LIFE AND ACCIDENT AND HEALTH COMPANIES - ASSOCIATION EDITION

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ANNUAL STATEMENT

For the Year Ended December 31, 2016

of the Condition and Affairs of the

OHIO NATIONAL LIFE ASSURANCE CORPORATION

NAIC Group Code.....0704, 0704 (Current Period) (Prior Period) NAIC Company Code..... 89206 Employer's ID Number..... 31-0962495

Organized under the Laws of OH State of Domicile or Port of Entry OH Country of Domicile US

Incorporated/Organized..... June 26, 1979 Commenced Business..... August 22, 1979

Statutory Home Office	One Financial Way….. Cincinnati ..... OH ..... US ..... 45242 *(Street and Number) (City or Town, State, Country and Zip Code)*	
Main Administrative Office	One Financial Way….. Cincinnati ..... OH ..... US..... 45242 *(Street and Number) (City or Town, State, Country and Zip Code)*	513-794-6100 *(Area Code) (Telephone Number)*
Mail Address	Post Office Box 237….. Cincinnati ..... OH ..... US ..... 45201 *(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)*	
Primary Location of Books and Records	One Financial Way….. Cincinnati ..... OH ..... US ..... 45242 *(Street and Number) (City or Town, State, Country and Zip Code)*	513-794-6100-6015 *(Area Code) (Telephone Number)*
Internet Web Site Address	N/A	
Statutory Statement Contact	Amber Dawn Roberts *(Name)* amber_roberts@ohionational.com *(E-Mail Address)*	513-794-6100-6015 *(Area Code) (Telephone Number) (Extension)* 513-794-4516 *(Fax Number)*

OFFICERS

Name	Title	Name	Title
Gary Thomas Huffman	President, Chairman & Chief Executive Officer	Therese Susan McDonough	Secretary
Doris Lee Paul	Treasurer	Kush Vijay Kotecha	Senior Vice President & Chief Corporate Actuary

OTHER

Thomas Abdo Barefield	Vice Chairman & Chief Distribution Officer	Christopher Allen Carlson #	Vice Chairman, Strategic Businesses
Harry Douglas Cooke, III #	Executive Vice President	Ronald John Dolan	Vice Chairman & Chief Risk Officer
Paul Gerard #	Senior Vice President & Chief Investment Officer	Kristal Elaine Hambrick	Executive Vice President & Chief Product Officer
Arthur James Roberts	Senior Vice President & Chief Financial Officer	Dennis Lee Schoff	Senior Vice President & General Counsel, Assistant Secretary, Chief Compliance Officer
Barbara Ann Turner #	Executive Vice President & Chief Administrative Officer		

DIRECTORS OR TRUSTEES

Thomas Abdo Barefield	Christopher Allen Carlson #	Ronald John Dolan	Gary Thomas Huffman
Barbara Ann Turner #			

State of..... Ohio
County of..... Hamilton

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

(Signature)	(Signature)	(Signature)
Gary Thomas Huffman	Therese Susan McDonough	Doris Lee Paul
(Printed Name)	(Printed Name)	(Printed Name)
President, Chairman & Chief Executive Officer	Secretary	Treasurer
(Title)	(Title)	(Title)

Subscribed and sworn to before me
This _____ day of February 2017

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

b. If no 1. State the amendment number _____
2. Date filed _____
3. Number of pages attached _____

Lisa Batchelder, Notary Public
January 9, 2022

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DIRECT BUSINESS IN Other Alien # 1 DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	28,428	0	0	0	28,428
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)	28,428	0	0	0	28,428
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	0	0	0	0	0
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	0	0	0	0	0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	0	0	0	0	0
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

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

NONE

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

ACCIDENT AND HEALTH INSURANCE

		1 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)	16,143	16,203	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)	16,143	16,203	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	16,143	16,203	0	0	0

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

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DIRECT BUSINESS IN THE STATE OF ALASKA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	126,624	0	0	0	126,624
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)	126,624	0	0	0	126,624
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	0	0	0	0	0
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	86,910	0	0	0	86,910
12.	Surrender values and withdrawals for life contracts	36,197	0	0	0	36,197
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	123,107	0	0	0	123,107
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	10	3,338,944	0	0	0	0	0	0	10	3,338,944
	Settled during current year:										
18.1	By payment in full	10	3,338,944	0	0	0	0	0	0	10	3,338,944
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	10	3,338,944	0	0	0	0	0	0	10	3,338,944
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	10	3,338,944	0	0	0	0	0	0	10	3,338,944
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	49	27,162,500	0	(a) 0	0	0	0	0	49	27,162,500
21.	Issued during year	9	11,150,000	0	0	0	0	0	0	9	11,150,000
22.	Other changes to in force (Net)	(2)	(2,700,000)	0	0	0	0	0	0	(2)	(2,700,000)
23.	In force December 31 of current year	56	35,612,500	0	(a) 0	0	0	0	0	56	35,612,500

(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)	3,257	3,269	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)	3,257	3,269	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	3,257	3,269	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.

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DIRECT BUSINESS IN THE STATE OF ALABAMA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	5,250,171	0	0	0	5,250,171
2.	Annuity considerations	240	0	0	0	240
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)	5,250,411	0	0	0	5,250,411
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	3,154,526	0	0	0	3,154,526
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	143,944	0	0	0	143,944
12.	Surrender values and withdrawals for life contracts	950,327	0	0	0	950,327
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	4,248,797	0	0	0	4,248,797
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	3	258,927	0	0	0	0	0	0	3	258,927
17.	Incurred during current year	14	4,910,626	0	0	0	0	0	0	14	4,910,626
	Settled during current year:										
18.1	By payment in full	11	2,903,366	0	0	0	0	0	0	11	2,903,366
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	11	2,903,366	0	0	0	0	0	0	11	2,903,366
18.4	Reduction by compromise	1	1,000,000	0	0	0	0	0	0	1	1,000,000
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	12	3,903,366	0	0	0	0	0	0	12	3,903,366
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	5	1,266,187	0	0	0	0	0	0	5	1,266,187
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	3,486	2,003,541,574	0	(a) 0	0	0	0	0	3,486	2,003,541,574
21.	Issued during year	249	213,339,235	0	0	0	0	0	0	249	213,339,235
22.	Other changes to in force (Net)	(191)	(102,981,468)	0	0	0	0	0	0	(191)	(102,981,468)
23.	In force December 31 of current year	3,544	2,113,899,341	0	(a) 0	0	0	0	0	3,544	2,113,899,341

(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)	355,528	356,844	0	473,577	492,894
25.2	Guaranteed renewable (b)	(17,469)	(17,533)	0	0	1,467
25.3	Non-renewable for stated reasons only (b)	7,667	7,696	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)	345,726	347,007	0	473,577	494,361
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	345,726	347,007	0	473,577	494,361

(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.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	7,324,367	0	0	0	7,324,367
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)	7,324,367	0	0	0	7,324,367
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	3,192,298	0	0	0	3,192,298
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	218	0	0	0	218
12.	Surrender values and withdrawals for life contracts	666,523	0	0	0	666,523
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	3,859,039	0	0	0	3,859,039
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	1	88,398	0	0	0	0	0	0	1	88,398
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	88,398	0	0	0	0	0	0	1	88,398
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	2,681	1,393,910,924	0	(a) 0	0	0	0	0	2,681	1,393,910,924
21. Issued during year	220	139,411,953	0	0	0	0	0	0	220	139,411,953
22. Other changes to in force (Net)	(172)	(81,968,039)	0	0	0	0	0	0	(172)	(81,968,039)
23. In force December 31 of current year	2,729	1,451,354,838	0	(a) 0	0	0	0	0	2,729	1,451,354,838

(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)	134,244	134,741	0	40,800	40,800
25.2	Guaranteed renewable (b)	3,755	3,769	0	0	0
25.3	Non-renewable for stated reasons only (b)	1,160	1,164	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)	139,159	139,674	0	40,800	40,800
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	139,159	139,674	0	40,800	40,800

(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.....0704 NAIC Company Code.....89206

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
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	0	0	0	0	0
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	0	0	0	0	0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	0	0	0	0	0
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

NONE

		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					No. of Pol.					
20.	In force December 31, prior year	0	0	0	(a) 0	0	0	0	0	0	0
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23.	In force December 31 of current year	0	0	0	(a) 0	0	0	0	0	0	0

NONE

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

ACCIDENT AND HEALTH INSURANCE

		1 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

NONE

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

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DIRECT BUSINESS IN THE STATE OF ARIZONA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	6,684,160	0	0	0	6,684,160
2.	Annuity considerations	300	0	0	0	300
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)	6,684,460	0	0	0	6,684,460
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,195,000	0	0	0	2,195,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	23,375	0	0	0	23,375
12.	Surrender values and withdrawals for life contracts	610,492	0	0	0	610,492
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	2,828,867	0	0	0	2,828,867
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	7	1,905,000	0	0	0	0	0	0	7	1,905,000
	Settled during current year:										
18.1	By payment in full	7	1,905,000	0	0	0	0	0	0	7	1,905,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	7	1,905,000	0	0	0	0	0	0	7	1,905,000
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	1,905,000	0	0	0	0	0	0	7	1,905,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	3,865	2,652,308,793	0	(a) 0	0	0	0	0	3,865	2,652,308,793
21.	Issued during year	380	281,060,275	0	0	0	0	0	0	380	281,060,275
22.	Other changes to in force (Net)	(184)	(170,017,037)	0	0	0	0	0	0	(184)	(170,017,037)
23.	In force December 31 of current year	4,061	2,763,352,031	0	(a) 0	0	0	0	0	4,061	2,763,352,031

(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)	207,066	207,832	0	0	0
25.2	Guaranteed renewable (b)	7,049	7,075	0	0	0
25.3	Non-renewable for stated reasons only (b)	1,703	1,709	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)	215,818	216,616	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	215,818	216,616	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.

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DIRECT BUSINESS IN THE STATE OF CALIFORNIA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	48,297,546	0	0	0	48,297,546
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	413,051	XXX	0	XXX	413,051
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	48,710,597	0	0	0	48,710,597
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	20,292,395	0	0	0	20,292,395
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	114,113	0	0	0	114,113
12.	Surrender values and withdrawals for life contracts	7,661,703	0	0	0	7,661,703
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	28,068,211	0	0	0	28,068,211
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	18	518,994	0	0	0	0	0	0	18	518,994
17.	Incurred during current year	58	22,037,711	0	0	0	0	0	0	58	22,037,711
	Settled during current year:										
18.1	By payment in full	59	22,016,134	0	0	0	0	0	0	59	22,016,134
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	59	22,016,134	0	0	0	0	0	0	59	22,016,134
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	59	22,016,134	0	0	0	0	0	0	59	22,016,134
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	17	540,571	0	0	0	0	0	0	17	540,571
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	23,827	18,147,399,642	0	(a) 0	0	0	0	0	23,827	18,147,399,642
21.	Issued during year	1,947	1,670,648,392	0	0	0	0	0	0	1,947	1,670,648,392
22.	Other changes to in force (Net)	(1,392)	(1,056,064,444)	0	0	0	0	0	0	(1,392)	(1,056,064,444)
23.	In force December 31 of current year	24,382	18,761,983,590	0	(a) 0	0	0	0	0	24,382	18,761,983,590

(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)	1,169,048	1,173,375	0	5,443,850	5,469,952
25.2	Guaranteed renewable (b)	8,541	8,572	0	0	0
25.3	Non-renewable for stated reasons only (b)	19,344	19,416	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)	1,196,933	1,201,363	0	5,443,850	5,469,952
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,196,933	1,201,363	0	5,443,850	5,469,952

(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.

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DIRECT BUSINESS IN THE STATE OF CANADA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	6,245	0	0	0	6,245
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)	6,245	0	0	0	6,245
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	0	0	0	0	0
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	0	0	0	0	0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	0	0	0	0	0
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	0	0	0	0	0	0	0	0	0	0
	Settled during current year:										
18.1	By payment in full	0	0	0	0	0	0	0	0	0	0
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	0	0	0	0	0	0	0	0	0	0
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	0	0	0	0	0	0	0	0	0	0
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	9	8,100,000	0	(a) 0	0	0	0	0	9	8,100,000
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(2)	(2,150,000)	0	0	0	0	0	0	(2)	(2,150,000)
23.	In force December 31 of current year	7	5,950,000	0	(a) 0	0	0	0	0	7	5,950,000

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal 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	48,000	48,000
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	48,000	48,000
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	0	0	0	48,000	48,000

(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.

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DIRECT BUSINESS IN THE STATE OF COLORADO DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	10,519,544	0	0	0	10,519,544
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)	10,519,544	0	0	0	10,519,544
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	8,037,570	0	0	0	8,037,570
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	39,051	0	0	0	39,051
12.	Surrender values and withdrawals for life contracts	1,382,161	0	0	0	1,382,161
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	9,458,782	0	0	0	9,458,782
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	6	2,314,467	0	0	0	0	0	0	6	2,314,467
17.	Incurred during current year	23	8,149,187	0	0	0	0	0	0	23	8,149,187
	Settled during current year:										
18.1	By payment in full	21	7,049,187	0	0	0	0	0	0	21	7,049,187
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	21	7,049,187	0	0	0	0	0	0	21	7,049,187
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	21	7,049,187	0	0	0	0	0	0	21	7,049,187
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	8	3,414,467	0	0	0	0	0	0	8	3,414,467
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	7,027	4,375,676,166	0	(a) 0	0	0	0	0	7,027	4,375,676,166
21.	Issued during year	565	469,132,599	0	0	0	0	0	0	565	469,132,599
22.	Other changes to in force (Net)	(494)	(336,080,407)	0	0	0	0	0	0	(494)	(336,080,407)
23.	In force December 31 of current year	7,098	4,508,728,358	0	(a) 0	0	0	0	0	7,098	4,508,728,358

(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)	1,291,730	1,301,692	0	1,841,099	1,864,457
25.2	Guaranteed renewable (b)	20,247	20,322	0	3,200	3,200
25.3	Non-renewable for stated reasons only (b)	14,235	14,288	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)	1,326,212	1,336,302	0	1,844,299	1,867,657
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,326,212	1,336,302	0	1,844,299	1,867,657

(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.

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DIRECT BUSINESS IN THE STATE OF CONNECTICUT DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	6,278,582	0	0	0	6,278,582
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)	6,278,582	0	0	0	6,278,582
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	529,000	0	0	0	529,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	3,600	0	0	0	3,600
12.	Surrender values and withdrawals for life contracts	1,274,180	0	0	0	1,274,180
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	1,806,780	0	0	0	1,806,780
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	2	1,500,000	0	0	0	0	0	0	2	1,500,000
17.	Incurred during current year	3	529,000	0	0	0	0	0	0	3	529,000
	Settled during current year:										
18.1	By payment in full	4	1,029,000	0	0	0	0	0	0	4	1,029,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	4	1,029,000	0	0	0	0	0	0	4	1,029,000
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	4	1,029,000	0	0	0	0	0	0	4	1,029,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	1,000,000	0	0	0	0	0	0	1	1,000,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	4,089	2,524,669,412	0	(a) 0	0	0	0	0	4,089	2,524,669,412
21.	Issued during year	342	204,370,939	0	0	0	0	0	0	342	204,370,939
22.	Other changes to in force (Net)	(214)	(150,285,377)	0	0	0	0	0	0	(214)	(150,285,377)
23.	In force December 31 of current year	4,217	2,578,754,974	0	(a) 0	0	0	0	0	4,217	2,578,754,974

(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)	230,399	231,252	0	0	0
25.2	Guaranteed renewable (b)	19,674	19,747	0	0	0
25.3	Non-renewable for stated reasons only (b)	4,337	4,353	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)	254,410	255,352	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	254,410	255,352	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.

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

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	794,986	0	0	0	794,986
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)	794,986	0	0	0	794,986
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	0	0	0	0	0
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	1,131	0	0	0	1,131
12.	Surrender values and withdrawals for life contracts	314	0	0	0	314
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	1,445	0	0	0	1,445
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	1	329,800	0	0	0	0	0	0	1	329,800
	Settled during current year:										
18.1	By payment in full	1	329,800	0	0	0	0	0	0	1	329,800
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	1	329,800	0	0	0	0	0	0	1	329,800
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	329,800	0	0	0	0	0	0	1	329,800
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	366	424,450,204	0	(a) 0	0	0	0	0	366	424,450,204
21.	Issued during year	37	49,932,414	0	0	0	0	0	0	37	49,932,414
22.	Other changes to in force (Net)	(54)	(52,723,740)	0	0	0	0	0	0	(54)	(52,723,740)
23.	In force December 31 of current year	349	421,658,878	0	(a) 0	0	0	0	0	349	421,658,878

(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:					
25.1	Non-cancelable (b)	55,964	56,172	0	0	(254)
25.2	Guaranteed renewable (b)	0	0	0	0	0
25.3	Non-renewable for stated reasons only (b)	2,578	2,587	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)	58,542	58,759	0	0	(254)
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	58,542	58,759	0	0	(254)

(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.

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DIRECT BUSINESS IN THE STATE OF DELAWARE DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	607,947	0	0	0	607,947
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)	607,947	0	0	0	607,947
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	7,500	0	0	0	7,500
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	159	0	0	0	159
12.	Surrender values and withdrawals for life contracts	15,188	0	0	0	15,188
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	22,847	0	0	0	22,847
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	2	122,865	0	0	0	0	0	0	2	122,865
	Settled during current year:										
18.1	By payment in full	2	122,865	0	0	0	0	0	0	2	122,865
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	2	122,865	0	0	0	0	0	0	2	122,865
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	122,865	0	0	0	0	0	0	2	122,865
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	577	305,295,536	0	(a) 0	0	0	0	0	577	305,295,536
21.	Issued during year	49	31,093,063	0	0	0	0	0	0	49	31,093,063
22.	Other changes to in force (Net)	(14)	(5,131,710)	0	0	0	0	0	0	(14)	(5,131,710)
23.	In force December 31 of current year	612	331,256,889	0	(a) 0	0	0	0	0	612	331,256,889

(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)	36,071	36,205	0	0	0
25.2	Guaranteed renewable (b)	(2,460)	(2,470)	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)	33,611	33,735	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	33,611	33,735	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.

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DIRECT BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	42,801,451	0	0	0	42,801,451
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)	42,801,451	0	0	0	42,801,451
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	20,259,150	0	0	0	20,259,150
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	114,406	0	0	0	114,406
12.	Surrender values and withdrawals for life contracts	4,359,744	0	0	0	4,359,744
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	24,733,300	0	0	0	24,733,300
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	7	7,793,994	0	0	0	0	0	0	7	7,793,994
17.	Incurred during current year	37	16,878,372	0	0	0	0	0	0	37	16,878,372
	Settled during current year:										
18.1	By payment in full	38	14,720,755	0	0	0	0	0	0	38	14,720,755
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	38	14,720,755	0	0	0	0	0	0	38	14,720,755
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	38	14,720,755	0	0	0	0	0	0	38	14,720,755
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	6	9,951,611	0	0	0	0	0	0	6	9,951,611
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	15,973	9,752,716,336	0	(a) 0	0	0	0	0	15,973	9,752,716,336
21.	Issued during year	1,503	1,110,725,857	0	0	0	0	0	0	1,503	1,110,725,857
22.	Other changes to in force (Net)	(867)	(492,531,360)	0	0	0	0	0	0	(867)	(492,531,360)
23.	In force December 31 of current year	16,609	10,370,910,833	0	(a) 0	0	0	0	0	16,609	10,370,910,833

(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)	1,101,963	1,106,042	0	2,061,318	2,120,481
25.2	Guaranteed renewable (b)	16,840	16,902	0	0	0
25.3	Non-renewable for stated reasons only (b)	35,089	35,219	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)	1,153,892	1,158,163	0	2,061,318	2,120,481
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,153,892	1,158,163	0	2,061,318	2,120,481

(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.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	14,519,825	0	0	0	14,519,825
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)	14,519,825	0	0	0	14,519,825
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	12,072,815	0	0	0	12,072,815
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	30,880	0	0	0	30,880
12.	Surrender values and withdrawals for life contracts	1,265,409	0	0	0	1,265,409
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	13,369,104	0	0	0	13,369,104
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	5	1,037,042	0	0	0	0	0	0	5	1,037,042
17.	Incurred during current year	32	11,172,815	0	0	0	0	0	0	32	11,172,815
	Settled during current year:										
18.1	By payment in full	31	9,054,895	0	0	0	0	0	0	31	9,054,895
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	31	9,054,895	0	0	0	0	0	0	31	9,054,895
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	9,054,895	0	0	0	0	0	0	31	9,054,895
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	6	3,154,962	0	0	0	0	0	0	6	3,154,962
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	9,235	5,460,515,672	0	(a) 0	0	0	0	0	9,235	5,460,515,672
21.	Issued during year	392	278,136,877	0	0	0	0	0	0	392	278,136,877
22.	Other changes to in force (Net)	(478)	(277,730,437)	0	0	0	0	0	0	(478)	(277,730,437)
23.	In force December 31 of current year	9,149	5,460,922,112	0	(a) 0	0	0	0	0	9,149	5,460,922,112

(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)	410,943	412,464	0	527,689	506,770
25.2	Guaranteed renewable (b)	19,339	19,410	0	0	0
25.3	Non-renewable for stated reasons only (b)	23,138	23,223	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)	453,420	455,097	0	527,689	506,770
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	453,420	455,097	0	527,689	506,770

(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.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	585,650,114	0	0	0	585,650,114
2.	Annuity considerations	75,465	0	0	0	75,465
3.	Deposit-type contract funds	103,125,925	XXX	0	XXX	103,125,925
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	688,851,504	0	0	0	688,851,504
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	243,689,872	0	0	0	243,689,872
10.	Matured endowments	10,063	0	0	0	10,063
11.	Annuity benefits	3,612,304	0	0	0	3,612,304
12.	Surrender values and withdrawals for life contracts	85,903,262	0	0	0	85,903,262
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	333,215,501	0	0	0	333,215,501
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	166	48,612,202	0	0	0	0	0	0	166	48,612,202
17.	Incurred during current year	777	246,667,925	0	0	0	0	0	0	777	246,667,925
	Settled during current year:										
18.1	By payment in full	766	241,178,772	0	0	0	0	0	0	766	241,178,772
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	766	241,178,772	0	0	0	0	0	0	766	241,178,772
18.4	Reduction by compromise	3	1,600,000	0	0	0	0	0	0	3	1,600,000
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	769	242,778,772	0	0	0	0	0	0	769	242,778,772
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	174	52,501,355	0	0	0	0	0	0	174	52,501,355
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	266,869	153,478,990,176	0	(a) 0	0	0	0	0	266,869	153,478,990,176
21.	Issued during year	19,424	13,929,339,262	0	0	0	0	0	0	19,424	13,929,339,262
22.	Other changes to in force (Net)	(15,335)	(9,006,087,311)	0	0	0	0	0	0	(15,335)	(9,006,087,311)
23.	In force December 31 of current year	270,958	158,402,242,127	0	(a) 0	0	0	0	0	270,958	158,402,242,127

(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)	18,620,383	18,689,306	0	21,950,721	22,457,036
25.2	Guaranteed renewable (b)	646,255	648,645	0	265,178	274,940
25.3	Non-renewable for stated reasons only (b)	504,023	505,889	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)	19,770,661	19,843,840	0	22,215,899	22,731,976
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	19,770,661	19,843,840	0	22,215,899	22,731,976

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

DIRECT BUSINESS IN GUAM DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	73,992	0	0	0	73,992
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)	73,992	0	0	0	73,992
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	0	0	0	0	0
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	0	0	0	0	0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	0	0	0	0	0
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

NONE

		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					No. of Pol.					
20.	In force December 31, prior year	0	0	0	(a) 0	0	0	0	0	0	0
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23.	In force December 31 of current year	0	0	0	(a) 0	0	0	0	0	0	0

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

ACCIDENT AND HEALTH INSURANCE

		1 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

NONE

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

* 8 9 2 0 6 2 0 1 6 4 3 0 1 2 1 0 0 *

DIRECT BUSINESS IN THE STATE OF HAWAII DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	112,789	0	0	0	112,789
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)	112,789	0	0	0	112,789
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	0	0	0	0	0
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	0	0	0	0	0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	0	0	0	0	0
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	590,169	0	0	0	0	0	0	1	590,169
17.	Incurred during current year	0	0	0	0	0	0	0	0	0	0
	Settled during current year:										
18.1	By payment in full	0	0	0	0	0	0	0	0	0	0
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	0	0	0	0	0	0	0	0	0	0
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	0	0	0	0	0	0	0	0	0	0
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	590,169	0	0	0	0	0	0	1	590,169
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	82	57,405,530	0	(a) 0	0	0	0	0	82	57,405,530
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(10)	(4,365,530)	0	0	0	0	0	0	(10)	(4,365,530)
23.	In force December 31 of current year	72	53,040,000	0	(a) 0	0	0	0	0	72	53,040,000

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

ACCIDENT AND HEALTH INSURANCE

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24.	Group policies (b)	0	0	0	0	0
24.1	Federal 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)	5,376	5,396	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)	5,376	5,396	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	5,376	5,396	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.

