings, Inc.....	66,000,000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	66,000,000.....	0.....
00000.....	13-3623351.....	AXA Financial, Inc.....	1,050,000,000.....	(1,001,019,833).....	200,000,000.....	0.....	581,495,728.....	0.....	0.....	3,416,750.....	833,892,645.....	0.....
00000.....	AA-1580027.....	AXA Life Insurance Co LTD (Japan).....	0.....	0.....	0.....	0.....	0.....	(4,095,095).....	0.....	0.....	(4,095,095).....	24,659,684.....
00000.....	30-0011728.....	AXA Technology Services America Inc.....	0.....	0.....	0.....	0.....	95,700,000.....	0.....	0.....	0.....	95,700,000.....	0.....
00000.....	52-2197822.....	AXA Equitable Financial Services, LLC.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
00000.....	06-1555494.....	AXA Network, LLC.....	0.....	0.....	0.....	0.....	732,570,296.....	0.....	0.....	0.....	732,570,296.....	0.....
62944.....	13-5570651.....	AXA Equitable Life Insurance Company.....	(585,610,174).....	1,019,833.....	0.....	0.....	(1,651,549,498).....	(27,442,066).....	0.....	128,699,534.....	(2,134,882,371).....	12,602,160,366.....
00000.....	27-5373651.....	AXA Equitable Funds Management Group, LLC.....	(335,000,000).....	0.....	0.....	0.....	(185,501,732).....	0.....	0.....	(7,290,000).....	(527,791,732).....	0.....
62880.....	13-3198083.....	AXA Equitable Life and Annuity Company.....	0.....	0.....	0.....	0.....	(3,703,819).....	(2,285,414).....	0.....	0.....	(5,989,233).....	8,875.....
10589.....	06-1166226.....	Equitable Casualty Insurance Company.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
00000.....	22-2766036.....	EHLLC.....	(4,389,826).....	0.....	0.....	0.....	4,202,851.....	0.....	0.....	0.....	(186,975).....	0.....
00000.....	13-3434400.....	AllianceBernstein L.P.....	(21,279,995).....	0.....	0.....	0.....	64,878,958.....	0.....	0.....	0.....	43,598,963.....	0.....
00000.....	13-2677213.....	ACMC, LLC.....	(125,000,000).....	0.....	0.....	0.....	(46,560,649).....	0.....	0.....	(15,453,611).....	(187,014,260).....	0.....
00000.....	13-3633538.....	Alliance Bernstein Corporation.....	0.....	0.....	0.....	0.....	(3,459,822).....	0.....	0.....	0.....	(3,459,822).....	0.....
00000.....	58-1538468.....	AXA Advisors, LLC.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
00000.....	13-3266813.....	ECMC, LLC.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
00000.....	13-3350365.....	AXA Distributors, LLC.....	0.....	0.....	0.....	0.....	553,261,383.....	0.....	0.....	0.....	553,261,383.....	0.....
14355.....	14-1903564.....	AXA RE Arizona Company.....	0.....	1,000,000,000.....	(200,000,000).....	0.....	(8,466,711).....	(45,025,922).....	0.....	(3,416,750).....	743,090,617.....	(13,540,746,899).....
78077.....	86-0222062.....	MONY Life Insurance Company of America.....	5,123,195.....	0.....	0.....	0.....	(136,959,554).....	(2,584,185).....	0.....	0.....	(134,420,544).....	37,198,623.....
84530.....	38-2046096.....	U.S. Financial Life Insurance Company.....	0.....	0.....	0.....	0.....	(6,209,542).....	.80,224,003.....	0.....	0.....	.74,014,461.....	.875,469,389.....
00000.....	27-0294443.....	787 Holdings, LLC.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	(67,015,652).....	(67,015,652).....	0.....
68365.....	04-2729166.....	AXA Corporate Solutions Life Re Co.....	0.....	(30,000,000).....	0.....	0.....	(2,456,943).....	15,388,842.....	0.....	0.....	(17,068,101).....	.541,317,182.....
36552.....	36-2994662.....	Coliseum Reinsurance Company.....	(49,843,200).....	0.....	0.....	0.....	(131,257).....	0.....	0.....	0.....	(49,974,457).....	0.....
00000.....	AA-1320035.....	Colisee Re Paris.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
00000.....	AA-1320097.....	AXA Global Life.....	0.....	0.....	0.....	0.....	0.....	(523,141).....	0.....	0.....	(523,141).....	.2,988,296.....
00000.....	22-3492811.....	ESSCO.....	0.....	0.....	0.....	0.....	13,230.....	0.....	0.....	0.....	13,230.....	0.....
00000.....	36-3044045.....	AXA America Corporate Solutions, Inc.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
00000.....	13-3813232.....	JMR Realty.....	0.....	0.....	0.....	0.....	18,824.....	0.....	0.....	0.....	18,824.....	0.....
33022.....	13-3594502.....	AXA Insurance Company.....	0.....	0.....	0.....	0.....	(177,316).....	0.....	0.....	0.....	(177,316).....	0.....
16187.....	04-2482364.....	Mosaic Insurance Company.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
15502.....	46-5697182.....	CS Life Re Company.....	0.....	.30,000,000.....	0.....	0.....	(1,365,652).....	(13,657,022).....	0.....	0.....	.14,977,326.....	(543,055,516).....
21032.....	13-5009848.....	GLOBAL Reinsurance Corporation of America.....	0.....	0.....	0.....	0.....	(308,727).....	0.....	0.....	0.....	(308,727).....	0.....
00000.....	00-0000000.....	AXA DBIO S.C.A.....	0.....	.6,000,000.....	0.....	0.....	0.....	0.....	0.....	0.....	.6,000,000.....	0.....
00000.....	00-0000000.....	AXA Investment Managers.....	0.....	0.....	0.....	0.....	.308,727.....	0.....	0.....	0.....	.308,727.....	0.....
00000.....	13-3907460.....	Global US Holdings Inc.....	0.....	(6,000,000).....	0.....	0.....	0.....	0.....	0.....	0.....	(6,000,000).....	0.....
9999999.....	Control Totals.....		0.....	0.....	0.....	0.....	0.....	0.....	XXX	0.....	0.....	0.....