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DIRECT BUSINESS IN THE STATE OF IOWA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	8,703,920	0	0	0	8,703,920
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)	8,703,920	0	0	0	8,703,920
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	3,481,666	0	0	0	3,481,666
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	62,045	0	0	0	62,045
12.	Surrender values and withdrawals for life contracts	1,310,924	0	0	0	1,310,924
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	4,854,635	0	0	0	4,854,635
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	9	433,880	0	0	0	0	0	0	9	433,880
17.	Incurred during current year	31	4,210,062	0	0	0	0	0	0	31	4,210,062
	Settled during current year:										
18.1	By payment in full	27	3,742,977	0	0	0	0	0	0	27	3,742,977
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	27	3,742,977	0	0	0	0	0	0	27	3,742,977
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	27	3,742,977	0	0	0	0	0	0	27	3,742,977
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	13	900,965	0	0	0	0	0	0	13	900,965
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	4,044	1,191,440,127	0	(a) 0	0	0	0	0	4,044	1,191,440,127
21.	Issued during year	174	82,121,810	0	0	0	0	0	0	174	82,121,810
22.	Other changes to in force (Net)	(241)	(100,555,341)	0	0	0	0	0	0	(241)	(100,555,341)
23.	In force December 31 of current year	3,977	1,173,006,596	0	(a) 0	0	0	0	0	3,977	1,173,006,596

(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)	123,296	123,753	0	90,531	119,954
25.2	Guaranteed renewable (b)	48,699	48,879	0	5,000	5,400
25.3	Non-renewable for stated reasons only (b)	1,281	1,286	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)	173,276	173,918	0	95,531	125,354
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	173,276	173,918	0	95,531	125,354

(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.

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DIRECT BUSINESS IN THE STATE OF IDAHO DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	3,551,186	0	0	0	3,551,186
2.	Annuity considerations	225	0	0	0	225
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)	3,551,411	0	0	0	3,551,411
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,780,000	0	0	0	2,780,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	1,222,877	0	0	0	1,222,877
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	4,002,877	0	0	0	4,002,877
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	12	2,588,242	0	0	0	0	0	0	12	2,588,242
	Settled during current year:										
18.1	By payment in full	10	2,338,242	0	0	0	0	0	0	10	2,338,242
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	10	2,338,242	0	0	0	0	0	0	10	2,338,242
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	10	2,338,242	0	0	0	0	0	0	10	2,338,242
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	250,000	0	0	0	0	0	0	2	250,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	3,291	1,373,495,987	0	(a) 0	0	0	0	0	3,291	1,373,495,987
21.	Issued during year	200	87,970,743	0	0	0	0	0	0	200	87,970,743
22.	Other changes to in force (Net)	(196)	(74,189,015)	0	0	0	0	0	0	(196)	(74,189,015)
23.	In force December 31 of current year	3,295	1,387,277,715	0	(a) 0	0	0	0	0	3,295	1,387,277,715

(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)	220,482	221,298	0	84,760	83,847
25.2	Guaranteed renewable (b)	19,266	19,337	0	8,067	8,000
25.3	Non-renewable for stated reasons only (b)	10,761	10,801	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)	250,509	251,436	0	92,827	91,847
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	250,509	251,436	0	92,827	91,847

(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.

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DIRECT BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	19,640,690	0	0	0	19,640,690
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)	19,640,690	0	0	0	19,640,690
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	7,540,374	0	0	0	7,540,374
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	154,085	0	0	0	154,085
12.	Surrender values and withdrawals for life contracts	1,534,616	0	0	0	1,534,616
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	9,229,075	0	0	0	9,229,075
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	27	5,952,477	0	0	0	0	0	0	27	5,952,477
	Settled during current year:										
18.1	By payment in full	24	5,747,387	0	0	0	0	0	0	24	5,747,387
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	24	5,747,387	0	0	0	0	0	0	24	5,747,387
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	5,747,387	0	0	0	0	0	0	24	5,747,387
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	3	205,090	0	0	0	0	0	0	3	205,090
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	8,951	5,199,912,462	0	(a) 0	0	0	0	0	8,951	5,199,912,462
21.	Issued during year	610	427,904,782	0	0	0	0	0	0	610	427,904,782
22.	Other changes to in force (Net)	(590)	(363,313,358)	0	0	0	0	0	0	(590)	(363,313,358)
23.	In force December 31 of current year	8,971	5,264,503,886	0	(a) 0	0	0	0	0	8,971	5,264,503,886

(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)	606,069	608,312	0	90,107	37,542
25.2	Guaranteed renewable (b)	20,514	20,590	0	16,800	16,800
25.3	Non-renewable for stated reasons only (b)	15,560	15,617	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)	642,143	644,519	0	106,907	54,342
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	642,143	644,519	0	106,907	54,342

(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.

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DIRECT BUSINESS IN THE STATE OF INDIANA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	8,779,154	0	0	0	8,779,154
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)	8,779,154	0	0	0	8,779,154
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	4,651,089	0	0	0	4,651,089
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	136,435	0	0	0	136,435
12.	Surrender values and withdrawals for life contracts	6,565,941	0	0	0	6,565,941
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	11,353,465	0	0	0	11,353,465
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	10	1,353,142	0	0	0	0	0	0	10	1,353,142
17.	Incurred during current year	14	4,972,206	0	0	0	0	0	0	14	4,972,206
	Settled during current year:										
18.1	By payment in full	16	5,223,592	0	0	0	0	0	0	16	5,223,592
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	16	5,223,592	0	0	0	0	0	0	16	5,223,592
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	5,223,592	0	0	0	0	0	0	16	5,223,592
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	8	1,101,756	0	0	0	0	0	0	8	1,101,756
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	5,085	2,452,523,167	0	(a) 0	0	0	0	0	5,085	2,452,523,167
21.	Issued during year	237	144,715,991	0	0	0	0	0	0	237	144,715,991
22.	Other changes to in force (Net)	(322)	(185,063,994)	0	0	0	0	0	0	(322)	(185,063,994)
23.	In force December 31 of current year	5,000	2,412,175,164	0	(a) 0	0	0	0	0	5,000	2,412,175,164

(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)	251,275	252,205	0	346,769	356,505
25.2	Guaranteed renewable (b)	15,125	15,181	0	0	0
25.3	Non-renewable for stated reasons only (b)	3,646	3,659	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)	270,046	271,045	0	346,769	356,505
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	270,046	271,045	0	346,769	356,505

(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.

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DIRECT BUSINESS IN THE STATE OF KANSAS DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	20,680,234	0	0	0	20,680,234
2.	Annuity considerations	14,500	0	0	0	14,500
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)	20,694,734	0	0	0	20,694,734
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,002,441	0	0	0	1,002,441
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	45,082	0	0	0	45,082
12.	Surrender values and withdrawals for life contracts	3,058,302	0	0	0	3,058,302
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	4,105,825	0	0	0	4,105,825
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	8	1,052,441	0	0	0	0	0	0	8	1,052,441
	Settled during current year:										
18.1	By payment in full	6	752,441	0	0	0	0	0	0	6	752,441
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	6	752,441	0	0	0	0	0	0	6	752,441
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	752,441	0	0	0	0	0	0	6	752,441
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	300,000	0	0	0	0	0	0	2	300,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	4,879	2,505,273,683	0	(a) 0	0	0	0	0	4,879	2,505,273,683
21.	Issued during year	375	224,939,571	0	0	0	0	0	0	375	224,939,571
22.	Other changes to in force (Net)	(302)	(146,325,613)	0	0	0	0	0	0	(302)	(146,325,613)
23.	In force December 31 of current year	4,952	2,583,887,641	0	(a) 0	0	0	0	0	4,952	2,583,887,641

(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)	296,463	297,561	0	381,377	393,488
25.2	Guaranteed renewable (b)	25,524	25,618	0	6,000	6,000
25.3	Non-renewable for stated reasons only (b)	282	283	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)	322,269	323,462	0	387,377	399,488
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	322,269	323,462	0	387,377	399,488

(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.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	18,092,150	0	0	0	18,092,150
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)	18,092,150	0	0	0	18,092,150
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	7,616,163	0	0	0	7,616,163
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	7,517	0	0	0	7,517
12.	Surrender values and withdrawals for life contracts	2,103,271	0	0	0	2,103,271
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	9,726,951	0	0	0	9,726,951
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	100,000	0	0	0	0	0	0	1	100,000
17.	Incurred during current year	18	8,840,415	0	0	0	0	0	0	18	8,840,415
	Settled during current year:										
18.1	By payment in full	16	3,830,415	0	0	0	0	0	0	16	3,830,415
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	16	3,830,415	0	0	0	0	0	0	16	3,830,415
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	3,830,415	0	0	0	0	0	0	16	3,830,415
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	3	5,110,000	0	0	0	0	0	0	3	5,110,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	3,598	1,821,529,600	0	(a) 0	0	0	0	0	3,598	1,821,529,600
21.	Issued during year	265	225,836,229	0	0	0	0	0	0	265	225,836,229
22.	Other changes to in force (Net)	(246)	(147,392,745)	0	0	0	0	0	0	(246)	(147,392,745)
23.	In force December 31 of current year	3,617	1,899,973,084	0	(a) 0	0	0	0	0	3,617	1,899,973,084

(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:					
25.1	Non-cancelable (b)	291,817	292,897	0	1,048,949	1,079,926
25.2	Guaranteed renewable (b)	7,523	7,551	0	0	0
25.3	Non-renewable for stated reasons only (b)	2,666	2,676	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)	302,006	303,124	0	1,048,949	1,079,926
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	302,006	303,124	0	1,048,949	1,079,926

(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.

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DIRECT BUSINESS IN THE STATE OF LOUISIANA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	4,792,299	0	0	0	4,792,299
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)	4,792,299	0	0	0	4,792,299
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	6,521,952	0	0	0	6,521,952
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	5,639	0	0	0	5,639
12.	Surrender values and withdrawals for life contracts	408,565	0	0	0	408,565
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	6,936,156	0	0	0	6,936,156
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	62,970	0	0	0	0	0	0	1	62,970
17.	Incurred during current year	8	6,546,952	0	0	0	0	0	0	8	6,546,952
	Settled during current year:										
18.1	By payment in full	6	5,475,000	0	0	0	0	0	0	6	5,475,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	6	5,475,000	0	0	0	0	0	0	6	5,475,000
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	5,475,000	0	0	0	0	0	0	6	5,475,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	3	1,134,922	0	0	0	0	0	0	3	1,134,922
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	2,760	1,858,564,239	0	(a) 0	0	0	0	0	2,760	1,858,564,239
21.	Issued during year	326	258,641,202	0	0	0	0	0	0	326	258,641,202
22.	Other changes to in force (Net)	(174)	(115,257,302)	0	0	0	0	0	0	(174)	(115,257,302)
23.	In force December 31 of current year	2,912	2,001,948,139	0	(a) 0	0	0	0	0	2,912	2,001,948,139

(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)	289,145	290,215	0	204,567	234,393
25.2	Guaranteed renewable (b)	5,741	5,763	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)	294,886	295,978	0	204,567	234,393
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	294,886	295,978	0	204,567	234,393

(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.

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DIRECT BUSINESS IN THE STATE OF MASSACHUSETTS DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	17,842,877	0	0	0	17,842,877
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)	17,842,877	0	0	0	17,842,877
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,300,000	0	0	0	1,300,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	294,004	0	0	0	294,004
12.	Surrender values and withdrawals for life contracts	1,195,114	0	0	0	1,195,114
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	2,789,118	0	0	0	2,789,118
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	112,841	0	0	0	0	0	0	1	112,841
17.	Incurred during current year	5	1,283,327	0	0	0	0	0	0	5	1,283,327
	Settled during current year:										
18.1	By payment in full	5	1,283,327	0	0	0	0	0	0	5	1,283,327
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	5	1,283,327	0	0	0	0	0	0	5	1,283,327
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	1,283,327	0	0	0	0	0	0	5	1,283,327
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	112,841	0	0	0	0	0	0	1	112,841
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	5,767	3,717,005,179	0	(a) 0	0	0	0	0	5,767	3,717,005,179
21.	Issued during year	541	380,373,779	0	0	0	0	0	0	541	380,373,779
22.	Other changes to in force (Net)	(237)	(155,589,255)	0	0	0	0	0	0	(237)	(155,589,255)
23.	In force December 31 of current year	6,071	3,941,789,703	0	(a) 0	0	0	0	0	6,071	3,941,789,703

(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)	210,626	211,405	0	0	21,333
25.2	Guaranteed renewable (b)	35,301	35,432	0	9,600	9,600
25.3	Non-renewable for stated reasons only (b)	339	340	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)	246,266	247,177	0	9,600	30,933
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	246,266	247,177	0	9,600	30,933

(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.

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DIRECT BUSINESS IN THE STATE OF MARYLAND DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	11,350,743	0	0	0	11,350,743
2.	Annuity considerations	3,080	0	0	0	3,080
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)	11,353,823	0	0	0	11,353,823
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	3,139,000	0	0	0	3,139,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	42,469	0	0	0	42,469
12.	Surrender values and withdrawals for life contracts	555,456	0	0	0	555,456
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	3,736,925	0	0	0	3,736,925
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	4	2,600,000	0	0	0	0	0	0	4	2,600,000
17.	Incurred during current year	14	3,561,052	0	0	0	0	0	0	14	3,561,052
	Settled during current year:										
18.1	By payment in full	17	6,061,052	0	0	0	0	0	0	17	6,061,052
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	17	6,061,052	0	0	0	0	0	0	17	6,061,052
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	6,061,052	0	0	0	0	0	0	17	6,061,052
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					No. of Pol.					
20.	In force December 31, prior year	6,264	4,264,757,540	0	(a) 0	0	0	0	0	6,264	4,264,757,540
21.	Issued during year	386	296,590,536	0	0	0	0	0	0	386	296,590,536
22.	Other changes to in force (Net)	(304)	(198,453,861)	0	0	0	0	0	0	(304)	(198,453,861)
23.	In force December 31 of current year	6,346	4,362,894,215	0	(a) 0	0	0	0	0	6,346	4,362,894,215

(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)	525,515	527,460	0	357,164	364,216
25.2	Guaranteed renewable (b)	16,168	16,228	0	0	0
25.3	Non-renewable for stated reasons only (b)	7,301	7,328	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)	548,984	551,016	0	357,164	364,216
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	548,984	551,016	0	357,164	364,216

(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.

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DIRECT BUSINESS IN THE STATE OF MAINE DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	6,526,835	0	0	0	6,526,835
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)	6,526,835	0	0	0	6,526,835
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	508,003	0	0	0	508,003
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	53,850	0	0	0	53,850
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	561,853	0	0	0	561,853
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	500,000	0	0	0	0	0	0	1	500,000
17.	Incurred during current year	1	119,224	0	0	0	0	0	0	1	119,224
	Settled during current year:										
18.1	By payment in full	2	619,224	0	0	0	0	0	0	2	619,224
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	2	619,224	0	0	0	0	0	0	2	619,224
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	619,224	0	0	0	0	0	0	2	619,224
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,149	592,059,220	0	(a) 0	0	0	0	0	1,149	592,059,220
21.	Issued during year	88	39,606,068	0	0	0	0	0	0	88	39,606,068
22.	Other changes to in force (Net)	(36)	(19,399,481)	0	0	0	0	0	0	(36)	(19,399,481)
23.	In force December 31 of current year	1,201	612,265,807	0	(a) 0	0	0	0	0	1,201	612,265,807

(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)	8,357	8,388	0	56,400	56,400
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)	8,357	8,388	0	56,400	56,400
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	8,357	8,388	0	56,400	56,400

(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.

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DIRECT BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	17,414,825	0	0	0	17,414,825
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)	17,414,825	0	0	0	17,414,825
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	5,381,231	0	0	0	5,381,231
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	76,439	0	0	0	76,439
12.	Surrender values and withdrawals for life contracts	5,414,066	0	0	0	5,414,066
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	10,871,736	0	0	0	10,871,736
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	9	1,040,004	0	0	0	0	0	0	9	1,040,004
17.	Incurred during current year	23	5,908,631	0	0	0	0	0	0	23	5,908,631
	Settled during current year:										
18.1	By payment in full	23	5,741,455	0	0	0	0	0	0	23	5,741,455
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	23	5,741,455	0	0	0	0	0	0	23	5,741,455
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	23	5,741,455	0	0	0	0	0	0	23	5,741,455
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	9	1,207,180	0	0	0	0	0	0	9	1,207,180
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	9,318	4,603,747,475	0	(a) 0	0	0	0	0	9,318	4,603,747,475
21.	Issued during year	765	534,629,380	0	0	0	0	0	0	765	534,629,380
22.	Other changes to in force (Net)	(569)	(357,875,557)	0	0	0	0	0	0	(569)	(357,875,557)
23.	In force December 31 of current year	9,514	4,780,501,298	0	(a) 0	0	0	0	0	9,514	4,780,501,298

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

ACCIDENT AND HEALTH INSURANCE

		1 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)	923,776	927,195	0	865,581	921,093
25.2	Guaranteed renewable (b)	39,128	39,273	0	37,128	42,272
25.3	Non-renewable for stated reasons only (b)	7,500	7,528	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)	970,404	973,996	0	902,709	963,365
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	970,404	973,996	0	902,709	963,365

(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.

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DIRECT BUSINESS IN THE STATE OF MINNESOTA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	7,753,925	0	0	0	7,753,925
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)	7,753,925	0	0	0	7,753,925
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,064,265	0	0	0	2,064,265
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	47,601	0	0	0	47,601
12.	Surrender values and withdrawals for life contracts	1,247,119	0	0	0	1,247,119
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	3,358,985	0	0	0	3,358,985
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	2	125,000	0	0	0	0	0	0	2	125,000
17.	Incurred during current year	7	2,207,559	0	0	0	0	0	0	7	2,207,559
	Settled during current year:										
18.1	By payment in full	9	2,332,559	0	0	0	0	0	0	9	2,332,559
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	9	2,332,559	0	0	0	0	0	0	9	2,332,559
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	2,332,559	0	0	0	0	0	0	9	2,332,559
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	4,879	2,529,349,229	0	(a) 0	0	0	0	0	4,879	2,529,349,229
21.	Issued during year	297	216,757,923	0	0	0	0	0	0	297	216,757,923
22.	Other changes to in force (Net)	(300)	(164,642,454)	0	0	0	0	0	0	(300)	(164,642,454)
23.	In force December 31 of current year	4,876	2,581,464,698	0	(a) 0	0	0	0	0	4,876	2,581,464,698

(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)	274,208	275,223	0	159,484	159,484
25.2	Guaranteed renewable (b)	26,060	26,157	0	3,989	1,371
25.3	Non-renewable for stated reasons only (b)	3,115	3,127	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)	303,383	304,507	0	163,473	160,855
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	303,383	304,507	0	163,473	160,855

(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.

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DIRECT BUSINESS IN THE STATE OF MISSOURI DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	18,733,280	0	0	0	18,733,280
2.	Annuity considerations	340	0	0	0	340
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)	18,733,620	0	0	0	18,733,620
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	3,433,281	0	0	0	3,433,281
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	118,297	0	0	0	118,297
12.	Surrender values and withdrawals for life contracts	6,402,791	0	0	0	6,402,791
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	9,954,369	0	0	0	9,954,369
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	8	1,958,281	0	0	0	0	0	0	8	1,958,281
	Settled during current year:										
18.1	By payment in full	7	1,933,281	0	0	0	0	0	0	7	1,933,281
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	7	1,933,281	0	0	0	0	0	0	7	1,933,281
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	1,933,281	0	0	0	0	0	0	7	1,933,281
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	25,000	0	0	0	0	0	0	1	25,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	4,757	2,154,626,399	0	(a) 0	0	0	0	0	4,757	2,154,626,399
21.	Issued during year	259	152,887,441	0	0	0	0	0	0	259	152,887,441
22.	Other changes to in force (Net)	(249)	(111,073,257)	0	0	0	0	0	0	(249)	(111,073,257)
23.	In force December 31 of current year	4,767	2,196,440,583	0	(a) 0	0	0	0	0	4,767	2,196,440,583

(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)	238,119	239,000	0	493,965	490,392
25.2	Guaranteed renewable (b)	16,064	16,123	0	8,417	8,416
25.3	Non-renewable for stated reasons only (b)	2,388	2,397	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)	256,571	257,520	0	502,382	498,808
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	256,571	257,520	0	502,382	498,808

(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.

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

NAIC Group Code.....0704 NAIC Company Code.....89206

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
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	0	0	0	0	0
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	0	0	0	0	0
DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

NONE

	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					No. of Pol.					
20. In force December 31, prior year	0	0	0	(a) 0	0	0	0	0	0	0
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year	0	0	0	(a) 0	0	0	0	0	0	0

NONE

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

ACCIDENT AND HEALTH INSURANCE

	1 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

NONE

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

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DIRECT BUSINESS IN THE STATE OF MISSISSIPPI DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	4,492,004	0	0	0	4,492,004
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	103,036	XXX	0	XXX	103,036
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	4,595,040	0	0	0	4,595,040
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,444,329	0	0	0	1,444,329
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	3,600	0	0	0	3,600
12.	Surrender values and withdrawals for life contracts	101,087	0	0	0	101,087
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	1,549,016	0	0	0	1,549,016
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	35,000	0	0	0	0	0	0	1	35,000
17.	Incurred during current year	5	1,344,329	0	0	0	0	0	0	5	1,344,329
	Settled during current year:										
18.1	By payment in full	4	480,892	0	0	0	0	0	0	4	480,892
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	4	480,892	0	0	0	0	0	0	4	480,892
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	4	480,892	0	0	0	0	0	0	4	480,892
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	898,437	0	0	0	0	0	0	2	898,437
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,386	816,606,677	0	(a) 0	0	0	0	0	1,386	816,606,677
21.	Issued during year	101	65,667,163	0	0	0	0	0	0	101	65,667,163
22.	Other changes to in force (Net)	(93)	(57,342,188)	0	0	0	0	0	0	(93)	(57,342,188)
23.	In force December 31 of current year	1,394	824,931,652	0	(a) 0	0	0	0	0	1,394	824,931,652

(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)	175,079	175,727	0	211,205	211,301
25.2	Guaranteed renewable (b)	4,529	4,546	0	0	0
25.3	Non-renewable for stated reasons only (b)	2,014	2,022	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)	181,622	182,295	0	211,205	211,301
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	181,622	182,295	0	211,205	211,301

(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.

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DIRECT BUSINESS IN THE STATE OF MONTANA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	2,610,488	0	0	0	2,610,488
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)	2,610,488	0	0	0	2,610,488
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,691,058	0	0	0	2,691,058
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	1,943	0	0	0	1,943
12.	Surrender values and withdrawals for life contracts	178,471	0	0	0	178,471
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	2,871,472	0	0	0	2,871,472
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	2	260,000	0	0	0	0	0	0	2	260,000
17.	Incurred during current year	6	2,691,058	0	0	0	0	0	0	6	2,691,058
	Settled during current year:										
18.1	By payment in full	8	2,951,058	0	0	0	0	0	0	8	2,951,058
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	8	2,951,058	0	0	0	0	0	0	8	2,951,058
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	2,951,058	0	0	0	0	0	0	8	2,951,058
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	2,154	1,045,126,931	0	(a) 0	0	0	0	0	2,154	1,045,126,931
21.	Issued during year	96	54,801,817	0	0	0	0	0	0	96	54,801,817
22.	Other changes to in force (Net)	(102)	(44,815,249)	0	0	0	0	0	0	(102)	(44,815,249)
23.	In force December 31 of current year	2,148	1,055,113,499	0	(a) 0	0	0	0	0	2,148	1,055,113,499

(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)	93,529	93,875	0	24,000	24,000
25.2	Guaranteed renewable (b)	2,632	2,642	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)	96,161	96,517	0	24,000	24,000
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	96,161	96,517	0	24,000	24,000

(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 9 2 0 6 2 0 1 6 4 3 0 3 4 1 0 0 *

DIRECT BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	29,449,606	0	0	0	29,449,606
2.	Annuity considerations	8,680	0	0	0	8,680
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	29,458,286	0	0	0	29,458,286
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	20,952,652	0	0	0	20,952,652
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	168,901	0	0	0	168,901
12.	Surrender values and withdrawals for life contracts	2,676,789	0	0	0	2,676,789
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	23,798,342	0	0	0	23,798,342
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	4	579,521	0	0	0	0	0	0	4	579,521
17.	Incurred during current year	21	18,398,973	0	0	0	0	0	0	21	18,398,973
	Settled during current year:										
18.1	By payment in full	18	16,448,973	0	0	0	0	0	0	18	16,448,973
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	18	16,448,973	0	0	0	0	0	0	18	16,448,973
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	18	16,448,973	0	0	0	0	0	0	18	16,448,973
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	7	2,529,521	0	0	0	0	0	0	7	2,529,521
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	6,835	4,213,015,177	0	(a) 0	0	0	0	0	6,835	4,213,015,177
21.	Issued during year	471	329,961,837	0	0	0	0	0	0	471	329,961,837
22.	Other changes to in force (Net)	(357)	(220,722,089)	0	0	0	0	0	0	(357)	(220,722,089)
23.	In force December 31 of current year	6,949	4,322,254,925	0	(a) 0	0	0	0	0	6,949	4,322,254,925

(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)	476,278	478,041	0	491,502	503,982
25.2	Guaranteed renewable (b)	(3,982)	(3,997)	0	0	0
25.3	Non-renewable for stated reasons only (b)	5,797	5,818	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)	478,093	479,862	0	491,502	503,982
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	478,093	479,862	0	491,502	503,982

(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.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	1,152,206	0	0	0	1,152,206
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	41,667	XXX	0	XXX	41,667
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	1,193,873	0	0	0	1,193,873
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,011,154	0	0	0	1,011,154
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	173,800	0	0	0	173,800
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	1,184,954	0	0	0	1,184,954
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	3	1,011,154	0	0	0	0	0	0	3	1,011,154
	Settled during current year:										
18.1	By payment in full	3	1,011,154	0	0	0	0	0	0	3	1,011,154
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	3	1,011,154	0	0	0	0	0	0	3	1,011,154
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	3	1,011,154	0	0	0	0	0	0	3	1,011,154
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,038	457,504,403	0	(a) 0	0	0	0	0	1,038	457,504,403
21.	Issued during year	99	62,587,219	0	0	0	0	0	0	99	62,587,219
22.	Other changes to in force (Net)	(60)	(32,303,324)	0	0	0	0	0	0	(60)	(32,303,324)
23.	In force December 31 of current year	1,077	487,788,298	0	(a) 0	0	0	0	0	1,077	487,788,298

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

ACCIDENT AND HEALTH INSURANCE

		1 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)	40,191	40,340	0	0	0
25.2	Guaranteed renewable (b)	8,117	8,147	0	0	0
25.3	Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	48,308	48,487	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	48,308	48,487	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.

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DIRECT BUSINESS IN THE STATE OF NEBRASKA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	4,639,066	0	0	0	4,639,066
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)	4,639,066	0	0	0	4,639,066
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	5,119,596	0	0	0	5,119,596
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	13,125	0	0	0	13,125
12.	Surrender values and withdrawals for life contracts	1,095,592	0	0	0	1,095,592
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	6,228,313	0	0	0	6,228,313
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	21	4,776,442	0	0	0	0	0	0	21	4,776,442
	Settled during current year:										
18.1	By payment in full	21	4,776,442	0	0	0	0	0	0	21	4,776,442
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	21	4,776,442	0	0	0	0	0	0	21	4,776,442
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	21	4,776,442	0	0	0	0	0	0	21	4,776,442
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	4,252	1,316,704,296	0	(a) 0	0	0	0	0	4,252	1,316,704,296
21.	Issued during year	110	75,692,308	0	0	0	0	0	0	110	75,692,308
22.	Other changes to in force (Net)	(231)	(98,151,832)	0	0	0	0	0	0	(231)	(98,151,832)
23.	In force December 31 of current year	4,131	1,294,244,772	0	(a) 0	0	0	0	0	4,131	1,294,244,772

(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)	97,707	98,069	0	29,500	60,717
25.2	Guaranteed renewable (b)	13,232	13,281	0	13,333	13,333
25.3	Non-renewable for stated reasons only (b)	16,151	16,211	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)	127,090	127,561	0	42,833	74,050
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	127,090	127,561	0	42,833	74,050

(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.

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DIRECT BUSINESS IN THE STATE OF NEW HAMPSHIRE DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	3,082,741	0	0	0	3,082,741
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)	3,082,741	0	0	0	3,082,741
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,533,263	0	0	0	1,533,263
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	726,451	0	0	0	726,451
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	2,259,714	0	0	0	2,259,714
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	4	1,033,263	0	0	0	0	0	0	4	1,033,263
	Settled during current year:										
18.1	By payment in full	4	1,033,263	0	0	0	0	0	0	4	1,033,263
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	4	1,033,263	0	0	0	0	0	0	4	1,033,263
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	4	1,033,263	0	0	0	0	0	0	4	1,033,263
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,684	1,015,423,872	0	(a) 0	0	0	0	0	1,684	1,015,423,872
21.	Issued during year	175	119,836,938	0	0	0	0	0	0	175	119,836,938
22.	Other changes to in force (Net)	(81)	(57,876,725)	0	0	0	0	0	0	(81)	(57,876,725)
23.	In force December 31 of current year	1,778	1,077,384,085	0	(a) 0	0	0	0	0	1,778	1,077,384,085

(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:					
25.1	Non-cancelable (b)	104,677	105,065	0	0	0
25.2	Guaranteed renewable (b)	1,808	1,814	0	0	0
25.3	Non-renewable for stated reasons only (b)	996	1,000	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)	107,481	107,879	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	107,481	107,879	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.

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DIRECT BUSINESS IN THE STATE OF NEW JERSEY DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	20,614,381	0	0	0	20,614,381
2.	Annuity considerations	500	0	0	0	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)	20,614,881	0	0	0	20,614,881
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,202,024	0	0	0	2,202,024
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	12,979	0	0	0	12,979
12.	Surrender values and withdrawals for life contracts	572,225	0	0	0	572,225
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	2,787,228	0	0	0	2,787,228
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	2	2,150,001	0	0	0	0	0	0	2	2,150,001
17.	Incurred during current year	8	3,192,024	0	0	0	0	0	0	8	3,192,024
	Settled during current year:										
18.1	By payment in full	8	2,710,000	0	0	0	0	0	0	8	2,710,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	8	2,710,000	0	0	0	0	0	0	8	2,710,000
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	8	2,710,000	0	0	0	0	0	0	8	2,710,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	2,632,025	0	0	0	0	0	0	2	2,632,025
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	5,777	3,931,947,729	0	(a) 0	0	0	0	0	5,777	3,931,947,729
21.	Issued during year	594	420,729,156	0	0	0	0	0	0	594	420,729,156
22.	Other changes to in force (Net)	(318)	(210,533,199)	0	0	0	0	0	0	(318)	(210,533,199)
23.	In force December 31 of current year	6,053	4,142,143,686	0	(a) 0	0	0	0	0	6,053	4,142,143,686

(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)	543,784	545,797	0	645,333	686,520
25.2	Guaranteed renewable (b)	(21,976)	(22,058)	0	34,459	35,101
25.3	Non-renewable for stated reasons only (b)	35,166	35,297	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)	556,974	559,036	0	679,792	721,621
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	556,974	559,036	0	679,792	721,621

(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.

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DIRECT BUSINESS IN THE STATE OF NEW MEXICO DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	1,119,785	0	0	0	1,119,785
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)	1,119,785	0	0	0	1,119,785
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	350,000	0	0	0	350,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	217,504	0	0	0	217,504
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	567,504	0	0	0	567,504
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	3	400,000	0	0	0	0	0	0	3	400,000
Settled during current year:										
18.1 By payment in full	3	400,000	0	0	0	0	0	0	3	400,000
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	3	400,000	0	0	0	0	0	0	3	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	3	400,000	0	0	0	0	0	0	3	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					No. of Pol.					
20. In force December 31, prior year	565	282,414,030	0	(a) 0	0	0	0	0	565	282,414,030
21. Issued during year	34	20,775,000	0	0	0	0	0	0	34	20,775,000
22. Other changes to in force (Net)	(41)	(27,762,327)	0	0	0	0	0	0	(41)	(27,762,327)
23. In force December 31 of current year	558	275,426,703	0	(a) 0	0	0	0	0	558	275,426,703

(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)	43,354	43,515	0	36,000	36,000
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)	43,354	43,515	0	36,000	36,000
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	43,354	43,515	0	36,000	36,000

(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.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	1,625,967	0	0	0	1,625,967
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)	1,625,967	0	0	0	1,625,967
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	858,000	0	0	0	858,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	255,028	0	0	0	255,028
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	1,113,028	0	0	0	1,113,028
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	5	2,255,000	0	0	0	0	0	0	5	2,255,000
	Settled during current year:										
18.1	By payment in full	5	2,255,000	0	0	0	0	0	0	5	2,255,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	5	2,255,000	0	0	0	0	0	0	5	2,255,000
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	2,255,000	0	0	0	0	0	0	5	2,255,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,009	717,464,468	0	(a) 0	0	0	0	0	1,009	717,464,468
21.	Issued during year	88	63,882,500	0	0	0	0	0	0	88	63,882,500
22.	Other changes to in force (Net)	(58)	(26,778,757)	0	0	0	0	0	0	(58)	(26,778,757)
23.	In force December 31 of current year	1,039	754,568,211	0	(a) 0	0	0	0	0	1,039	754,568,211

(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)	48,417	48,596	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)	48,417	48,596	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	48,417	48,596	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.

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DIRECT BUSINESS IN THE STATE OF NEW YORK DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	1,129,306	0	0	0	1,129,306
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)	1,129,306	0	0	0	1,129,306
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,000,000	0	0	0	1,000,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	133,172	0	0	0	133,172
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	1,133,172	0	0	0	1,133,172
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	0	0	0	0	0	0	0	0	0	0
	Settled during current year:										
18.1	By payment in full	0	0	0	0	0	0	0	0	0	0
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	0	0	0	0	0	0	0	0	0	0
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	0	0	0	0	0	0	0	0	0	0
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	393	376,389,651	0	(a) 0	0	0	0	0	393	376,389,651
21.	Issued during year	13	13,800,027	0	0	0	0	0	0	13	13,800,027
22.	Other changes to in force (Net)	(5)	(803,667)	0	0	0	0	0	0	(5)	(803,667)
23.	In force December 31 of current year	401	389,386,011	0	(a) 0	0	0	0	0	401	389,386,011

(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)	48,213	48,391	0	0	0
25.2	Guaranteed renewable (b)	(2,933)	(2,944)	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)	45,280	45,447	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	45,280	45,447	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.

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DIRECT BUSINESS IN THE STATE OF OHIO DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	45,233,613	0	0	0	45,233,613
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	102,313,563	XXX	0	XXX	102,313,563
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	147,547,176	0	0	0	147,547,176
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	20,645,505	0	0	0	20,645,505
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	474,502	0	0	0	474,502
12.	Surrender values and withdrawals for life contracts	9,794,885	0	0	0	9,794,885
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	30,914,892	0	0	0	30,914,892
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	35	2,200,316	0	0	0	0	0	0	35	2,200,316
17. Incurred during current year	96	26,311,884	0	0	0	0	0	0	96	26,311,884
Settled during current year:										
18.1 By payment in full	95	24,572,007	0	0	0	0	0	0	95	24,572,007
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	95	24,572,007	0	0	0	0	0	0	95	24,572,007
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	95	24,572,007	0	0	0	0	0	0	95	24,572,007
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	36	3,940,193	0	0	0	0	0	0	36	3,940,193
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	22,854	10,534,064,514	0	(a) 0	0	0	0	0	22,854	10,534,064,514
21. Issued during year	1,340	797,793,264	0	0	0	0	0	0	1,340	797,793,264
22. Other changes to in force (Net)	(1,380)	(638,805,421)	0	0	0	0	0	0	(1,380)	(638,805,421)
23. In force December 31 of current year	22,814	10,693,052,357	0	(a) 0	0	0	0	0	22,814	10,693,052,357

(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)	1,546,534	1,552,259	0	878,775	876,645
25.2	Guaranteed renewable (b)	49,675	49,859	0	6,000	5,625
25.3	Non-renewable for stated reasons only (b)	48,568	48,748	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)	1,644,777	1,650,866	0	884,775	882,270
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,644,777	1,650,866	0	884,775	882,270

(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.

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DIRECT BUSINESS IN THE STATE OF OKLAHOMA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	11,635,821	0	0	0	11,635,821
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)	11,635,821	0	0	0	11,635,821
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	3,620,731	0	0	0	3,620,731
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	10,802	0	0	0	10,802
12.	Surrender values and withdrawals for life contracts	340,619	0	0	0	340,619
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	3,972,152	0	0	0	3,972,152
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	2	8,000,000	0	0	0	0	0	0	2	8,000,000
17.	Incurred during current year	13	3,777,187	0	0	0	0	0	0	13	3,777,187
	Settled during current year:										
18.1	By payment in full	11	7,410,321	0	0	0	0	0	0	11	7,410,321
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	11	7,410,321	0	0	0	0	0	0	11	7,410,321
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	7,410,321	0	0	0	0	0	0	11	7,410,321
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	4	4,366,866	0	0	0	0	0	0	4	4,366,866
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	3,612	1,849,286,364	0	(a) 0	0	0	0	0	3,612	1,849,286,364
21.	Issued during year	332	197,048,157	0	0	0	0	0	0	332	197,048,157
22.	Other changes to in force (Net)	(214)	(96,495,036)	0	0	0	0	0	0	(214)	(96,495,036)
23.	In force December 31 of current year	3,730	1,949,839,485	0	(a) 0	0	0	0	0	3,730	1,949,839,485

(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)	289,730	290,803	0	36,000	36,000
25.2	Guaranteed renewable (b)	4,829	4,847	0	0	0
25.3	Non-renewable for stated reasons only (b)	6,602	6,626	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)	301,161	302,276	0	36,000	36,000
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	301,161	302,276	0	36,000	36,000

(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.

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DIRECT BUSINESS IN THE STATE OF OREGON DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	5,729,320	0	0	0	5,729,320
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)	5,729,320	0	0	0	5,729,320
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	3,013,630	0	0	0	3,013,630
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	422,449	0	0	0	422,449
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	3,436,079	0	0	0	3,436,079
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	2	714,707	0	0	0	0	0	0	2	714,707
17.	Incurred during current year	9	2,094,193	0	0	0	0	0	0	9	2,094,193
	Settled during current year:										
18.1	By payment in full	9	1,850,078	0	0	0	0	0	0	9	1,850,078
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	9	1,850,078	0	0	0	0	0	0	9	1,850,078
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	1,850,078	0	0	0	0	0	0	9	1,850,078
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	958,822	0	0	0	0	0	0	2	958,822
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	4,138	2,341,397,896	0	(a) 0	0	0	0	0	4,138	2,341,397,896
21.	Issued during year	340	218,466,815	0	0	0	0	0	0	340	218,466,815
22.	Other changes to in force (Net)	(192)	(84,587,075)	0	0	0	0	0	0	(192)	(84,587,075)
23.	In force December 31 of current year	4,286	2,475,277,636	0	(a) 0	0	0	0	0	4,286	2,475,277,636

(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)	236,471	237,347	0	119,328	119,334
25.2	Guaranteed renewable (b)	18,602	18,671	0	0	0
25.3	Non-renewable for stated reasons only (b)	20,577	20,653	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)	275,650	276,671	0	119,328	119,334
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	275,650	276,671	0	119,328	119,334

(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.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	28,428	0	0	0	28,428
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)	28,428	0	0	0	28,428
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	0	0	0	0	0
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	0	0	0	0	0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	0	0	0	0	0
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

NONE

		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					No. of Pol.					
20.	In force December 31, prior year	0	0	0	(a) 0	0	0	0	0	0	0
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23.	In force December 31 of current year	0	0	0	(a) 0	0	0	0	0	0	0

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

ACCIDENT AND HEALTH INSURANCE

		1 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)	16,143	16,203	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)	16,143	16,203	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	16,143	16,203	0	0	0

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

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DIRECT BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	20,348,675	0	0	0	20,348,675
2.	Annuity considerations	46,127	0	0	0	46,127
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)	20,394,802	0	0	0	20,394,802
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	6,407,043	0	0	0	6,407,043
10.	Matured endowments	10,063	0	0	0	10,063
11.	Annuity benefits	1,037,130	0	0	0	1,037,130
12.	Surrender values and withdrawals for life contracts	2,362,637	0	0	0	2,362,637
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	9,816,873	0	0	0	9,816,873
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	2	3,492,000	0	0	0	0	0	0	2	3,492,000
17.	Incurred during current year	54	5,701,632	0	0	0	0	0	0	54	5,701,632
	Settled during current year:										
18.1	By payment in full	55	9,093,632	0	0	0	0	0	0	55	9,093,632
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	55	9,093,632	0	0	0	0	0	0	55	9,093,632
18.4	Reduction by compromise	1	100,000	0	0	0	0	0	0	1	100,000
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	56	9,193,632	0	0	0	0	0	0	56	9,193,632
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	14,397	6,385,829,116	0	(a) 0	0	0	0	0	14,397	6,385,829,116
21.	Issued during year	789	550,417,877	0	0	0	0	0	0	789	550,417,877
22.	Other changes to in force (Net)	(767)	(390,489,208)	0	0	0	0	0	0	(767)	(390,489,208)
23.	In force December 31 of current year	14,419	6,545,757,785	0	(a) 0	0	0	0	0	14,419	6,545,757,785

(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)	996,990	995,499	0	325,286	479,716
25.2	Guaranteed renewable (b)	119,468	119,910	0	58,661	65,364
25.3	Non-renewable for stated reasons only (b)	28,050	28,154	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)	1,144,508	1,143,563	0	383,947	545,080
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,144,508	1,143,563	0	383,947	545,080

(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.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	4,124,426	0	0	0	4,124,426
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)	4,124,426	0	0	0	4,124,426
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	0	0	0	0	0
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	550,575	0	0	0	550,575
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	550,575	0	0	0	550,575
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	1	500,000	0	0	0	0	0	0	1	500,000
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	1	500,000	0	0	0	0	0	0	1	500,000
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	1	500,000	0	0	0	0	0	0	1	500,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	1,106	1,114,069,844	0	(a) 0	0	0	0	0	1,106	1,114,069,844
21. Issued during year	46	35,462,099	0	0	0	0	0	0	46	35,462,099
22. Other changes to in force (Net)	(60)	(49,793,636)	0	0	0	0	0	0	(60)	(49,793,636)
23. In force December 31 of current year	1,092	1,099,738,307	0	(a) 0	0	0	0	0	1,092	1,099,738,307

(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)	1,015,198	1,018,956	0	0	0
25.2	Guaranteed renewable (b)	0	0	0	0	0
25.3	Non-renewable for stated reasons only (b)	39,510	39,656	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)	1,054,708	1,058,612	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,054,708	1,058,612	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.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	1,530,303	0	0	0	1,530,303
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)	1,530,303	0	0	0	1,530,303
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	900,000	0	0	0	900,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	45,279	0	0	0	45,279
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	945,279	0	0	0	945,279
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	270,909	0	0	0	0	0	0	1	270,909
17.	Incurred during current year	3	1,100,000	0	0	0	0	0	0	3	1,100,000
	Settled during current year:										
18.1	By payment in full	3	1,100,000	0	0	0	0	0	0	3	1,100,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	3	1,100,000	0	0	0	0	0	0	3	1,100,000
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	3	1,100,000	0	0	0	0	0	0	3	1,100,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	270,909	0	0	0	0	0	0	1	270,909
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,209	679,162,480	0	(a) 0	0	0	0	0	1,209	679,162,480
21.	Issued during year	124	63,962,304	0	0	0	0	0	0	124	63,962,304
22.	Other changes to in force (Net)	(78)	(57,175,023)	0	0	0	0	0	0	(78)	(57,175,023)
23.	In force December 31 of current year	1,255	685,949,761	0	(a) 0	0	0	0	0	1,255	685,949,761

(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)	43,388	43,548	0	0	0
25.2	Guaranteed renewable (b)	2,500	2,509	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)	45,888	46,057	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	45,888	46,057	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.