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

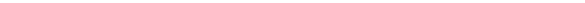
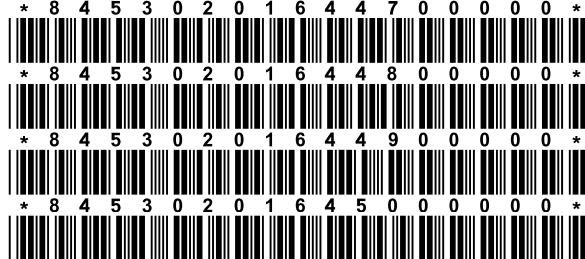
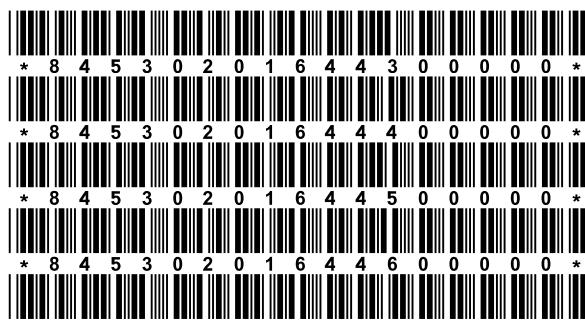
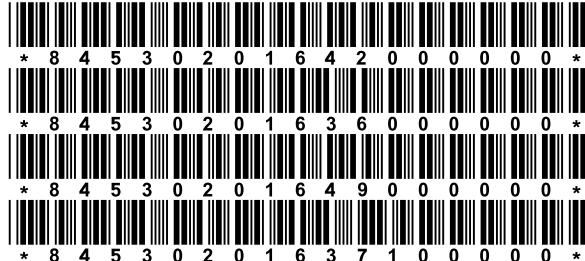
		Responses
1.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2.	Will the confidential Risk-Based Capital Report be filed with the NAIC by March 1?	YES
3.	Will the confidential Risk-Based Capital Report be filed with the state of domicile, if required, by March 1?	YES
4.	Will an actuarial opinion be filed by March 1?	YES
MARCH FILING		
5.	Will Management's Discussion and Analysis be filed by April 1?	YES
6.	Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
7.	Will the Adjustment Form (if required) be filed with state of domicile and the NAIC by April 1?	YES
8.	Will the Supplemental Investment Risk Interrogatories be filed by April 1?	YES
APRIL FILING		
9.	Will an audited financial report be filed by June 1?	YES
10.	Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES
JUNE 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?	YES
<p>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.</p>		
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?	YES
17.	Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?	YES
18.	Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1?	NO
19.	Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1?	NO
20.	Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
21.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
22.	Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1?	NO
23.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
24.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
25.	Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?	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
APRIL FILING		
41.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
42.	Will the Interest-Sensitive Life Insurance Products Report Forms be filed with the state of domicile and the NAIC by April 1?	YES
43.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
44.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
45.	Will the Analysis of Annuity Operations by Lines of Business be filed with the state of domicile and the NAIC by April 1?	YES
46.	Will the Analysis of Increase in Annuity Reserves During the Year be filed with the state of domicile and the NAIC by April 1?	YES
47.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	NO
48.	Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?	NO
49.	Will the confidential Actuarial Memorandum required by Actuarial Guideline XXXVIII 8D be filed with the state of domicile by April 30?	NO
50.	Will the Supplemental XXX/XXXX Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
AUGUST FILING		
51.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	SEE EXPLANATION