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DIRECT BUSINESS IN THE STATE OF SOUTH CAROLINA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	3,845,181	0	0	0	3,845,181
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)	3,845,181	0	0	0	3,845,181
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,072,453	0	0	0	2,072,453
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	8,496	0	0	0	8,496
12.	Surrender values and withdrawals for life contracts	313,350	0	0	0	313,350
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	2,394,299	0	0	0	2,394,299
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	3	797,725	0	0	0	0	0	0	3	797,725
17.	Incurred during current year	9	1,361,188	0	0	0	0	0	0	9	1,361,188
	Settled during current year:										
18.1	By payment in full	9	1,363,688	0	0	0	0	0	0	9	1,363,688
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	9	1,363,688	0	0	0	0	0	0	9	1,363,688
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	1,363,688	0	0	0	0	0	0	9	1,363,688
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	3	795,225	0	0	0	0	0	0	3	795,225
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	3,124	1,571,873,963	0	(a) 0	0	0	0	0	3,124	1,571,873,963
21.	Issued during year	215	132,005,331	0	0	0	0	0	0	215	132,005,331
22.	Other changes to in force (Net)	(108)	(48,345,424)	0	0	0	0	0	0	(108)	(48,345,424)
23.	In force December 31 of current year	3,231	1,655,533,870	0	(a) 0	0	0	0	0	3,231	1,655,533,870

(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)	101,933	102,310	0	67,371	67,370
25.2	Guaranteed renewable (b)	9,061	9,095	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)	110,994	111,405	0	67,371	67,370
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	110,994	111,405	0	67,371	67,370

(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.

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DIRECT BUSINESS IN THE STATE OF SOUTH DAKOTA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	469,322	0	0	0	469,322
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)	469,322	0	0	0	469,322
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	489,462	0	0	0	489,462
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	185,198	0	0	0	185,198
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	674,660	0	0	0	674,660
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	4	1,571,915	0	0	0	0	0	0	4	1,571,915
	Settled during current year:										
18.1	By payment in full	3	1,544,917	0	0	0	0	0	0	3	1,544,917
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	3	1,544,917	0	0	0	0	0	0	3	1,544,917
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	3	1,544,917	0	0	0	0	0	0	3	1,544,917
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	26,998	0	0	0	0	0	0	1	26,998
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	434	222,818,746	0	(a) 0	0	0	0	0	434	222,818,746
21.	Issued during year	27	20,463,648	0	0	0	0	0	0	27	20,463,648
22.	Other changes to in force (Net)	(34)	(22,746,042)	0	0	0	0	0	0	(34)	(22,746,042)
23.	In force December 31 of current year	427	220,536,352	0	(a) 0	0	0	0	0	427	220,536,352

(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:					
25.1	Non-cancelable (b)	32,501	32,621	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)	32,501	32,621	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	32,501	32,621	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.

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DIRECT BUSINESS IN THE STATE OF TENNESSEE DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	19,920,025	0	0	0	19,920,025
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	125,339	XXX	0	XXX	125,339
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	20,045,364	0	0	0	20,045,364
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	7,565,166	0	0	0	7,565,166
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	217,027	0	0	0	217,027
12.	Surrender values and withdrawals for life contracts	6,473,041	0	0	0	6,473,041
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	14,255,234	0	0	0	14,255,234
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	34	9,182,425	0	0	0	0	0	0	34	9,182,425
	Settled during current year:										
18.1	By payment in full	34	9,182,425	0	0	0	0	0	0	34	9,182,425
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	34	9,182,425	0	0	0	0	0	0	34	9,182,425
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	9,182,425	0	0	0	0	0	0	34	9,182,425
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	8,427	5,101,228,172	0	(a) 0	0	0	0	0	8,427	5,101,228,172
21.	Issued during year	482	376,767,729	0	0	0	0	0	0	482	376,767,729
22.	Other changes to in force (Net)	(443)	(296,518,533)	0	0	0	0	0	0	(443)	(296,518,533)
23.	In force December 31 of current year	8,466	5,181,477,368	0	(a) 0	0	0	0	0	8,466	5,181,477,368

(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)	544,127	546,141	0	230,168	228,856
25.2	Guaranteed renewable (b)	9,540	9,575	0	0	0
25.3	Non-renewable for stated reasons only (b)	55,617	55,822	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)	609,284	611,538	0	230,168	228,856
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	609,284	611,538	0	230,168	228,856

(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.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	48,554,967	0	0	0	48,554,967
2.	Annuity considerations	113	0	0	0	113
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)	48,555,080	0	0	0	48,555,080
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	21,246,802	0	0	0	21,246,802
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	2,223	0	0	0	2,223
12.	Surrender values and withdrawals for life contracts	4,273,976	0	0	0	4,273,976
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	25,523,001	0	0	0	25,523,001
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	19	3,850,001	0	0	0	0	0	0	19	3,850,001
17. Incurred during current year	60	22,771,603	0	0	0	0	0	0	60	22,771,603
Settled during current year:										
18.1 By payment in full	70	23,939,195	0	0	0	0	0	0	70	23,939,195
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	70	23,939,195	0	0	0	0	0	0	70	23,939,195
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	23,939,195	0	0	0	0	0	0	70	23,939,195
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	9	2,682,409	0	0	0	0	0	0	9	2,682,409
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	19,121	12,043,904,410	0	(a) 0	0	0	0	0	19,121	12,043,904,410
21. Issued during year	1,600	1,275,142,141	0	0	0	0	0	0	1,600	1,275,142,141
22. Other changes to in force (Net)	(1,245)	(713,455,426)	0	0	0	0	0	0	(1,245)	(713,455,426)
23. In force December 31 of current year	19,476	12,605,591,125	0	(a) 0	0	0	0	0	19,476	12,605,591,125

(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)	1,311,567	1,316,421	0	1,639,773	1,691,400
25.2	Guaranteed renewable (b)	5,654	5,675	0	38,524	36,991
25.3	Non-renewable for stated reasons only (b)	29,375	29,484	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)	1,346,596	1,351,580	0	1,678,297	1,728,391
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,346,596	1,351,580	0	1,678,297	1,728,391

(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.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	6,818,706	0	0	0	6,818,706
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)	6,818,706	0	0	0	6,818,706
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,884,329	0	0	0	2,884,329
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	440,053	0	0	0	440,053
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	3,324,382	0	0	0	3,324,382
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	100,000	0	0	0	0	0	0	1	100,000
17.	Incurred during current year	5	3,400,000	0	0	0	0	0	0	5	3,400,000
	Settled during current year:										
18.1	By payment in full	5	3,400,000	0	0	0	0	0	0	5	3,400,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	5	3,400,000	0	0	0	0	0	0	5	3,400,000
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	3,400,000	0	0	0	0	0	0	5	3,400,000
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					No. of Pol.					
20.	In force December 31, prior year	5,374	3,774,074,122	0	(a) 0	0	0	0	0	5,374	3,774,074,122
21.	Issued during year	720	513,332,280	0	0	0	0	0	0	720	513,332,280
22.	Other changes to in force (Net)	(259)	(174,266,076)	0	0	0	0	0	0	(259)	(174,266,076)
23.	In force December 31 of current year	5,835	4,113,140,326	0	(a) 0	0	0	0	0	5,835	4,113,140,326

(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)	191,119	191,826	0	104,400	110,490
25.2	Guaranteed renewable (b)	10,128	10,165	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)	201,247	201,991	0	104,400	110,490
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	201,247	201,991	0	104,400	110,490

(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.

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DIRECT BUSINESS IN THE STATE OF VIRGINIA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	23,225,555	0	0	0	23,225,555
2.	Annuity considerations	1,260	0	0	0	1,260
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	23,226,815	0	0	0	23,226,815
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	4,718,143	0	0	0	4,718,143
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	21,476	0	0	0	21,476
12.	Surrender values and withdrawals for life contracts	760,433	0	0	0	760,433
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	5,500,052	0	0	0	5,500,052
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	2	5,115,363	0	0	0	0	0	0	2	5,115,363
17.	Incurred during current year	17	3,388,342	0	0	0	0	0	0	17	3,388,342
	Settled during current year:										
18.1	By payment in full	17	8,293,705	0	0	0	0	0	0	17	8,293,705
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	17	8,293,705	0	0	0	0	0	0	17	8,293,705
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	8,293,705	0	0	0	0	0	0	17	8,293,705
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	210,000	0	0	0	0	0	0	2	210,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	7,087	4,393,856,386	0	(a) 0	0	0	0	0	7,087	4,393,856,386
21.	Issued during year	537	362,768,907	0	0	0	0	0	0	537	362,768,907
22.	Other changes to in force (Net)	(383)	(236,159,417)	0	0	0	0	0	0	(383)	(236,159,417)
23.	In force December 31 of current year	7,241	4,520,465,876	0	(a) 0	0	0	0	0	7,241	4,520,465,876

(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)	358,350	359,676	0	884,410	829,968
25.2	Guaranteed renewable (b)	4,310	4,326	0	0	0
25.3	Non-renewable for stated reasons only (b)	6,992	7,018	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)	369,652	371,020	0	884,410	829,968
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	369,652	371,020	0	884,410	829,968

(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.

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

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	17,789	0	0	0	17,789
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)	17,789	0	0	0	17,789
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	0	0	0	0	0
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	0	0	0	0	0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	0	0	0	0	0
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	5	2,800,000	0	(a) 0	0	0	0	0	5	2,800,000
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	200,000	0	0	0	0	0	0	0	200,000
23. In force December 31 of current year	5	3,000,000	0	(a) 0	0	0	0	0	5	3,000,000

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

DIRECT BUSINESS IN THE STATE OF VERMONT DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	527,191	0	0	0	527,191
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)	527,191	0	0	0	527,191
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,225,000	0	0	0	1,225,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	738	0	0	0	738
12.	Surrender values and withdrawals for life contracts	16,397	0	0	0	16,397
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	1,242,135	0	0	0	1,242,135
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	1	225,000	0	0	0	0	0	0	1	225,000
	Settled during current year:										
18.1	By payment in full	1	225,000	0	0	0	0	0	0	1	225,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	1	225,000	0	0	0	0	0	0	1	225,000
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	225,000	0	0	0	0	0	0	1	225,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	538	270,159,736	0	(a) 0	0	0	0	0	538	270,159,736
21.	Issued during year	38	26,775,200	0	0	0	0	0	0	38	26,775,200
22.	Other changes to in force (Net)	(36)	(24,510,373)	0	0	0	0	0	0	(36)	(24,510,373)
23.	In force December 31 of current year	540	272,424,563	0	(a) 0	0	0	0	0	540	272,424,563

(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)	6,273	6,297	0	0	0
25.2	Guaranteed renewable (b)	2,656	2,666	0	0	0
25.3	Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4	Other accident only	0	0	0	0	0
25.5	All other (b)	0	0	0	0	0
25.6	Totals (Sum of Lines 25.1 to 25.5)	8,929	8,963	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	8,929	8,963	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.

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DIRECT BUSINESS IN THE STATE OF WASHINGTON DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	8,065,550	0	0	0	8,065,550
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)	8,065,550	0	0	0	8,065,550
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	4,454,417	0	0	0	4,454,417
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	2,944,565	0	0	0	2,944,565
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	7,398,982	0	0	0	7,398,982
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	13	3,954,417	0	0	0	0	0	0	13	3,954,417
	Settled during current year:										
18.1	By payment in full	9	2,054,417	0	0	0	0	0	0	9	2,054,417
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	9	2,054,417	0	0	0	0	0	0	9	2,054,417
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	2,054,417	0	0	0	0	0	0	9	2,054,417
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	4	1,900,000	0	0	0	0	0	0	4	1,900,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	6,125	3,698,618,440	0	(a) 0	0	0	0	0	6,125	3,698,618,440
21.	Issued during year	410	335,208,991	0	0	0	0	0	0	410	335,208,991
22.	Other changes to in force (Net)	(319)	(210,784,025)	0	0	0	0	0	0	(319)	(210,784,025)
23.	In force December 31 of current year	6,216	3,823,043,406	0	(a) 0	0	0	0	0	6,216	3,823,043,406

(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)	327,464	328,676	0	987,269	988,883
25.2	Guaranteed renewable (b)	23,307	23,394	0	16,000	16,000
25.3	Non-renewable for stated reasons only (b)	29,992	30,103	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)	380,763	382,173	0	1,003,269	1,004,883
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	380,763	382,173	0	1,003,269	1,004,883

(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.

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DIRECT BUSINESS IN THE STATE OF WISCONSIN DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	6,134,359	0	0	0	6,134,359
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	47,543	XXX	0	XXX	47,543
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	6,181,902	0	0	0	6,181,902
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	5,322,159	0	0	0	5,322,159
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	57,799	0	0	0	57,799
12.	Surrender values and withdrawals for life contracts	1,300,069	0	0	0	1,300,069
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	6,680,027	0	0	0	6,680,027
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	9	616,827	0	0	0	0	0	0	9	616,827
17.	Incurred during current year	10	5,935,351	0	0	0	0	0	0	10	5,935,351
	Settled during current year:										
18.1	By payment in full	11	6,066,351	0	0	0	0	0	0	11	6,066,351
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	11	6,066,351	0	0	0	0	0	0	11	6,066,351
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	6,066,351	0	0	0	0	0	0	11	6,066,351
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	8	485,827	0	0	0	0	0	0	8	485,827
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	6,191	3,135,487,510	0	(a) 0	0	0	0	0	6,191	3,135,487,510
21.	Issued during year	302	194,486,860	0	0	0	0	0	0	302	194,486,860
22.	Other changes to in force (Net)	(488)	(259,083,821)	0	0	0	0	0	0	(488)	(259,083,821)
23.	In force December 31 of current year	6,005	3,070,890,549	0	(a) 0	0	0	0	0	6,005	3,070,890,549

(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)	422,305	423,868	0	80,840	84,852
25.2	Guaranteed renewable (b)	31,205	31,320	0	0	0
25.3	Non-renewable for stated reasons only (b)	13,230	13,279	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)	466,740	468,467	0	80,840	84,852
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	466,740	468,467	0	80,840	84,852

(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.

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DIRECT BUSINESS IN THE STATE OF WEST VIRGINIA DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	1,315,487	0	0	0	1,315,487
2.	Annuity considerations	100	0	0	0	100
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)	1,315,587	0	0	0	1,315,587
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	555,000	0	0	0	555,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	21,493	0	0	0	21,493
12.	Surrender values and withdrawals for life contracts	105,282	0	0	0	105,282
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	681,775	0	0	0	681,775
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	2	555,000	0	0	0	0	0	0	2	555,000
	Settled during current year:										
18.1	By payment in full	2	555,000	0	0	0	0	0	0	2	555,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	2	555,000	0	0	0	0	0	0	2	555,000
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	2	555,000	0	0	0	0	0	0	2	555,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,158	393,030,207	0	(a) 0	0	0	0	0	1,158	393,030,207
21.	Issued during year	45	25,197,500	0	0	0	0	0	0	45	25,197,500
22.	Other changes to in force (Net)	(76)	(28,350,901)	0	0	0	0	0	0	(76)	(28,350,901)
23.	In force December 31 of current year	1,127	389,876,806	0	(a) 0	0	0	0	0	1,127	389,876,806

(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:					
25.1	Non-cancelable (b)	227,914	228,757	0	543,574	559,329
25.2	Guaranteed renewable (b)	2,748	2,758	0	0	0
25.3	Non-renewable for stated reasons only (b)	1,296	1,301	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)	231,958	232,816	0	543,574	559,329
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	231,958	232,816	0	543,574	559,329

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

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DIRECT BUSINESS IN THE STATE OF WYOMING DURING THE YEAR

NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	949,499	0	0	0	949,499
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	81,726	XXX	0	XXX	81,726
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	1,031,225	0	0	0	1,031,225
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,248,237	0	0	0	2,248,237
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	12,670	0	0	0	12,670
12.	Surrender values and withdrawals for life contracts	149,205	0	0	0	149,205
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	2,410,112	0	0	0	2,410,112
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	7	1,160,356	0	0	0	0	0	0	7	1,160,356
Settled during current year:										
18.1 By payment in full	6	910,356	0	0	0	0	0	0	6	910,356
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	6	910,356	0	0	0	0	0	0	6	910,356
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	910,356	0	0	0	0	0	0	6	910,356
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	250,000	0	0	0	0	0	0	1	250,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year	868	397,294,440	0	(a) 0	0	0	0	0	868	397,294,440
21. Issued during year	80	44,329,135	0	0	0	0	0	0	80	44,329,135
22. Other changes to in force (Net)	(67)	(23,771,735)	0	0	0	0	0	0	(67)	(23,771,735)
23. In force December 31 of current year	881	417,851,840	0	(a) 0	0	0	0	0	881	417,851,840

(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)	20,410	20,486	0	0	0
25.2	Guaranteed renewable (b)	516	518	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)	20,926	21,004	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	20,926	21,004	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.

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

Interest Maintenance Reserve

	1 Amount
1. Reserve as of December 31, prior year	9,095,138
2. Current year's realized pre-tax capital gains/(losses) of $.....3,358,432 transferred into the reserve net of taxes of $.....1,175,451	2,182,981
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)	11,278,119
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)	3,119,128
6. Reserve as of December 31, current year (Line 4 minus Line 5)	8,158,990

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	2,276,983	842,145	0	3,119,128
2. 2017	1,609,446	277,539	0	1,886,985
3. 2018	1,309,757	115,180	0	1,424,937
4. 2019	1,030,052	115,797	0	1,145,849
5. 2020	783,174	115,926	0	899,100
6. 2021	597,788	117,205	0	714,993
7. 2022	463,656	112,634	0	576,290
8. 2023	343,176	103,697	0	446,873
9. 2024	235,211	94,139	0	329,351
10. 2025	168,269	83,813	0	252,082
11. 2026	113,366	73,732	0	187,097
12. 2027	57,913	60,725	0	118,637
13. 2028	16,513	46,928	0	63,441
14. 2029	(889)	31,139	0	30,251
15. 2030	(5,322)	14,632	0	9,310
16. 2031	(3,135)	(1,304)	0	(4,438)
17. 2032	3,022	(8,937)	0	(5,915)
18. 2033	6,853	(6,997)	0	(143)
19. 2034	10,797	(4,896)	0	5,901
20. 2035	12,787	(2,654)	0	10,133
21. 2036	13,600	(565)	0	13,034
22. 2037	14,057	596	0	14,654
23. 2038	13,090	543	0	13,632
24. 2039	10,434	464	0	10,899
25. 2040	7,743	403	0	8,146
26. 2041	5,028	331	0	5,360
27. 2042	1,616	269	0	1,885
28. 2043	117	214	0	331
29. 2044	35	154	0	189
30. 2045	0	93	0	93
31. 2046 and Later	0	33	0	33
32. Total (Lines 1 to 31)	9,095,138	2,182,981	0	11,278,119

ASSET VALUATION RESERVE

	Default Component			Equity Component			7
	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)	Total Amount (Cols. 3 + 6)
1. Reserve as of December 31, prior year	18,275,338	2,640,020	20,915,358	8,859,264	20,409	8,879,673	29,795,031
2. Realized capital gains/(losses) net of taxes - General Account	(2,037,382)	0	(2,037,382)	0	(82,913)	(82,913)	(2,120,295)
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	36,257	0	36,257	1,887	0	1,887	38,144
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	4,384,605	417,289	4,801,894	0	0	0	4,801,894
8. Accumulated balances (Lines 1 through 5, minus 6 plus 7)	20,658,817	3,057,309	23,716,127	8,861,151	(62,504)	8,798,647	32,514,774
9. Maximum reserve	21,711,873	2,565,562	24,277,435	13,598,618	0	13,598,618	37,876,053
10. Reserve objective	15,237,927	1,973,509	17,211,436	13,579,339	0	13,579,339	30,790,775
11. 20% of (Line 10 minus Line 8)	(1,084,178)	(216,760)	(1,300,938)	943,638	12,501	956,138	(344,800)
12. Balance before transfers (Lines 8 + 11)	19,574,639	2,840,549	22,415,189	9,804,789	(50,003)	9,754,785	32,169,974
13. Transfers	274,987	(274,987)	0	(50,004)	50,004	0	0
14. Voluntary contribution	0	0	0	0	0	0	0
15. Adjustment down to maximum/up to zero	0	0	0	0	0	0	0
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	19,849,626	2,565,562	22,415,189	9,754,785	1	9,754,785	32,169,974

ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

Line Number	NAIC Desig-nation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
		LONG-TERM BONDS										
1		Exempt obligations	108,662,645	XXX	XXX	108,662,645	0.0000	0	0.0000	0	0.0000	0
2	1	Highest quality	1,626,209,297	XXX	XXX	1,626,209,297	0.0004	650,484	0.0023	3,740,281	0.0030	4,878,628
3	2	High quality	957,238,127	XXX	XXX	957,238,127	0.0019	1,818,752	0.0058	5,551,981	0.0090	8,615,143
4	3	Medium quality	121,463,310	XXX	XXX	121,463,310	0.0093	1,129,609	0.0230	2,793,656	0.0340	4,129,753
5	4	Low quality	20,432,599	XXX	XXX	20,432,599	0.0213	435,214	0.0530	1,082,928	0.0750	1,532,445
6	5	Lower quality	7,026,565	XXX	XXX	7,026,565	0.0432	303,548	0.1100	772,922	0.1700	1,194,516
7	6	In or near default	5,843,922	XXX	XXX	5,843,922	0.0000	0	0.2000	1,168,784	0.2000	1,168,784
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)	2,846,876,465	XXX	XXX	2,846,876,465	XXX	4,337,607	XXX	15,110,553	XXX	21,519,269
		PREFERRED STOCKS										
10	1	Highest quality	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
11	2	High quality	10,120,000	XXX	XXX	10,120,000	0.0019	19,228	0.0058	58,696	0.0090	91,080
12	3	Medium quality	2,986,000	XXX	XXX	2,986,000	0.0093	27,770	0.0230	68,678	0.0340	101,524
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)	13,106,000	XXX	XXX	13,106,000	XXX	46,998	XXX	127,374	XXX	192,604
		SHORT-TERM BONDS										
18		Exempt obligations	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
19	1	Highest quality	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
20	2	High quality	0	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
21	3	Medium quality	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
22	4	Low quality	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
23	5	Lower quality	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
24	6	In or near default	0	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
25		Total short-term bonds (sum of Lines 18 through 24)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
		DERIVATIVE INSTRUMENTS										
26		Exchange traded	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
27	1	Highest quality	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
28	2	High quality	0	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
29	3	Medium quality	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
30	4	Low quality	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
31	5	Lower quality	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
32	6	In or near default	0	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
33		Total derivative instruments	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
34		Total (Lines 9 + 17 + 25 + 33)	2,859,982,465	XXX	XXX	2,859,982,465	XXX	4,384,605	XXX	15,237,927	XXX	21,711,873

ASSET VALUATION RESERVE (continued)

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

Line Number	NAIC Desig-nation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution 5 Factor	Basic Contribution 6 Amount (Cols. 4 x 5)	Reserve Objective 7 Factor	Reserve Objective 8 Amount (Cols. 4 x 7)	Maximum Reserve 9 Factor	Maximum Reserve 10 Amount (Cols. 4 x 9)
		MORTGAGE LOANS										
		In good standing:										
35		Farm mortgages - CM1 - highest quality	0	0	XXX	0	0.0010	0	0.0050	0	0.0065	0
36		Farm mortgages - CM2 - high quality	0	0	XXX	0	0.0035	0	0.0100	0	0.0130	0
37		Farm mortgages - CM3 - medium quality	0	0	XXX	0	0.0060	0	0.0175	0	0.0225	0
38		Farm mortgages - CM4 - low medium quality	0	0	XXX	0	0.0105	0	0.0300	0	0.0375	0
39		Farm mortgages - CM5 - low quality	0	0	XXX	0	0.0160	0	0.0425	0	0.0550	0
40		Residential mortgages-insured or guaranteed	0	0	XXX	0	0.0003	0	0.0006	0	0.0010	0
41		Residential mortgages-all other	0	0	XXX	0	0.0013	0	0.0030	0	0.0040	0
42		Commercial mortgages-insured or guaranteed	0	0	XXX	0	0.0003	0	0.0006	0	0.0010	0
43		Commercial mortgages-all other - CM1 - highest quality	364,585,855	0	XXX	364,585,855	0.0010	364,586	0.0050	1,822,929	0.0065	2,369,808
44		Commercial mortgages-all other - CM2 - high quality	15,058,018	0	XXX	15,058,018	0.0035	52,703	0.0100	150,580	0.0130	195,754
45		Commercial mortgages-all other - CM3 - medium quality	0	0	XXX	0	0.0060	0	0.0175	0	0.0225	0
46		Commercial mortgages-all other - CM4 - low medium quality	0	0	XXX	0	0.0105	0	0.0300	0	0.0375	0
47		Commercial mortgages-all other - CM5 - low quality	0	0	XXX	0	0.0160	0	0.0425	0	0.0550	0
		Overdue, not in process:										
48		Farm mortgages	0	0	XXX	0	0.0420	0	0.0760	0	0.1200	0
49		Residential mortgages-insured or guaranteed	0	0	XXX	0	0.0005	0	0.0012	0	0.0020	0
50		Residential mortgages-all other	0	0	XXX	0	0.0025	0	0.0058	0	0.0090	0
51		Commercial mortgages-insured or guaranteed	0	0	XXX	0	0.0005	0	0.0012	0	0.0020	0
52		Commercial mortgages-all other	0	0	XXX	0	0.0420	0	0.0760	0	0.1200	0
		In process of foreclosure:										
53		Farm mortgages	0	0	XXX	0	0.0000	0	0.1700	0	0.1700	0
54		Residential mortgages-insured or guaranteed	0	0	XXX	0	0.0000	0	0.0040	0	0.0040	0
55		Residential mortgages-all other	0	0	XXX	0	0.0000	0	0.0130	0	0.0130	0
56		Commercial mortgages-insured or guaranteed	0	0	XXX	0	0.0000	0	0.0040	0	0.0040	0
57		Commercial mortgages-all other	0	0	XXX	0	0.0000	0	0.1700	0	0.1700	0
58		Total Schedule B mortgages (sum of Lines 35 through 57)	379,643,873	0	XXX	379,643,873	XXX	417,289	XXX	1,973,509	XXX	2,565,562
59		Schedule DA mortgages	0	0	XXX	0	0.0030	0	0.0100	0	0.0130	0
60		Total mortgage loans on real estate (Lines 58 + 59)	379,643,873	0	XXX	379,643,873	XXX	417,289	XXX	1,973,509	XXX	2,565,562

ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Equity and Other Invested Asset Component

Line Number	NAIC Desig-nation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution 5 Factor	Basic Contribution 6 Amount (Cols. 4 x 5)	Reserve Objective 7 Factor	Reserve Objective 8 Amount (Cols. 4 x 7)	Maximum Reserve 9 Factor	Maximum Reserve 10 Amount (Cols. 4 x 9)
		COMMON STOCK										
1		Unaffiliated public	4,381	XXX	XXX	4,381	0.0000	0	(a) 0.2000	876	(a) 0.2000	876
2		Unaffiliated private	84,664,570	XXX	XXX	84,664,570	0.0000	0	0.1600	13,546,331	0.1600	13,546,331
3		Federal Home Loan Bank	6,426,300	XXX	XXX	6,426,300	0.0000	0	0.0050	32,132	0.0080	51,410
4		Affiliated life with AVR	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
		Affiliated Investment Subsidiary:										
5		Fixed income exempt obligations	0	0	0	0	XXX	0	XXX	0	XXX	0
6		Fixed income highest quality	0	0	0	0	XXX	0	XXX	0	XXX	0
7		Fixed income high quality	0	0	0	0	XXX	0	XXX	0	XXX	0
8		Fixed income medium quality	0	0	0	0	XXX	0	XXX	0	XXX	0
9		Fixed income low quality	0	0	0	0	XXX	0	XXX	0	XXX	0
10		Fixed income lower quality	0	0	0	0	XXX	0	XXX	0	XXX	0
11		Fixed income in or near default	0	0	0	0	XXX	0	XXX	0	XXX	0
12		Unaffiliated common stock public	0	0	0	0	0.0000	0	(a) 0.0000	0	(a) 0.0000	0
13		Unaffiliated common stock private	0	0	0	0	0.0000	0	0.1600	0	0.1600	0
14		Real estate	0	0	0	0	(b) 0.0000	0	(b) 0.0000	0	(b) 0.0000	0
15		Affiliated - certain other (see SVO Purposes and Procedures Manual)	0	XXX	XXX	0	0.0000	0	0.1300	0	0.1300	0
16		Affiliated - all other	0	XXX	XXX	0	0.0000	0	0.1600	0	0.1600	0
17		Total common stock (sum of Lines 1 through 16)	91,095,251	0	0	91,095,251	XXX	0	XXX	13,579,339	XXX	13,598,618
		REAL ESTATE										
18		Home office property (General Account only)	0	0	0	0	0.0000	0	0.0750	0	0.0750	0
19		Investment properties	0	0	0	0	0.0000	0	0.0750	0	0.0750	0
20		Properties acquired in satisfaction of debt	0	0	0	0	0.0000	0	0.1100	0	0.1100	0
21		Total real estate (sum of Lines 18 through 20)	0	0	0	0	XXX	0	XXX	0	XXX	0
		OTHER INVESTED ASSETS										
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS										
22		Exempt obligations	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
23	1	Highest quality	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
24	2	High quality	0	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
25	3	Medium quality	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
26	4	Low quality	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
27	5	Lower quality	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
28	6	In or near default	0	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
29		Total with bond characteristics (sum of Lines 22 through 28)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0

Asset Valuation Reserve - Equity
NONE

Asset Valuation Reserve - Equity
NONE

Asset Valuation Reserve - Replications (Synthetic) Assets
NONE

SCHEDULE F

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

1 Contract Numbers	2 Claim Numbers	3 State of Residence of Claimant	4 Year of Claim for Death or Disability	5 Amount Claimed	6 Amount Paid During the Year	7 Amount Resisted Dec. 31 of Current Year	8 Why Compromised or Resisted
CLAIMS RESISTED DURING CURRENT YEAR							
Death Claims - Ordinary							
6452920	9584	PR	2015	500,000	0	500,000	Policy lapsed prior to death due to nonpayment of the required premiums
7079925	9873	AL	2015	1,000,000	0	1,000,000	Claim resisted during contestability period due to material misrepresentaiton
6830848	6036	PA	2009	100,000	289	100,000	Claim resisted due to suicide within the first 2 years. Refund of premium paid.
2799999. Death Claims - Ordinary				1,600,000	289	1,600,000	XXX
3199999. Subtotal - Resisted Death Claims				1,600,000	289	1,600,000	XXX
5299999. Subtotal - Claims Resisted of During Current Year				1,600,000	289	1,600,000	XXX
5399999. Totals				1,600,000	289	1,600,000	XXX

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

		Total		Group Accident and Health		Credit A&H (Group and Individual)		Collectively Renewable		Other Individual Contracts									
										Non-Cancelable		Guaranteed Renewable		Non-Renewable for Stated Reasons Only		Other Accident Only		All Other	
		1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %	15 Amount	16 %	17 Amount	18 %
PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS																			
1.	Premiums written	10,285,758	XXX	0	XXX	0	XXX	0	XXX	9,306,950	XXX	807,433	XXX	171,375	XXX	0	XXX	0	XXX
2.	Premiums earned	10,201,997	XXX	0	XXX	0	XXX	0	XXX	9,229,129	XXX	812,539	XXX	160,329	XXX	0	XXX	0	XXX
3.	Incurred claims	9,621,937	94.3	0	0.0	0	0.0	0	0.0	9,379,993	101.6	51,911	6.4	190,033	118.5	0	0.0	0	0.0
4.	Cost containment expenses	141,410	1.4	0	0.0	0	0.0	0	0.0	138,859	1.5	2,063	0.3	488	0.3	0	0.0	0	0.0
5.	Incurred claims and cost containment expenses (Lines 3 and 4)	9,763,347	95.7	0	0.0	0	0.0	0	0.0	9,518,852	103.1	53,974	6.6	190,521	118.8	0	0.0	0	0.0
6	Increase in contract reserves	(3,324,559)	(32.6)	0	0.0	0	0.0	0	0.0	(3,165,708)	(34.3)	(107,030)	(13.2)	(51,821)	(32.3)	0	0.0	0	0.0
7	Commissions (a)	571,512	5.6	0	0.0	0	0.0	0	0.0	496,040	5.4	66,901	8.2	8,571	5.3	0	0.0	0	0.0
8	Other general insurance expenses	11,309,096	110.9	0	0.0	0	0.0	0	0.0	10,628,301	115.2	407,814	50.2	272,981	170.3	0	0.0	0	0.0
9	Taxes, licenses and fees	645,499	6.3	0	0.0	0	0.0	0	0.0	606,641	6.6	23,277	2.9	15,581	9.7	0	0.0	0	0.0
10	Total other expenses incurred	12,526,107	122.8	0	0.0	0	0.0	0	0.0	11,730,982	127.1	497,992	61.3	297,133	185.3	0	0.0	0	0.0
11.	Aggregate write-ins for deductions	5,175,576	50.7	0	0.0	0	0.0	0	0.0	4,711,733	51.1	106,135	13.1	357,708	223.1	0	0.0	0	0.0
12.	Gain from underwriting before dividends or refunds	(13,938,474)	(136.6)	0	0.0	0	0.0	0	0.0	(13,566,730)	(147.0)	261,468	32.2	(633,212)	(394.9)	0	0.0	0	0.0
13.	Dividends or refunds	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
14.	Gain from underwriting after dividends or refunds	(13,938,474)	(136.6)	0	0.0	0	0.0	0	0.0	(13,566,730)	(147.0)	261,468	32.2	(633,212)	(394.9)	0	0.0	0	0.0
DETAILS OF WRITE-INS																			
1101.	Surrenders / ROP Benefits	5,175,576	50.7	0	0.0	0	0.0	0	0.0	4,711,733	51.1	106,135	13.1	357,708	223.1	0	0.0	0	0.0
1102.		0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1103.		0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1199.	Total (Lines 1101 through 1103 plus 1198) (Line 11 above)	5,175,576	50.7	0	0.0	0	0.0	0	0.0	4,711,733	51.1	106,135	13.1	357,708	223.1	0	0.0	0	0.0

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

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (continued)

	1 Total	2 Group Accident and Health	3 Credit A&H (Group and Individual)	4 Collectively Renewable	Other Individual Contracts				
					5 Non-Cancelable	6 Guaranteed Renewable	7 Non-Renewable for Stated Reasons Only	8 Other Accident Only	9 All Other
PART 2 - RESERVES AND LIABILITIES									
A. Premium Reserves:									
1. Unearned premiums	(1,605,891)	0	0	0	(1,686,043)	134,140	(53,988)	0	0
2. Advance premiums	129,026	0	0	0	126,671	2,211	144	0	0
3. Reserve for rate credits	0	0	0	0	0	0	0	0	0
4. Total premium reserves, current year	(1,476,865)	0	0	0	(1,559,372)	136,351	(53,844)	0	0
5. Total premium reserves, prior year	(1,560,626)	0	0	0	(1,637,193)	141,457	(64,890)	0	0
6. Increase in total premium reserves	83,761	0	0	0	77,821	(5,106)	11,046	0	0
B. Contract Reserves:									
1. Additional reserves (a)	22,400,640	0	0	0	18,914,819	3,244,253	241,568	0	0
2. Reserve for future contingent benefits	0	0	0	0	0	0	0	0	0
3. Total contract reserves, current year	22,400,640	0	0	0	18,914,819	3,244,253	241,568	0	0
4. Total contract reserves, prior year	25,725,199	0	0	0	22,080,527	3,351,283	293,389	0	0
5. Increase in contract reserves	(3,324,559)	0	0	0	(3,165,708)	(107,030)	(51,821)	0	0
C. Claim Reserves and Liabilities:									
1. Total current year	68,696,715	0	0	0	67,457,266	1,002,364	237,085	0	0
2. Total prior year	69,409,463	0	0	0	68,025,573	1,336,838	47,052	0	0
3. Increase	(712,748)	0	0	0	(568,307)	(334,474)	190,033	0	0

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

1. Claims Paid During the Year:									
1.1 On claims incurred prior to current year	10,174,738	0	0	0	9,815,642	359,096	0	0	0
1.2 On claims incurred during current year	159,947	0	0	0	132,658	27,289	0	0	0
2. Claim Reserves and Liabilities, December 31, current year:									
2.1 On claims incurred prior to current year	62,819,815	0	0	0	62,164,409	655,406	0	0	0
2.2 On claims incurred during current year	5,876,900	0	0	0	5,292,857	346,958	237,085	0	0
3. Test:									
3.1 Lines 1.1 and 2.1	72,994,553	0	0	0	71,980,051	1,014,502	0	0	0
3.2 Claim reserves and liabilities, December 31, prior year	69,409,463	0	0	0	68,025,573	1,336,838	47,052	0	0
3.3 Line 3.1 minus Line 3.2	3,585,090	0	0	0	3,954,478	(322,336)	(47,052)	0	0

PART 4 - REINSURANCE

A. Reinsurance Assumed:									
1. Premiums written	503,899	0	0	0	449,238	53,704	957	0	0
2. Premiums earned	519,132	0	0	0	463,727	54,448	957	0	0
3. Incurred claims	1,240,814	0	0	0	1,347,531	(106,717)	0	0	0
4. Commissions	37,119	0	0	0	33,763	3,356	0	0	0
B. Reinsurance Ceded:									
1. Premiums written	11,119,826	0	0	0	10,785,715	0	334,111	0	0
2. Premiums earned	11,043,625	0	0	0	10,706,645	217	336,763	0	0
3. Incurred claims	16,870,691	0	0	0	16,830,094	12,068	28,529	0	0
4. Commissions	2,916,261	0	0	0	2,819,879	0	96,382	0	0

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

SCHEDULE H - PART 5 - HEALTH CLAIMS

	1 Medical	2 Dental	3 Other	4 Total
A. Direct:				
1. Incurred claims	0	0	25,251,815	25,251,815
2. Beginning claim reserves and liabilities	0	0	160,697,757	160,697,757
3. Ending claim reserves and liabilities	0	0	162,667,653	162,667,653
4. Claims paid	0	0	23,281,919	23,281,919
B. Assumed Reinsurance:				
5. Incurred claims	0	0	1,240,814	1,240,814
6. Beginning claim reserves and liabilities	0	0	7,229,911	7,229,911
7. Ending claim reserves and liabilities	0	0	7,142,171	7,142,171
8. Claims paid	0	0	1,328,554	1,328,554
C. Ceded Reinsurance:				
9. Incurred claims	0	0	16,870,692	16,870,692
10. Beginning claim reserves and liabilities	0	0	102,789,947	102,789,947
11. Ending claim reserves and liabilities	0	0	104,643,785	104,643,785
12. Claims paid	0	0	15,016,854	15,016,854
D. Net:				
13. Incurred claims	0	0	9,621,937	9,621,937
14. Beginning claim reserves and liabilities	0	0	65,137,721	65,137,721
15. Ending claim reserves and liabilities	0	0	65,166,039	65,166,039
16. Claims paid	0	0	9,593,619	9,593,619
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred claims and cost containment expenses	0	0	9,763,349	9,763,349
18. Beginning reserves and liabilities	0	0	65,145,108	65,145,108
19. Ending reserves and liabilities	0	0	65,169,486	65,169,486
20. Paid claims and cost containment expenses	0	0	9,738,971	9,738,971

SCHEDULE S - PART 1 - SECTION 1

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

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

NONE

SCHEDULE S - PART 1 - SECTION 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Premiums	8 Unearned Premiums	9 Reserve Liability Other Than for Unearned Premiums	10 Reinsurance Payable on Paid and Unpaid Losses	11 Modified Coinsurance Reserve	12 Funds Withheld Under Coinsurance
Non-Affiliates - U.S. Non-Affiliates											
61301	47-0098400	05/01/1985	Ameritas Life Insurance Corporation	NE	CO/I	168,129	25,039	2,795,058	26,122	0	0
64017	75-0300900	11/23/1987	Jefferson National Life Ins Co	TX	CO/I	231,146	40,568	4,361,467	58,306	0	0
57320	47-0339250	09/09/1990	Woodmen of the World	NE	CO/I	108,186	11,377	1,570,751	4,396	0	0
0899999.	Total - Non-Affiliates - U.S. Non-Affiliates					507,461	76,984	8,727,276	88,824	0	0
1099999.	Total - Non-Affiliates					507,461	76,984	8,727,276	88,824	0	0
1199999.	Total - U.S.					507,461	76,984	8,727,276	88,824	0	0
9999999.	Total					507,461	76,984	8,727,276	88,824	0	0