U.S. FINANCIAL LIFE INSURANCE COMPANY
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

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.
- 17.
18. The data for this supplement is not required to be filed.
19. The data for this supplement is not required to be filed.
20. The data for this supplement is not required to be filed.
21. The data for this supplement is not required to be filed.
22. The data for this supplement is not required to be filed.
23. The data for this supplement is not required to be filed.
24. The data for this supplement is not required to be filed.
25. The data for this supplement is not required to be filed.
26. The data for this supplement is not required to be filed.
27. The data for this supplement is not required to be filed.
28. The data for this supplement is not required to be filed.
29. The data for this supplement is not required to be filed.
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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:

U.S. FINANCIAL LIFE INSURANCE COMPANY
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

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.



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



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



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



45.

46.

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



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



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



50.

51. Exempt under the MAR premium threshold



Overflow Page
NONE

Overflow Page
NONE

Sch. O-Heading and Barcode
NONE

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

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

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

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

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

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

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

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

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

U.S. FINANCIAL LIFE INSURANCE COMPANY
SCHEDULE O SUPPLEMENT
SUPPLEMENTAL SCHEDULE O - PART 4

Development of Incurred Losses

(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at End of Year				
	1 2012	2 2013	3 2014	4 2015	5 2016
1. 2012.....	.....0	.....0	.....0	.....0	.....0
2. 2013.....	XXX.....	.....0	.....0	.....0	.....0
3. 2014.....	XXX.....	XXX.....	.....0	.....0	.....0
4. 2015.....	XXX.....	XXX.....	XXX.....	.....0	.....0
5. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0

Section B - Other Accident and Health

1. 2012.....	.....0	.....0	.....0	.....0	.....0
2. 2013.....	XXX.....	.....0	.....0	.....0	.....0
3. 2014.....	XXX.....	XXX.....	.....0	.....0	.....0
4. 2015.....	XXX.....	XXX.....	XXX.....	.....0	.....0
5. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0

Section C - Credit Accident and Health

1. 2012.....	.....0	.....0	.....0	.....0	.....0
2. 2013.....	XXX.....	.....0	.....0	.....0	.....0
3. 2014.....	XXX.....	XXX.....	.....0	.....0	.....0
4. 2015.....	XXX.....	XXX.....	XXX.....	.....0	.....0
5. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0

SUPPLEMENTAL SCHEDULE O - PART 5

(\$000 OMITTED)

Reserve and Liability Methodology - Exhibits 6 and 8

Line of Business	1 Methodology	2 Amount
1. Industrial life.....		.....0
2. Ordinary life.....	Standard Factor.....	.....10,826
3. Individual annuity.....		.....0
4. Supplementary contracts.....		.....0
5. Credit life.....		.....0
6. Group life.....		.....0
7. Group annuities.....		.....0
8. Group accident and health.....		.....0
9. Credit accident and health.....		.....0
10. Other accident and health.....		.....0
11. Total.....		.....10,826

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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LIFE ANNUAL STATEMENT BLANK

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