SCHEDULE S - PART 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 Unpaid Losses
Life and Annuity - Affiliates - U.S. - Captive						
13575	26-3791519	06/30/2009	Montgomery Re	VT	0	369,837
13575	26-3791519	05/01/2011	Montgomery Re	VT	0	1,193,021
13575	26-3791519	07/01/2012	Montgomery Re	VT	0	2,028,136
15363	80-0955278	12/31/2013	Kenwood Re	VT	0	8,007,545
0199999.	Total - Life and Annuity Affiliates - U.S. - Captive				0	11,598,539
Life and Annuity - Affiliates - U.S. - Other						
67172	31-0397080	10/01/2009	The Ohio National Life Insurance Comp	OH	0	429,841
67172	31-0397080	09/01/2014	The Ohio National Life Insurance Comp	OH	0	213,216
0299999.	Total - Life and Annuity Affiliates - U.S. - Other				0	643,057
0399999.	Total - Life and Annuity Affiliates - U.S. - Total				0	12,241,596
0799999.	Total - Life and Annuity Affiliates				0	12,241,596
Life and Annuity - Non-Affiliates - U.S. Non-Affiliates						
90611	41-1366075	04/15/1999	Allianz Life Insurance Co. of North Amer	MN	135,000	0
90611	41-1366075	07/31/2001	Allianz Life Insurance Co. of North Amer	MN	75,015	0
90611	41-1366075	06/01/2002	Allianz Life Insurance Co. of North Amer	MN	0	22,660
90611	41-1366075	07/01/2002	Allianz Life Insurance Co. of North Amer	MN	25,754	12,892
90611	41-1366075	01/01/2003	Allianz Life Insurance Co. of North Amer	MN	0	90,000
90611	41-1366075	04/01/2003	Allianz Life Insurance Co. of North Amer	MN	0	844,047
39845	48-0921045	09/01/1967	Westport Ins. Corp	MO	274	0
86258	13-2572994	12/01/2005	General Re Life Corp	CT	0	140,000
88340	59-2859797	12/01/2005	Hannover Life Reassurance Comp of America	FL	0	225,000
88340	59-2859797	01/01/2010	Hannover Life Reassurance Comp of America	FL	0	91,143
65676	35-0472300	06/01/1998	The Lincoln National Life Insurance Comp	IN	68,098	45,860
65676	35-0472300	09/01/2000	The Lincoln National Life Insurance Comp	IN	0	30,000
65676	35-0472300	07/31/2001	The Lincoln National Life Insurance Comp	IN	74,970	0
65676	35-0472300	07/01/2002	The Lincoln National Life Insurance Comp	IN	25,777	35,564
65676	35-0472300	01/01/2003	The Lincoln National Life Insurance Comp	IN	0	90,000
66346	58-0828824	06/01/1998	Munich American Reassurance Company	GA	68,098	45,860
66346	58-0828824	09/01/2000	Munich American Reassurance Company	GA	300,000	30,000
66346	58-0828824	07/31/2001	Munich American Reassurance Company	GA	150,030	0
66346	58-0828824	07/01/2002	Munich American Reassurance Company	GA	37,119	58,443
66346	58-0828824	01/01/2003	Munich American Reassurance Company	GA	0	90,000
66346	58-0828824	04/01/2003	Munich American Reassurance Company	GA	0	844,047
66346	58-0828824	04/01/2004	Munich American Reassurance Company	GA	0	63,000
66346	58-0828824	01/19/2005	Munich American Reassurance Company	GA	0	157,500
66346	58-0828824	12/01/2005	Munich American Reassurance Company	GA	0	495,000
66346	58-0828824	06/04/2007	Munich American Reassurance Company	GA	125,000	300,000
66346	58-0828824	10/01/2007	Munich American Reassurance Company	GA	0	45,907
93572	43-1235868	01/01/1987	RGA Reinsurance Company	MO	0	250,000
93572	43-1235868	10/01/1995	RGA Reinsurance Company	MO	0	165,506
93572	43-1235868	07/01/1997	RGA Reinsurance Company	MO	0	135,000
93572	43-1235868	06/01/1998	RGA Reinsurance Company	MO	136,195	91,720
93572	43-1235868	04/15/1999	RGA Reinsurance Company	MO	135,000	0
93572	43-1235868	09/01/2000	RGA Reinsurance Company	MO	300,000	30,000
93572	43-1235868	07/31/2001	RGA Reinsurance Company	MO	74,970	0
93572	43-1235868	07/01/2002	RGA Reinsurance Company	MO	38,642	46,884
93572	43-1235868	01/01/2003	RGA Reinsurance Company	MO	0	90,000
93572	43-1235868	04/01/2003	RGA Reinsurance Company	MO	0	844,047
93572	43-1235868	10/01/2007	RGA Reinsurance Company	MO	250,000	45,907
68713	84-0499703	10/01/1995	Security Life of Denver Insurance Co	CO	0	165,506
68713	84-0499703	07/01/1997	Security Life of Denver Insurance Co	CO	0	135,000
68713	84-0499703	06/01/1998	Security Life of Denver Insurance Co	CO	136,195	91,720
68713	84-0499703	06/08/1998	Security Life of Denver Insurance Co	CO	0	450,000
68713	84-0499703	07/31/2001	Security Life of Denver Insurance Co	CO	75,015	0
68713	84-0499703	05/01/2002	Security Life of Denver Insurance Co	CO	0	74,444
68713	84-0499703	07/01/2002	Security Life of Denver Insurance Co	CO	50,008	56,892
68713	84-0499703	01/01/2003	Security Life of Denver Insurance Co	CO	0	90,000
68713	84-0499703	04/01/2003	Security Life of Denver Insurance Co	CO	0	844,047
68713	84-0499703	04/01/2004	Security Life of Denver Insurance Co	CO	0	9,000
82627	06-0839705	10/01/1995	Swiss Re Life & Health America, Inc	MO	0	165,506
82627	06-0839705	07/01/1997	Swiss Re Life & Health America, Inc	MO	0	135,000
82627	06-0839705	06/01/1998	Swiss Re Life & Health America, Inc	MO	136,195	91,720
82627	06-0839705	10/01/1995	Swiss Re Life & Health America, Inc	MO	0	165,506
82627	06-0839705	07/01/1997	Swiss Re Life & Health America, Inc	MO	0	135,000
82627	06-0839705	06/01/1998	Swiss Re Life & Health America, Inc	MO	60,000	17,679
82627	06-0839705	06/01/1998	Swiss Re Life & Health America, Inc	MO	0	165,506
82627	06-0839705	06/01/1998	Swiss Re Life & Health America, Inc	MO	0	135,000
82627	06-0839705	06/01/1998	Swiss Re Life & Health America, Inc	MO	136,195	91,720
82627	06-0839705	07/01/2002	Swiss Re Life & Health America, Inc	MO	38,642	34,000
82627	06-0839705	06/04/2007	Swiss Re Life & Health America, Inc	MO	175,000	300,000
82627	06-0839705	01/01/2010	Swiss Re Life & Health America, Inc	MO	0	91,143

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
87572	23-2038295	07/01/2002	Scottish Re USA Inc	DE	11,365	0
86231	39-0989781	10/01/2007	Transamerica Life Insurance Company	NC	33,277	45,907
64688	75-6020048	10/01/2007	SCOR Global Life Reinsurance Company of America	DE	33,277	45,907
80659	38-0397420	04/01/2004	US Business of Canada Life Assurance Company	MI	0	18,000
80659	38-0397420	01/19/2005	US Business of Canada Life Assurance Company	MI	0	45,000
0899999.	Total - Life and Annuity Non-Affiliates - U.S. Non-Affiliates				2,905,111	9,055,190
1099999.	Total - Life and Annuity Non-Affiliates				2,905,111	9,055,190
1199999.	Total - Life and Annuity				2,905,111	21,296,786
Accident and Health - Non-Affiliates - U.S. Non-Affiliates						
39845	48-0921045	09/01/1967	Employer's Reassurance Corporation	KS	4,811	415
86258	13-2572994	01/01/1999	General Re Life Corporation	CT	16,826	18,917
66346	58-0828824	01/01/1999	Munich American Reassurance Company	GA	79,768	112,770
82627	06-0839705	02/01/1981	Swiss Re Life & Health America, Inc	MO	3,126,506	648,914
67598	04-1768571	11/01/1988	Paul Revere Life Insurance Co	MA	302,765	135,356
1999999.	Total - Accident and Health Non-Affiliates - U.S. Non-Affiliates				3,530,676	916,372
2199999.	Total - Accident and Health Non-Affiliates				3,530,676	916,372
2299999.	Total - Accident and Health				3,530,676	916,372
2399999.	Total U.S.				6,435,787	22,213,158
9999999.	Total				6,435,787	22,213,158

SCHEDULE S - PART 3 - SECTION 1

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

1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
General Account - Authorized - Affiliates - U.S. - Captive														
15855	47-4249160	12/31/2015	Camargo Re Inc	OH	CO/I	XXXL	24,835,908,507	55,958,220	20,372,685	35,937,755	0	0	0	0
15855	47-4249160	12/31/2015	Camargo Re Inc	OH	DIS/I	OL	0	1,725,154	604,530	1,297,406	0	0	0	0
0199999.	Total - General Account - Authorized - Affiliates - U.S. - Captive						24,835,908,507	57,683,374	20,977,215	37,235,161	0	0	0	0
General Account - Authorized - Affiliates - U.S. - Other														
67172	31-0397080	10/04/2006	Ohio National Life Insurance Company	OH	CO/I	OL	302,381,291	152,151,868	148,039,325	0	0	0	0	0
67172	31-0397080	10/01/2009	Ohio National Life Insurance Company	OH	CO/I	OL	1,388,002,838	504,005,241	499,784,904	59,176,527	0	0	0	0
67172	31-0397080	09/01/2014	Ohio National Life Insurance Company	OH	CO/I	OL	701,466,215	243,318,102	146,606,548	29,906,520	0	0	0	0
0299999.	Total - General Account - Authorized - Affiliates - U.S. - Other						2,391,850,344	899,475,211	794,430,777	89,083,047	0	0	0	0
0399999.	Total - General Account - Authorized - Affiliates - U.S. - Total						27,227,758,851	957,158,585	815,407,992	126,318,208	0	0	0	0
0799999.	Total - General Account - Authorized - Affiliates						27,227,758,851	957,158,585	815,407,992	126,318,208	0	0	0	0
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates														
90611	41-1366075	11/01/1983	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	549,055	19,558	17,772	22,417	0	0	0	0
90611	41-1366075	01/01/1987	Allianz Life Insurance Co. of North America	MN	DIS/I	OL	0	37	15	48	0	0	0	0
90611	41-1366075	01/01/1987	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	3,340,646	65,228	61,753	90,303	0	0	0	0
90611	41-1366075	06/01/1988	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	775,000	5,747	5,194	7,185	0	0	0	0
90611	41-1366075	02/01/1999	Allianz Life Insurance Co. of North America	MN	DIS/I	OL	0	420	562	246	0	0	0	0
90611	41-1366075	02/01/1999	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	5,597,824	46,186	57,925	35,533	0	0	0	0
90611	41-1366075	04/15/1999	Allianz Life Insurance Co. of North America	MN	CO/I	OL	163,064,617	1,002,203	959,879	210,726	0	0	0	0
90611	41-1366075	04/15/1999	Allianz Life Insurance Co. of North America	MN	DIS/I	OL	0	92,676	84,541	4,502	0	0	0	0
90611	41-1366075	04/15/1999	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	81,896,367	560,438	505,396	542,300	0	0	0	0
90611	41-1366075	03/15/2000	Allianz Life Insurance Co. of North America	MN	DIS/I	OL	0	1,591	1,423	183	0	0	0	0
90611	41-1366075	03/15/2000	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	12,115,145	64,374	62,870	36,348	0	0	0	0
90611	41-1366075	09/01/2000	Allianz Life Insurance Co. of North America	MN	DIS/I	OL	0	296	380	53	0	0	0	0
90611	41-1366075	09/01/2000	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	1,453,073	7,597	19,405	1,572	0	0	0	0
90611	41-1366075	09/30/2000	Allianz Life Insurance Co. of North America	MN	DIS/I	OL	0	631	1,006	271	0	0	0	0
90611	41-1366075	09/30/2000	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	9,241,615	60,110	82,559	68,898	0	0	0	0
90611	41-1366075	07/31/2001	Allianz Life Insurance Co. of North America	MN	CO/I	XXXL	458,639,367	9,642,069	10,541,846	1,108,424	0	0	0	0
90611	41-1366075	07/31/2001	Allianz Life Insurance Co. of North America	MN	DIS/I	OL	0	147,175	148,433	16,174	0	0	0	0
90611	41-1366075	07/31/2001	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	13,702,852	45,781	97,249	94,196	0	0	0	0
90611	41-1366075	01/01/2002	Allianz Life Insurance Co. of North America	MN	DIS/I	OL	0	548	601	1,447	0	0	0	0
90611	41-1366075	01/01/2002	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	18,457,588	87,838	106,266	125,671	0	0	0	0
90611	41-1366075	07/01/2002	Allianz Life Insurance Co. of North America	MN	DIS/I	OL	0	235	295	292	0	0	0	0
90611	41-1366075	07/01/2002	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	4,741,354	17,146	121,117	51,436	0	0	0	0
90611	41-1366075	01/01/2003	Allianz Life Insurance Co. of North America	MN	CO/I	XXXL	108,537,138	2,441,316	2,661,076	108,570	0	0	0	0
90611	41-1366075	01/01/2003	Allianz Life Insurance Co. of North America	MN	DIS/I	OL	0	42,214	36,599	3,316	0	0	0	0
90611	41-1366075	01/01/2003	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	12,123,576	78,516	65,517	81,978	0	0	0	0
90611	41-1366075	04/01/2003	Allianz Life Insurance Co. of North America	MN	CO/I	XXXL	669,816,673	15,705,840	16,447,238	905,828	0	0	0	0

SCHEDULE S - PART 3 - SECTION 1

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

1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
90611	41-1366075	04/01/2003	Allianz Life Insurance Co. of North America	MN	DIS/I	OL	0	339,959	303,343	23,748	0	0	0	0
90611	41-1366075	04/01/2003	Allianz Life Insurance Co. of North America	MN	YRT/I	OL	97,072,805	595,042	571,783	388,192	0	0	0	0
62413	36-0947200	01/01/1987	Continental Assurance Company	IL	YRT/I	OL	102,196	9,283	7,640	13,355	0	0	0	0
86258	13-2572994	07/01/1982	General & Cologne Life Re of America	CT	YRT/I	OL	163,067	8,012	7,343	10,251	0	0	0	0
86258	13-2572994	01/01/1987	General & Cologne Life Re of America	CT	DIS/I	OL	0	284	264	43	0	0	0	0
86258	13-2572994	01/01/1987	General & Cologne Life Re of America	CT	YRT/I	OL	1,805,067	96,648	88,371	150,890	0	0	0	0
86258	13-2572994	04/01/2004	General & Cologne Life Re of America	CT	DIS/I	OL	0	1,528	1,464	825	0	0	0	0
86258	13-2572994	04/01/2004	General & Cologne Life Re of America	CT	YRT/I	OL	51,942,775	319,854	302,400	239,798	0	0	0	0
86258	13-2572994	09/01/2004	General & Cologne Life Re of America	CT	YRT/I	OL	0	0	0	(484)	0	0	0	0
86258	13-2572994	01/19/2005	General & Cologne Life Re of America	CT	DIS/I	OL	0	1,912	2,470	2,260	0	0	0	0
86258	13-2572994	01/19/2005	General & Cologne Life Re of America	CT	YRT/I	OL	61,231,738	268,771	260,039	194,315	0	0	0	0
86258	13-2572994	12/01/2005	General & Cologne Life Re of America	CT	DIS/I	OL	0	5,082	4,669	277	0	0	0	0
86258	13-2572994	12/01/2005	General & Cologne Life Re of America	CT	YRT/I	OL	22,546,594	90,764	82,910	47,440	0	0	0	0
86258	13-2572994	01/01/2006	General & Cologne Life Re of America	CT	DIS/I	OL	0	57,802	51,231	7,008	0	0	0	0
86258	13-2572994	01/01/2006	General & Cologne Life Re of America	CT	YRT/I	OL	298,220,576	1,073,616	998,812	766,963	0	0	0	0
97071	13-3126819	06/04/2007	Generali USA Life Reassurance Company	MO	DIS/I	OL	0	117	131	184	0	0	0	0
97071	13-3126819	06/04/2007	Generali USA Life Reassurance Company	MO	YRT/I	OL	8,226,091	16,065	16,038	16,997	0	0	0	0
97071	13-3126819	10/01/2007	Generali USA Life Reassurance Company	MO	DIS/I	OL	0	3	3	6	0	0	0	0
97071	13-3126819	10/01/2007	Generali USA Life Reassurance Company	MO	YRT/I	OL	2,906,671	7,066	5,703	11,964	0	0	0	0
97071	13-3126819	10/10/2009	Generali USA Life Reassurance Company	MO	DIS/I	OL	0	47,901	42,587	3,096	0	0	0	0
97071	13-3126819	10/10/2009	Generali USA Life Reassurance Company	MO	YRT/I	OL	268,980,203	897,939	793,552	1,283,830	0	0	0	0
88340	59-2859797	01/19/2005	Hannover Life Reassurance Company Of America	FL	DIS/I	OL	0	20	19	40	0	0	0	0
88340	59-2859797	01/19/2005	Hannover Life Reassurance Company Of America	FL	YRT/I	OL	2,073,045	4,260	2,929	11,132	0	0	0	0
88340	59-2859797	09/01/2005	Hannover Life Reassurance Company Of America	FL	CO/I	XXXL	191,722,021	4,183,108	4,229,141	238,451	0	0	0	0
88340	59-2859797	09/01/2005	Hannover Life Reassurance Company Of America	FL	DIS/I	OL	0	45,489	41,867	5,814	0	0	0	0
88340	59-2859797	12/01/2005	Hannover Life Reassurance Company Of America	FL	CO/I	XXXL	70,522,759	1,572,493	1,560,013	111,350	0	0	0	0
88340	59-2859797	12/01/2005	Hannover Life Reassurance Company Of America	FL	DIS/I	OL	0	16,707	15,865	1,710	0	0	0	0
88340	59-2859797	01/01/2006	Hannover Life Reassurance Company Of America	FL	CO/I	XXXL	1,103,802,879	23,652,423	23,097,157	1,419,873	0	0	0	0
88340	59-2859797	01/01/2006	Hannover Life Reassurance Company Of America	FL	DIS/I	OL	0	293,744	261,036	41,582	0	0	0	0
88340	59-2859797	01/01/2006	Hannover Life Reassurance Company Of America	FL	YRT/I	OL	10,464,376	18,962	13,032	54,575	0	0	0	0
88340	59-2859797	01/01/2010	Hannover Life Reassurance Company Of America	FL	YRT/I	OL	161,280,911	158,440	104,687	257,632	0	0	0	0
88340	59-2859797	01/01/2014	Hannover Life Reassurance Company Of America	FL	DIS/I	OL	0	171	277	(45)	0	0	0	0
88340	59-2859797	01/01/2014	Hannover Life Reassurance Company Of America	FL	YRT/I	OL	23,779,611	42,793	56,535	48,717	0	0	0	0
88340	59-2859797	11/01/2016	Hannover Life Reassurance Company Of America	FL	YRT/I	OL	8,062,252	5,237	0	10,557	0	0	0	0
86258	13-2572994	10/01/1988	General & Cologne Life Re of America	CT	YRT/I	OL	21,596	86	81	174	0	0	0	0
65676	35-0472300	03/18/1982	Lincoln National Life Insurance Company	IN	DIS/I	OL	0	676	555	1,510	0	0	0	0
65676	35-0472300	03/18/1982	Lincoln National Life Insurance Company	IN	YRT/I	OL	4,821,480	290,632	373,837	393,540	0	0	0	0
65676	35-0472300	03/09/1998	Lincoln National Life Insurance Company	IN	DIS/I	OL	0	164	160	138	0	0	0	0

SCHEDULE S - PART 3 - SECTION 1

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

1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
65676	35-0472300	03/09/1998	Lincoln National Life Insurance Company	IN	YRT/I	OL	6,822,480	69,126	60,676	94,930	0	0	0	0
65676	35-0472300	06/01/1998	Lincoln National Life Insurance Company	IN	DIS/I	OL	0	4,250	3,802	191	0	0	0	0
65676	35-0472300	06/01/1998	Lincoln National Life Insurance Company	IN	YRT/I	OL	11,601,796	128,007	126,154	130,381	0	0	0	0
65676	35-0472300	08/01/1998	Lincoln National Life Insurance Company	IN	YRT/I	OL	62,500	1,281	-	12,657	0	0	0	0
65676	35-0472300	02/01/1999	Lincoln National Life Insurance Company	IN	DIS/I	OL	0	420	562	287	0	0	0	0
65676	35-0472300	02/01/1999	Lincoln National Life Insurance Company	IN	YRT/I	OL	8,775,022	47,740	59,258	42,794	0	0	0	0
65676	35-0472300	04/15/1999	Lincoln National Life Insurance Company	IN	CO/I	OL	163,064,623	1,002,203	959,879	245,464	0	0	0	0
65676	35-0472300	04/15/1999	Lincoln National Life Insurance Company	IN	DIS/I	OL	0	92,938	84,767	5,531	0	0	0	0
65676	35-0472300	04/15/1999	Lincoln National Life Insurance Company	IN	YRT/I	OL	90,385,149	600,513	526,521	774,493	0	0	0	0
65676	35-0472300	03/01/2000	Lincoln National Life Insurance Company	IN	CO/I	XXXL	103,256,379	2,016,397	2,221,035	185,211	0	0	0	0
65676	35-0472300	03/01/2000	Lincoln National Life Insurance Company	IN	DIS/I	OL	0	67,479	66,674	13,127	0	0	0	0
65676	35-0472300	03/15/2000	Lincoln National Life Insurance Company	IN	DIS/I	OL	0	1,591	1,423	214	0	0	0	0
65676	35-0472300	03/15/2000	Lincoln National Life Insurance Company	IN	YRT/I	OL	12,124,232	64,422	62,917	42,372	0	0	0	0
65676	35-0472300	09/01/2000	Lincoln National Life Insurance Company	IN	CO/I	XXXL	206,583,775	4,883,733	5,634,379	(219,841)	0	0	0	0
65676	35-0472300	09/01/2000	Lincoln National Life Insurance Company	IN	DIS/I	OL	0	77,600	103,379	5,782	0	0	0	0
65676	35-0472300	09/01/2000	Lincoln National Life Insurance Company	IN	YRT/I	OL	2,304,355	10,935	18,710	7,940	0	0	0	0
65676	35-0472300	09/05/2000	Lincoln National Life Insurance Company	IN	YRT/I	OL	18,720,412	214,381	201,503	(546,743)	0	0	0	0
65676	35-0472300	09/30/2000	Lincoln National Life Insurance Company	IN	DIS/I	OL	0	1,842	1,229	2,365	0	0	0	0
65676	35-0472300	09/30/2000	Lincoln National Life Insurance Company	IN	YRT/I	OL	19,181,917	91,698	98,278	194,972	0	0	0	0
65676	35-0472300	07/01/2001	Lincoln National Life Insurance Company	IN	YRT/I	OL	540,011	2,745	4,384	1,408	0	0	0	0
65676	35-0472300	07/31/2001	Lincoln National Life Insurance Company	IN	CO/I	XXXL	453,216,519	9,544,767	10,417,282	1,288,210	0	0	0	0
65676	35-0472300	07/31/2001	Lincoln National Life Insurance Company	IN	DIS/I	OL	0	146,170	147,478	18,806	0	0	0	0
65676	35-0472300	07/31/2001	Lincoln National Life Insurance Company	IN	YRT/I	OL	10,342,411	35,174	86,185	100,507	0	0	0	0
65676	35-0472300	01/01/2002	Lincoln National Life Insurance Company	IN	DIS/I	OL	0	549	601	1,686	0	0	0	0
65676	35-0472300	01/01/2002	Lincoln National Life Insurance Company	IN	YRT/I	OL	17,735,811	80,887	100,077	138,286	0	0	0	0
65676	35-0472300	07/01/2002	Lincoln National Life Insurance Company	IN	DIS/I	OL	0	235	295	340	0	0	0	0
65676	35-0472300	07/01/2002	Lincoln National Life Insurance Company	IN	YRT/I	OL	4,742,128	17,154	121,220	59,943	0	0	0	0
65676	35-0472300	01/01/2003	Lincoln National Life Insurance Company	IN	CO/I	XXXL	108,537,138	2,441,316	2,638,189	146,795	0	0	0	0
65676	35-0472300	01/01/2003	Lincoln National Life Insurance Company	IN	DIS/I	OL	0	42,201	36,576	3,978	0	0	0	0
65676	35-0472300	01/01/2003	Lincoln National Life Insurance Company	IN	YRT/I	OL	11,523,517	77,808	64,803	89,745	0	0	0	0
65676	35-0472300	04/01/2003	Lincoln National Life Insurance Company	IN	YRT/I	OL	21,475	43	40	26	0	0	0	0
65676	35-0472300	01/19/2005	Lincoln National Life Insurance Company	IN	YRT/I	OL	3,308,898	32,832	31,692	(69,007)	0	0	0	0
76694	23-2044256	12/31/2009	London Life Insurance Company	PA	YRT/I	OL	6,016,129,699	0	0	23,847,245	0	0	0	0
66346	58-0828824	04/01/1984	Munich American Reassurance Company	GA	YRT/I	OL	75,810	597	546	758	0	0	0	0
66346	58-0828824	03/01/1998	Munich American Reassurance Company	GA	DIS/I	OL	0	500	458	0	0	0	0	0
66346	58-0828824	03/01/1998	Munich American Reassurance Company	GA	YRT/I	OL	3,131,572	7,742	6,927	4,855	0	0	0	0
66346	58-0828824	03/09/1998	Munich American Reassurance Company	GA	DIS/I	OL	0	164	160	122	0	0	0	0
66346	58-0828824	03/09/1998	Munich American Reassurance Company	GA	YRT/I	OL	6,822,485	69,126	60,676	80,394	0	0	0	0

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

1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
66346	58-0828824	06/01/1998	Munich American Reassurance Company	GA	DIS/I	OL	0	4,250	3,802	168	0	0	0	0
66346	58-0828824	06/01/1998	Munich American Reassurance Company	GA	YRT/I	OL	11,601,790	128,007	126,154	118,262	0	0	0	0
66346	58-0828824	08/01/1998	Munich American Reassurance Company	GA	YRT/I	OL	62,500	1,281	0	11,183	0	0	0	0
66346	58-0828824	02/01/1999	Munich American Reassurance Company	GA	DIS/I	OL	0	420	562	253	0	0	0	0
66346	58-0828824	02/01/1999	Munich American Reassurance Company	GA	YRT/I	OL	5,597,829	46,186	57,925	36,571	0	0	0	0
66346	58-0828824	04/15/1999	Munich American Reassurance Company	GA	CO/I	OL	163,131,095	1,002,384	959,879	217,681	0	0	0	0
66346	58-0828824	04/15/1999	Munich American Reassurance Company	GA	DIS/I	OL	0	92,676	84,541	4,634	0	0	0	0
66346	58-0828824	04/15/1999	Munich American Reassurance Company	GA	YRT/I	OL	82,554,425	542,737	489,463	549,742	0	0	0	0
66346	58-0828824	03/15/2000	Munich American Reassurance Company	GA	DIS/I	OL	0	1,591	1,423	189	0	0	0	0
66346	58-0828824	03/15/2000	Munich American Reassurance Company	GA	YRT/I	OL	12,115,145	64,374	62,870	37,410	0	0	0	0
66346	58-0828824	09/01/2000	Munich American Reassurance Company	GA	CO/I	XXXL	202,471,960	4,723,208	5,433,967	(105,721)	0	0	0	0
66346	58-0828824	09/01/2000	Munich American Reassurance Company	GA	DIS/I	OL	0	72,941	99,045	4,250	0	0	0	0
66346	58-0828824	09/01/2000	Munich American Reassurance Company	GA	YRT/I	OL	2,094,323	10,949	22,540	4,434	0	0	0	0
66346	58-0828824	09/30/2000	Munich American Reassurance Company	GA	DIS/I	OL	0	2,123	1,672	2,184	0	0	0	0
66346	58-0828824	09/30/2000	Munich American Reassurance Company	GA	YRT/I	OL	23,336,894	118,008	135,007	199,534	0	0	0	0
66346	58-0828824	07/31/2001	Munich American Reassurance Company	GA	CO/I	XXXL	906,975,064	19,100,943	20,847,014	2,276,690	0	0	0	0
66346	58-0828824	07/31/2001	Munich American Reassurance Company	GA	DIS/I	OL	0	186,109	189,548	32,089	0	0	0	0
66346	58-0828824	07/31/2001	Munich American Reassurance Company	GA	YRT/I	OL	19,464,952	62,555	133,695	153,939	0	0	0	0
66346	58-0828824	01/01/2002	Munich American Reassurance Company	GA	DIS/I	OL	0	803	864	2,195	0	0	0	0
66346	58-0828824	01/01/2002	Munich American Reassurance Company	GA	YRT/I	OL	28,400,956	124,321	149,606	192,484	0	0	0	0
66346	58-0828824	07/01/2002	Munich American Reassurance Company	GA	DIS/I	OL	0	384	468	537	0	0	0	0
66346	58-0828824	07/01/2002	Munich American Reassurance Company	GA	YRT/I	OL	8,170,694	26,320	176,014	78,420	0	0	0	0
66346	58-0828824	01/01/2003	Munich American Reassurance Company	GA	CO/I	XXXL	109,337,136	2,466,277	2,685,483	109,331	0	0	0	0
66346	58-0828824	01/01/2003	Munich American Reassurance Company	GA	DIS/I	OL	0	42,258	36,668	3,327	0	0	0	0
66346	58-0828824	01/01/2003	Munich American Reassurance Company	GA	YRT/I	OL	13,892,907	93,862	78,948	91,082	0	0	0	0
66346	58-0828824	04/01/2003	Munich American Reassurance Company	GA	CO/I	XXXL	1,779,665,748	39,447,336	42,057,320	2,543,204	0	0	0	0
66346	58-0828824	04/01/2003	Munich American Reassurance Company	GA	DIS/I	OL	0	528,028	461,138	59,823	0	0	0	0
66346	58-0828824	04/01/2003	Munich American Reassurance Company	GA	YRT/I	OL	124,427,715	631,863	597,031	473,391	0	0	0	0
66346	58-0828824	04/01/2004	Munich American Reassurance Company	GA	CO/I	XXXL	1,659,846,618	38,962,300	40,622,809	2,266,768	0	0	0	0
66346	58-0828824	04/01/2004	Munich American Reassurance Company	GA	DIS/I	OL	0	263,607	237,446	48,685	0	0	0	0
66346	58-0828824	04/01/2004	Munich American Reassurance Company	GA	YRT/I	OL	95,886,022	573,270	520,104	517,899	0	0	0	0
66346	58-0828824	09/01/2004	Munich American Reassurance Company	GA	YRT/I	OL	0	0	0	(1,150)	0	0	0	0
66346	58-0828824	01/19/2005	Munich American Reassurance Company	GA	CO/I	XXXL	886,392,493	20,293,174	20,726,592	1,228,509	0	0	0	0
66346	58-0828824	01/19/2005	Munich American Reassurance Company	GA	DIS/I	OL	0	298,132	183,266	31,769	0	0	0	0
66346	58-0828824	01/19/2005	Munich American Reassurance Company	GA	YRT/I	OL	147,081,784	591,331	561,566	424,012	0	0	0	0
66346	58-0828824	07/01/2005	Munich American Reassurance Company	GA	CO/I	XXXL	163,923,168	4,147,654	4,260,225	339,554	0	0	0	0
66346	58-0828824	07/01/2005	Munich American Reassurance Company	GA	DIS/I	OL	0	31,376	29,271	6,934	0	0	0	0
66346	58-0828824	07/01/2005	Munich American Reassurance Company	GA	YRT/I	OL	70,038,527	267,774	317,822	125,320	0	0	0	0

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

1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
66346	58-0828824	09/01/2005	Munich American Reassurance Company	GA	CO/I	XXXL	215,484,366	4,993,004	5,157,856	359,996	0	0	0	0
66346	58-0828824	09/01/2005	Munich American Reassurance Company	GA	DIS/I	OL	0	41,420	39,447	10,432	0	0	0	0
66346	58-0828824	09/01/2005	Munich American Reassurance Company	GA	YRT/I	OL	100,162,552	278,339	258,999	127,324	0	0	0	0
66346	58-0828824	12/01/2005	Munich American Reassurance Company	GA	CO/I	XXXL	67,904,502	1,657,772	1,640,823	178,234	0	0	0	0
66346	58-0828824	12/01/2005	Munich American Reassurance Company	GA	DIS/I	OL	0	13,343	11,833	2,958	0	0	0	0
66346	58-0828824	12/01/2005	Munich American Reassurance Company	GA	YRT/I	OL	48,621,995	484,548	477,147	67,269	0	0	0	0
66346	58-0828824	01/01/2006	Munich American Reassurance Company	GA	CO/I	XXXL	625,084,209	12,646,679	12,454,506	943,715	0	0	0	0
66346	58-0828824	01/01/2006	Munich American Reassurance Company	GA	DIS/I	OL	0	161,716	142,687	25,916	0	0	0	0
66346	58-0828824	01/01/2006	Munich American Reassurance Company	GA	YRT/I	OL	102,179,744	494,806	423,608	744,608	0	0	0	0
66346	58-0828824	06/04/2007	Munich American Reassurance Company	GA	DIS/I	OL	0	0	27	(63)	0	0	0	0
66346	58-0828824	06/04/2007	Munich American Reassurance Company	GA	YRT/I	OL	1,947,556	7,280	9,456	3,007	0	0	0	0
66346	58-0828824	10/01/2007	Munich American Reassurance Company	GA	DIS/I	OL	0	1,548	1,540	2,981	0	0	0	0
66346	58-0828824	10/01/2007	Munich American Reassurance Company	GA	YRT/I	OL	129,594,401	427,724	393,912	561,595	0	0	0	0
66346	58-0828824	12/31/2008	Munich American Reassurance Company	GA	CO/I	OL	0	0	0	2,043	0	0	0	0
66346	58-0828824	10/10/2009	Munich American Reassurance Company	GA	DIS/I	OL	0	95,364	84,467	6,344	0	0	0	0
66346	58-0828824	10/10/2009	Munich American Reassurance Company	GA	YRT/I	OL	309,919,280	918,248	802,733	1,362,229	0	0	0	0
66346	58-0828824	04/01/2011	Munich American Reassurance Company	GA	CO/I	XXXL	7,274,824,160	134,314,284	123,563,617	9,523,078	0	0	0	0
66346	58-0828824	04/01/2011	Munich American Reassurance Company	GA	DIS/I	OL	0	1,377,321	1,411,926	240,458	0	0	0	0
66346	58-0828824	01/01/2014	Munich American Reassurance Company	GA	DIS/I	OL	0	683	536	(187)	0	0	0	0
66346	58-0828824	01/01/2014	Munich American Reassurance Company	GA	YRT/I	OL	65,071,483	97,865	82,122	99,160	0	0	0	0
93572	43-1235868	01/01/1977	RGA Reinsurance Company	MO	YRT/I	OL	2,315,000	30,008	28,586	27,781	0	0	0	0
93572	43-1235868	01/01/1983	RGA Reinsurance Company	MO	DIS/I	OL	0	167,916	161,249	0	0	0	0	0
93572	43-1235868	01/01/1983	RGA Reinsurance Company	MO	YRT/I	OL	400,000	4,629	4,168	4,176	0	0	0	0
93572	43-1235868	02/01/1983	RGA Reinsurance Company	MO	DIS/I	OL	0	286	28	531	0	0	0	0
93572	43-1235868	02/01/1983	RGA Reinsurance Company	MO	YRT/I	OL	2,598,434	24,747	22,842	23,976	0	0	0	0
93572	43-1235868	01/01/1984	RGA Reinsurance Company	MO	YRT/I	OL	1,643,361	22,956	52,134	29,910	0	0	0	0
93572	43-1235868	06/01/1984	RGA Reinsurance Company	MO	YRT/I	OL	6,372,869	287,587	266,887	246,683	0	0	0	0
93572	43-1235868	01/01/1987	RGA Reinsurance Company	MO	DIS/I	OL	0	5,481	5,173	1,314	0	0	0	0
93572	43-1235868	01/01/1987	RGA Reinsurance Company	MO	YRT/I	OL	53,921,364	1,024,265	1,044,921	1,240,179	0	0	0	0
93572	43-1235868	05/01/1988	RGA Reinsurance Company	MO	DIS/I	OL	0	77	84	215	0	0	0	0
93572	43-1235868	05/01/1988	RGA Reinsurance Company	MO	YRT/I	OL	742,628	8,878	5,236	47,934	0	0	0	0
93572	43-1235868	11/14/1991	RGA Reinsurance Company	MO	DIS/I	OL	0	3	2	814	0	0	0	0
93572	43-1235868	11/14/1991	RGA Reinsurance Company	MO	YRT/I	OL	17,997,805	203,953	176,968	313,072	0	0	0	0
93572	43-1235868	01/01/1994	RGA Reinsurance Company	MO	DIS/I	OL	0	141	128	423	0	0	0	0
93572	43-1235868	01/01/1994	RGA Reinsurance Company	MO	YRT/I	OL	20,026,072	684,368	607,659	862,528	0	0	0	0
93572	43-1235868	10/01/1995	RGA Reinsurance Company	MO	DIS/I	OL	0	2,354	2,480	1,263	0	0	0	0
93572	43-1235868	10/01/1995	RGA Reinsurance Company	MO	YRT/I	OL	41,020,553	604,430	559,244	708,847	0	0	0	0

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1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
93572	43-1235868	07/01/1997	RGA Reinsurance Company	MO	DIS/I	OL	0	649	633	993	0	0	0	0
93572	43-1235868	07/01/1997	RGA Reinsurance Company	MO	YRT/I	OL	24,916,036	281,193	284,306	263,113	0	0	0	0
93572	43-1235868	03/09/1998	RGA Reinsurance Company	MO	DIS/I	OL	0	328	321	229	0	0	0	0
93572	43-1235868	03/09/1998	RGA Reinsurance Company	MO	YRT/I	OL	15,958,928	182,201	160,493	199,652	0	0	0	0
93572	43-1235868	06/01/1998	RGA Reinsurance Company	MO	DIS/I	OL	0	4,763	4,277	317	0	0	0	0
93572	43-1235868	06/01/1998	RGA Reinsurance Company	MO	YRT/I	OL	24,154,231	257,385	259,002	218,388	0	0	0	0
93572	43-1235868	08/01/1998	RGA Reinsurance Company	MO	YRT/I	OL	125,000	2,562	-	21,042	0	0	0	0
93572	43-1235868	02/01/1999	RGA Reinsurance Company	MO	DIS/I	OL	0	440	622	358	0	0	0	0
93572	43-1235868	02/01/1999	RGA Reinsurance Company	MO	YRT/I	OL	9,206,169	73,991	90,805	55,038	0	0	0	0
93572	43-1235868	04/15/1999	RGA Reinsurance Company	MO	CO/I	OL	163,064,623	1,002,203	959,879	204,035	0	0	0	0
93572	43-1235868	04/15/1999	RGA Reinsurance Company	MO	DIS/I	OL	0	102,706	92,974	4,911	0	0	0	0
93572	43-1235868	04/15/1999	RGA Reinsurance Company	MO	YRT/I	OL	150,045,247	1,134,468	1,022,234	1,032,048	0	0	0	0
93572	43-1235868	03/15/2000	RGA Reinsurance Company	MO	DIS/I	OL	0	1,591	1,423	266	0	0	0	0
93572	43-1235868	03/15/2000	RGA Reinsurance Company	MO	YRT/I	OL	22,777,260	313,345	285,643	127,962	0	0	0	0
93572	43-1235868	09/01/2000	RGA Reinsurance Company	MO	CO/I	XXXL	202,471,959	4,723,208	5,433,424	(89,353)	0	0	0	0
93572	43-1235868	09/01/2000	RGA Reinsurance Company	MO	DIS/I	OL	0	74,420	100,551	4,163	0	0	0	0
93572	43-1235868	09/01/2000	RGA Reinsurance Company	MO	YRT/I	OL	2,180,250	11,399	27,501	4,342	0	0	0	0
93572	43-1235868	09/30/2000	RGA Reinsurance Company	MO	DIS/I	OL	0	2,157	1,731	2,096	0	0	0	0
93572	43-1235868	09/30/2000	RGA Reinsurance Company	MO	YRT/I	OL	38,179,981	405,578	373,400	576,086	0	0	0	0
93572	43-1235868	07/31/2001	RGA Reinsurance Company	MO	CO/I	XXXL	494,503,519	9,873,734	10,888,560	1,109,744	0	0	0	0
93572	43-1235868	07/31/2001	RGA Reinsurance Company	MO	DIS/I	OL	0	146,195	147,840	16,052	0	0	0	0
93572	43-1235868	07/31/2001	RGA Reinsurance Company	MO	YRT/I	OL	33,360,039	135,725	204,700	154,297	0	0	0	0
93572	43-1235868	01/01/2002	RGA Reinsurance Company	MO	DIS/I	OL	0	812	893	1,857	0	0	0	0
93572	43-1235868	01/01/2002	RGA Reinsurance Company	MO	YRT/I	OL	48,419,471	599,058	566,303	534,536	0	0	0	0
93572	43-1235868	07/01/2002	RGA Reinsurance Company	MO	DIS/I	OL	0	343	434	393	0	0	0	0
93572	43-1235868	07/01/2002	RGA Reinsurance Company	MO	YRT/I	OL	10,446,508	210,034	349,185	181,300	0	0	0	0
93572	43-1235868	01/01/2003	RGA Reinsurance Company	MO	CO/I	XXXL	110,962,138	2,576,896	2,778,275	131,417	0	0	0	0
93572	43-1235868	01/01/2003	RGA Reinsurance Company	MO	DIS/I	OL	0	42,278	36,689	3,515	0	0	0	0
93572	43-1235868	01/01/2003	RGA Reinsurance Company	MO	YRT/I	OL	19,191,025	133,461	110,470	125,825	0	0	0	0
93572	43-1235868	04/01/2003	RGA Reinsurance Company	MO	DIS/I	OL	0	1,307	1,238	1,891	0	0	0	0
93572	43-1235868	04/01/2003	RGA Reinsurance Company	MO	YRT/I	OL	117,211,136	1,112,360	1,019,378	604,572	0	0	0	0
93572	43-1235868	04/01/2004	RGA Reinsurance Company	MO	DIS/I	OL	0	1,528	1,464	738	0	0	0	0
93572	43-1235868	04/01/2004	RGA Reinsurance Company	MO	YRT/I	OL	131,630,894	649,445	587,162	359,085	0	0	0	0
93572	43-1235868	09/01/2004	RGA Reinsurance Company	MO	YRT/I	OL	0	0	0	(491)	0	0	0	0
93572	43-1235868	01/19/2005	RGA Reinsurance Company	MO	DIS/I	OL	0	1,921	2,595	2,015	0	0	0	0
93572	43-1235868	01/19/2005	RGA Reinsurance Company	MO	YRT/I	OL	84,085,838	476,956	614,024	272,795	0	0	0	0
93572	43-1235868	06/04/2007	RGA Reinsurance Company	MO	DIS/I	OL	0	0	27	(59)	0	0	0	0
93572	43-1235868	06/04/2007	RGA Reinsurance Company	MO	YRT/I	OL	3,222,203	8,441	7,725	4,904	0	0	0	0

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								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
93572	43-1235868	10/01/2007	RGA Reinsurance Company	MO	DIS/I	OL	0	1,519	1,514	2,803	0	0	0	0
93572	43-1235868	10/01/2007	RGA Reinsurance Company	MO	YRT/I	OL	159,931,176	527,798	458,990	677,187	0	0	0	0
93572	43-1235868	07/01/2008	RGA Reinsurance Company	MO	YRT/I	OL	5,208,365	21,808	20,156	12,954	0	0	0	0
93572	43-1235868	10/10/2009	RGA Reinsurance Company	MO	DIS/I	OL	0	48,503	43,150	4,653	0	0	0	0
93572	43-1235868	10/10/2009	RGA Reinsurance Company	MO	YRT/I	OL	328,062,417	1,302,993	1,246,341	1,842,178	0	0	0	0
93572	43-1235868	01/01/2014	RGA Reinsurance Company	MO	DIS/I	OL	0	1,383	502	(42)	0	0	0	0
93572	43-1235868	01/01/2014	RGA Reinsurance Company	MO	YRT/I	OL	58,859,854	118,196	71,711	151,277	0	0	0	0
68713	84-0499703	08/01/1993	Security Life of Denver Insurance Company	CO	DIS/I	OL	0	8	6	0	0	0	0	0
68713	84-0499703	08/01/1993	Security Life of Denver Insurance Company	CO	YRT/I	OL	3,287,308	21,935	25,970	41,039	0	0	0	0
68713	84-0499703	01/01/1994	Security Life of Denver Insurance Company	CO	DIS/I	OL	0	118	101	488	0	0	0	0
68713	84-0499703	01/01/1994	Security Life of Denver Insurance Company	CO	YRT/I	OL	14,763,748	187,469	180,350	331,822	0	0	0	0
68713	84-0499703	10/01/1995	Security Life of Denver Insurance Company	CO	DIS/I	OL	0	2,354	2,480	1,617	0	0	0	0
68713	84-0499703	10/01/1995	Security Life of Denver Insurance Company	CO	YRT/I	OL	33,568,453	551,909	540,112	775,652	0	0	0	0
68713	84-0499703	07/01/1997	Security Life of Denver Insurance Company	CO	DIS/I	OL	0	757	738	1,529	0	0	0	0
68713	84-0499703	07/01/1997	Security Life of Denver Insurance Company	CO	YRT/I	OL	20,849,743	435,000	427,074	703,099	0	0	0	0
68713	84-0499703	03/09/1998	Security Life of Denver Insurance Company	CO	DIS/I	OL	0	328	321	293	0	0	0	0
68713	84-0499703	03/09/1998	Security Life of Denver Insurance Company	CO	YRT/I	OL	13,644,956	138,252	123,638	179,883	0	0	0	0
68713	84-0499703	06/01/1998	Security Life of Denver Insurance Company	CO	DIS/I	OL	0	4,819	4,517	316	0	0	0	0
68713	84-0499703	06/01/1998	Security Life of Denver Insurance Company	CO	YRT/I	OL	25,392,250	270,108	272,018	280,163	0	0	0	0
68713	84-0499703	06/08/1998	Security Life of Denver Insurance Company	CO	CO/I	OL	165,922,510	1,073,885	1,005,109	315,049	0	0	0	0
68713	84-0499703	06/08/1998	Security Life of Denver Insurance Company	CO	DIS/I	OL	0	38,893	36,321	5,591	0	0	0	0
68713	84-0499703	06/08/1998	Security Life of Denver Insurance Company	CO	YRT/I	OL	3,637,871	20,212	1,124	277,782	0	0	0	0
68713	84-0499703	08/01/1998	Security Life of Denver Insurance Company	CO	YRT/I	OL	205,000	3,259	0	36,135	0	0	0	0
68713	84-0499703	02/01/1999	Security Life of Denver Insurance Company	CO	DIS/I	OL	0	440	622	458	0	0	0	0
68713	84-0499703	02/01/1999	Security Life of Denver Insurance Company	CO	YRT/I	OL	8,543,106	70,645	87,187	66,369	0	0	0	0
68713	84-0499703	04/15/1999	Security Life of Denver Insurance Company	CO	DIS/I	OL	0	32,760	28,087	1,843	0	0	0	0
68713	84-0499703	04/15/1999	Security Life of Denver Insurance Company	CO	YRT/I	OL	120,258,495	835,713	755,173	916,260	0	0	0	0
68713	84-0499703	03/15/2000	Security Life of Denver Insurance Company	CO	DIS/I	OL	0	1,591	1,423	341	0	0	0	0
68713	84-0499703	03/15/2000	Security Life of Denver Insurance Company	CO	YRT/I	OL	18,177,260	96,585	94,329	67,607	0	0	0	0
68713	84-0499703	09/01/2000	Security Life of Denver Insurance Company	CO	DIS/I	OL	0	296	380	127	0	0	0	0
68713	84-0499703	09/01/2000	Security Life of Denver Insurance Company	CO	YRT/I	OL	3,571,500	17,126	32,518	9,310	0	0	0	0
68713	84-0499703	09/05/2000	Security Life of Denver Insurance Company	CO	YRT/I	OL	18,720,361	214,381	201,503	(581,984)	0	0	0	0
68713	84-0499703	09/30/2000	Security Life of Denver Insurance Company	CO	DIS/I	OL	0	1,225	1,952	650	0	0	0	0
68713	84-0499703	09/30/2000	Security Life of Denver Insurance Company	CO	YRT/I	OL	31,523,491	177,119	209,878	275,254	0	0	0	0
68713	84-0499703	10/02/2000	Security Life of Denver Insurance Company	CO	YRT/I	OL	702,903	11,657	11,313	(29,957)	0	0	0	0
68713	84-0499703	07/31/2001	Security Life of Denver Insurance Company	CO	CO/I	XXXL	453,489,370	9,550,515	10,423,557	1,371,779	0	0	0	0
68713	84-0499703	07/31/2001	Security Life of Denver Insurance Company	CO	DIS/I	OL	0	146,240	148,169	20,941	0	0	0	0
68713	84-0499703	07/31/2001	Security Life of Denver Insurance Company	CO	YRT/I	OL	15,071,475	63,464	170,292	171,068	0	0	0	0

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

1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
68713	84-0499703	01/01/2002	Security Life of Denver Insurance Company	CO	CO/I	XXXL	24,528,875	1,004,937	1,023,979	51,134	0	0	0	0
68713	84-0499703	01/01/2002	Security Life of Denver Insurance Company	CO	DIS/I	OL	0	7,060	6,968	4,038	0	0	0	0
68713	84-0499703	01/01/2002	Security Life of Denver Insurance Company	CO	YRT/I	OL	32,190,584	171,051	209,893	270,417	0	0	0	0
68713	84-0499703	05/01/2002	Security Life of Denver Insurance Company	CO	DIS/I	OL	0	5,179	6,153	(4,600)	0	0	0	0
68713	84-0499703	05/01/2002	Security Life of Denver Insurance Company	CO	YRT/I	OL	134,140,916	2,267,467	2,362,909	274,277	0	0	0	0
68713	84-0499703	07/01/2002	Security Life of Denver Insurance Company	CO	DIS/I	OL	0	380	501	488	0	0	0	0
68713	84-0499703	07/01/2002	Security Life of Denver Insurance Company	CO	YRT/I	OL	8,995,651	132,805	326,294	152,567	0	0	0	0
68713	84-0499703	01/01/2003	Security Life of Denver Insurance Company	CO	CO/I	XXXL	87,383,263	1,808,578	1,995,930	106,700	0	0	0	0
68713	84-0499703	01/01/2003	Security Life of Denver Insurance Company	CO	DIS/I	OL	0	36,283	30,907	3,178	0	0	0	0
68713	84-0499703	01/01/2003	Security Life of Denver Insurance Company	CO	YRT/I	OL	21,160,285	175,418	140,710	184,798	0	0	0	0
68713	84-0499703	04/01/2003	Security Life of Denver Insurance Company	CO	CO/I	XXXL	418,133,498	20,810,557	21,335,784	669,792	0	0	0	0
68713	84-0499703	04/01/2003	Security Life of Denver Insurance Company	CO	CO/I	AXXX	392,373,522	18,698,254	20,021,349	601,808	0	0	0	0
68713	84-0499703	04/01/2003	Security Life of Denver Insurance Company	CO	DIS/I	OL	0	281,096	253,215	32,603	0	0	0	0
68713	84-0499703	04/01/2003	Security Life of Denver Insurance Company	CO	YRT/I	OL	99,401,949	590,289	566,617	482,490	0	0	0	0
68713	84-0499703	04/01/2004	Security Life of Denver Insurance Company	CO	CO/I	XXXL	771,305,645	20,196,714	20,297,114	1,178,714	0	0	0	0
68713	84-0499703	04/01/2004	Security Life of Denver Insurance Company	CO	DIS/I	OL	0	216,158	194,096	26,507	0	0	0	0
68713	84-0499703	04/01/2004	Security Life of Denver Insurance Company	CO	YRT/I	OL	77,485,249	577,917	524,618	478,108	0	0	0	0
68713	84-0499703	09/01/2004	Security Life of Denver Insurance Company	CO	YRT/I	OL	0	0	0	(1,013)	0	0	0	0
82627	06-0839705	11/01/1981	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	1,757,898	20,755	18,686	51,168	0	0	0	0
82627	06-0839705	01/01/1982	Swiss Re Life & Health America, Inc	MO	DIS/I	OL	0	167	157	207	0	0	0	0
82627	06-0839705	01/01/1982	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	460,000	2,530	3,099	4,595	0	0	0	0
82627	06-0839705	06/06/1983	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	812,142	45,937	47,216	58,964	0	0	0	0
82627	06-0839705	06/01/1984	Swiss Re Life & Health America, Inc	MO	DIS/I	OL	0	37	48	75	0	0	0	0
82627	06-0839705	06/01/1984	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	3,273,191	43,080	93,066	72,019	0	0	0	0
82627	06-0839705	01/01/1987	Swiss Re Life & Health America, Inc	MO	DIS/I	OL	0	1,753	1,761	1,328	0	0	0	0
82627	06-0839705	01/01/1987	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	34,036,369	952,331	946,712	1,095,555	0	0	0	0
82627	06-0839705	01/01/1990	Swiss Re Life & Health America, Inc	MO	DIS/I	OL	0	2,316	2,139	3,069	0	0	0	0
82627	06-0839705	01/01/1990	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	900,000	4,193	3,807	7,195	0	0	0	0
82627	06-0839705	11/14/1991	Swiss Re Life & Health America, Inc	MO	DIS/I	OL	0	69	50	900	0	0	0	0
82627	06-0839705	11/14/1991	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	19,370,024	397,828	344,932	662,078	0	0	0	0
82627	06-0839705	10/16/1992	Swiss Re Life & Health America, Inc	MO	DIS/I	OL	0	272,274	262,035	0	0	0	0	0
82627	06-0839705	10/16/1992	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	650,000	9,163	8,288	23,401	0	0	0	0
82627	06-0839705	08/01/1993	Swiss Re Life & Health America, Inc	MO	DIS/I	OL	0	8	6	0	0	0	0	0
82627	06-0839705	08/01/1993	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	4,151,514	29,302	41,770	20,840	0	0	0	0
82627	06-0839705	01/01/1994	Swiss Re Life & Health America, Inc	MO	DIS/I	OL	0	431	372	1,264	0	0	0	0
82627	06-0839705	01/01/1994	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	40,220,577	549,434	492,944	799,318	0	0	0	0
82627	06-0839705	10/01/1995	Swiss Re Life & Health America, Inc	MO	DIS/I	OL	0	7,265	7,622	4,268	0	0	0	0
82627	06-0839705	10/01/1995	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	87,030,556	1,387,431	1,339,679	1,611,352	0	0	0	0

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1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
82627	06-0839705	07/01/1997	Swiss Re Life & Health America, Inc	MO	DIS/I	OL	0	1,947	1,898	3,296	0	0	0	0
82627	06-0839705	07/01/1997	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	51,308,567	763,312	889,496	922,265	0	0	0	0
82627	06-0839705	03/09/1998	Swiss Re Life & Health America, Inc	MO	DIS/I	OL	0	656	642	507	0	0	0	0
82627	06-0839705	03/09/1998	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	28,431,197	284,981	250,229	358,405	0	0	0	0
82627	06-0839705	06/01/1998	Swiss Re Life & Health America, Inc	MO	DIS/I	OL	0	9,526	8,554	701	0	0	0	0
82627	06-0839705	06/01/1998	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	46,942,120	516,819	508,783	483,667	0	0	0	0
82627	06-0839705	08/01/1998	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	250,000	5,124	0	46,546	0	0	0	0
82627	06-0839705	02/01/1999	Swiss Re Life & Health America, Inc	MO	DIS/I	OL	0	440	622	396	0	0	0	0
82627	06-0839705	02/01/1999	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	9,280,646	144,392	153,820	116,155	0	0	0	0
82627	06-0839705	04/15/1999	Swiss Re Life & Health America, Inc	MO	DIS/I	OL	0	32,760	28,087	1,592	0	0	0	0
82627	06-0839705	04/15/1999	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	125,708,245	1,107,355	992,758	884,184	0	0	0	0
82627	06-0839705	03/15/2000	Swiss Re Life & Health America, Inc	MO	DIS/I	OL	0	1,591	1,423	295	0	0	0	0
82627	06-0839705	03/15/2000	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	18,177,260	96,585	94,329	58,405	0	0	0	0
82627	06-0839705	09/01/2000	Swiss Re Life & Health America, Inc	MO	DIS/I	OL	0	296	380	85	0	0	0	0
82627	06-0839705	09/01/2000	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	2,180,250	11,399	23,464	4,803	0	0	0	0
82627	06-0839705	09/05/2000	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	18,720,362	214,381	201,503	(502,731)	0	0	0	0
82627	06-0839705	09/29/2000	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	558,915	54,293	55,058	38,963	0	0	0	0
82627	06-0839705	09/30/2000	Swiss Re Life & Health America, Inc	MO	DIS/I	OL	0	946	1,508	433	0	0	0	0
82627	06-0839705	09/30/2000	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	13,698,530	90,129	140,313	114,303	0	0	0	0
82627	06-0839705	10/02/2000	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	702,903	11,657	11,313	(25,880)	0	0	0	0
82627	06-0839705	07/31/2001	Swiss Re Life & Health America, Inc	MO	DIS/I	OL	0	706	1,538	1,325	0	0	0	0
82627	06-0839705	07/31/2001	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	11,110,833	90,014	174,171	126,343	0	0	0	0
82627	06-0839705	01/01/2002	Swiss Re Life & Health America, Inc	MO	DIS/I	OL	0	789	888	1,515	0	0	0	0
82627	06-0839705	01/01/2002	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	29,418,034	327,581	346,469	252,569	0	0	0	0
82627	06-0839705	07/01/2002	Swiss Re Life & Health America, Inc	MO	DIS/I	OL	0	231	327	176	0	0	0	0
82627	06-0839705	07/01/2002	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	3,262,943	17,667	177,013	58,392	0	0	0	0
82627	06-0839705	01/01/2003	Swiss Re Life & Health America, Inc	MO	DIS/I	OL	0	186	271	551	0	0	0	0
82627	06-0839705	01/01/2003	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	15,893,860	123,778	107,013	99,941	0	0	0	0
82627	06-0839705	04/01/2003	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	3,000,000	3,173	2,832	3,372	0	0	0	0
82627	06-0839705	01/19/2005	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	3,308,898	32,832	31,692	(63,443)	0	0	0	0
82627	06-0839705	01/01/2006	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	71,071,734	414,366	389,767	49,715	0	0	0	0
82627	06-0839705	07/01/2008	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	7,245,177	30,217	27,576	22,538	0	0	0	0
82627	06-0839705	01/01/2010	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	161,484,587	158,439	104,658	220,740	0	0	0	0
82627	06-0839705	07/01/2011	Swiss Re Life & Health America, Inc	MO	CO/I	XXXL	7,274,783,743	134,340,521	123,555,588	10,103,679	0	0	0	0
82627	06-0839705	07/01/2011	Swiss Re Life & Health America, Inc	MO	DIS/I	OL	0	1,377,321	1,411,926	250,207	0	0	0	0
82627	06-0839705	03/19/2013	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	9,692,784	2,074	1,883	2,802	0	0	0	0
82627	06-0839705	01/01/2014	Swiss Re Life & Health America, Inc	MO	DIS/I	OL	0	1,480	1,088	(220)	0	0	0	0

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								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
82627	06-0839705	01/01/2014	Swiss Re Life & Health America, Inc	MO	YRT/I	OL	82,446,655	126,334	90,534	210,366	0	0	0	0
87572	23-2038295	09/01/2000	Scottish Re U.S. Inc	NC	DIS/I	OL	0	287	823	48	0	0	0	0
87572	23-2038295	09/01/2000	Scottish Re U.S. Inc	NC	YRT/I	OL	2,898,105	18,552	31,638	21,765	0	0	0	0
87572	23-2038295	09/30/2000	Scottish Re U.S. Inc	NC	YRT/I	OL	1,182,168	8,234	11,134	(2,936)	0	0	0	0
87572	23-2038295	07/31/2001	Scottish Re U.S. Inc	NC	DIS/I	OL	0	21	808	0	0	0	0	0
87572	23-2038295	07/31/2001	Scottish Re U.S. Inc	NC	YRT/I	OL	1,447,204	8,043	35,558	(1,397)	0	0	0	0
87572	23-2038295	01/01/2002	Scottish Re U.S. Inc	NC	DIS/I	OL	0	232	269	492	0	0	0	0
87572	23-2038295	01/01/2002	Scottish Re U.S. Inc	NC	YRT/I	OL	5,075,610	27,946	38,954	31,760	0	0	0	0
87572	23-2038295	07/01/2002	Scottish Re U.S. Inc	NC	DIS/I	OL	0	67	96	(47)	0	0	0	0
87572	23-2038295	07/01/2002	Scottish Re U.S. Inc	NC	YRT/I	OL	962,161	5,185	52,063	(17,780)	0	0	0	0
87572	23-2038295	01/01/2003	Scottish Re U.S. Inc	NC	DIS/I	OL	0	48	69	130	0	0	0	0
87572	23-2038295	01/01/2003	Scottish Re U.S. Inc	NC	YRT/I	OL	4,069,737	31,514	27,261	31,882	0	0	0	0
87572	23-2038295	01/19/2005	Scottish Re U.S. Inc	NC	YRT/I	OL	3,308,895	32,832	31,691	(61,770)	0	0	0	0
87572	23-2038295	01/01/2006	Scottish Re U.S. Inc	NC	YRT/I	OL	35,535,894	207,183	194,883	32,135	0	0	0	0
64688	75-6020048	04/01/2004	SCOR Global Life Americas Reinsurance Company	TX	YRT/I	OL	4,434,126	1,819	1,450	8,545	0	0	0	0
64688	75-6020048	01/19/2005	SCOR Global Life Americas Reinsurance Company	TX	YRT/I	OL	1,461,277	503	409	3,785	0	0	0	0
64688	75-6020048	01/01/2006	SCOR Global Life Americas Reinsurance Company	TX	YRT/I	OL	9,844,604	1,756	1,637	71,753	0	0	0	0
64688	75-6020048	10/01/2007	SCOR Global Life Americas Reinsurance Company	TX	DIS/I	OL	0	1,364	1,369	2,735	0	0	0	0
64688	75-6020048	10/01/2007	SCOR Global Life Americas Reinsurance Company	TX	YRT/I	OL	91,414,631	360,709	334,812	425,490	0	0	0	0
64688	75-6020048	10/10/2009	SCOR Global Life Americas Reinsurance Company	TX	DIS/I	OL	0	1,319	1,473	1,759	0	0	0	0
64688	75-6020048	10/10/2009	SCOR Global Life Americas Reinsurance Company	TX	YRT/I	OL	231,345,928	1,055,046	938,115	1,566,443	0	0	0	0
64688	75-6020048	01/01/2014	SCOR Global Life Americas Reinsurance Company	TX	DIS/I	OL	0	1,024	708	(273)	0	0	0	0
64688	75-6020048	01/01/2014	SCOR Global Life Americas Reinsurance Company	TX	YRT/I	OL	73,506,321	139,713	131,141	180,943	0	0	0	0
86231	39-0989781	01/01/2006	Transamerica Life Insurance Company	IA	CO/I	XXXL	1,398,739,545	29,813,493	29,039,090	1,833,456	0	0	0	0
86231	39-0989781	01/01/2006	Transamerica Life Insurance Company	IA	DIS/I	OL	0	299,090	265,630	53,060	0	0	0	0
86231	39-0989781	01/01/2006	Transamerica Life Insurance Company	IA	YRT/I	OL	142,693,461	1,047,251	857,647	1,491,556	0	0	0	0
86231	39-0989781	06/04/2007	Transamerica Life Insurance Company	IA	DIS/I	OL	0	45	43	14	0	0	0	0
86231	39-0989781	06/04/2007	Transamerica Life Insurance Company	IA	YRT/I	OL	4,341,404	11,633	10,106	8,268	0	0	0	0
86231	39-0989781	10/01/2007	Transamerica Life Insurance Company	IA	DIS/I	OL	0	1,505	1,532	2,980	0	0	0	0
86231	39-0989781	10/01/2007	Transamerica Life Insurance Company	IA	YRT/I	OL	145,273,226	546,672	492,386	735,789	0	0	0	0
80659	38-0397420	04/01/2004	US Business of Canada Life Assurance Company	MI	CO/I	XXXL	599,595,297	14,407,123	14,857,704	789,123	0	0	0	0
80659	38-0397420	04/01/2004	US Business of Canada Life Assurance Company	MI	DIS/I	OL	0	214,467	192,249	17,376	0	0	0	0
80659	38-0397420	04/01/2004	US Business of Canada Life Assurance Company	MI	YRT/I	OL	10,599,124	24,127	18,077	57,206	0	0	0	0
80659	38-0397420	01/19/2005	US Business of Canada Life Assurance Company	MI	CO/I	XXXL	441,632,494	10,250,650	10,132,629	570,986	0	0	0	0
80659	38-0397420	01/19/2005	US Business of Canada Life Assurance Company	MI	DIS/I	OL	0	199,151	143,360	13,292	0	0	0	0
80659	38-0397420	01/19/2005	US Business of Canada Life Assurance Company	MI	YRT/I	OL	6,765,521	12,935	9,800	24,247	0	0	0	0
80659	38-0397420	07/01/2005	US Business of Canada Life Assurance Company	MI	CO/I	XXXL	167,700,188	5,160,424	5,026,480	273,226	0	0	0	0
80659	38-0397420	07/01/2005	US Business of Canada Life Assurance Company	MI	DIS/I	OL	0	42,630	38,819	4,972	0	0	0	0

SCHEDULE S - PART 3 - SECTION 1

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

1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
80659.....	38-0397420....	09/01/2005	US Business of Canada Life Assurance Company	MI	CO/I	XXXL	221,384,015	5,079,228	5,076,745	317,665	0	0	0	0
80659.....	38-0397420....	09/01/2005	US Business of Canada Life Assurance Company	MI	DIS/I	OL	0	64,595	58,371	6,852	0	0	0	0
80659.....	38-0397420....	01/01/2014	US Business of Canada Life Assurance Company	MI	DIS/I	OL	0	512	449	(134)	0	0	0	0
80659.....	38-0397420....	01/01/2014	US Business of Canada Life Assurance Company	MI	YRT/I	OL	45,003,645	53,148	40,974	75,806	0	0	0	0
80659.....	38-0397420....	11/01/2016	US Business of Canada Life Assurance Company	MI	YRT/I	OL	8,062,209	5,237	0	339	0	0	0	0
80659.....	38-0397420....	08/01/1982	US Business of Canada Life Assurance Company	MI	YRT/I	OL	498,125	9,563	8,720	10,760	0	0	0	0
80659.....	38-0397420....	09/10/1987	US Business of Canada Life Assurance Company	MI	YRT/I	OL	103,382	1,812	1,580	3,242	0	0	0	0
0899999.	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates						43,953,935,111	702,958,001	695,434,774	111,261,887	0	0	0	0
1099999.	Total - General Account - Authorized - Non-Affiliates						43,953,935,111	702,958,001	695,434,774	111,261,887	0	0	0	0
1199999.	Total - General Account - Authorized						71,181,693,962	1,660,116,586	1,510,842,766	237,580,095	0	0	0	0
General Account - Unauthorized - Affiliates - U.S. - Captive														
15363.....	80-0955278....	12/31/2013	Kenwood Re Inc	VT	CO/I	XXXL	54,488,300,101	470,798,127	408,057,796	75,293,066	0	0	0	0
15363.....	80-0955278....	12/31/2013	Kenwood Re Inc	VT	DIS/I	OL	0	7,501,438	5,951,917	1,863,520	0	0	0	0
13575.....	26-3791519....	06/30/2009	Montgomery Re	VT	CO/I	XXXL	4,846,384,678	15,871,650	25,623,502	1,038,898	0	0	0	0
13575.....	26-3791519....	06/30/2009	Montgomery Re	VT	DIS/I	OL	0	609,917	802,875	80,546	0	0	0	0
13575.....	26-3791519....	05/01/2011	Montgomery Re	VT	CO/I	XXXL	1,500,000	6,380	8,835	247	0	0	0	0
13575.....	26-3791519....	05/01/2011	Montgomery Re	VT	CO/I	AXXX	483,800,935	160,036,508	155,411,448	6,191,541	0	0	0	0
13575.....	26-3791519....	05/01/2011	Montgomery Re	VT	DIS/I	OL	0	371,004	313,462	213	0	0	0	0
13575.....	26-3791519....	07/01/2012	Montgomery Re	VT	CO/I	XXXL	11,117,050,964	119,111,962	117,618,752	18,938,377	0	0	0	0
13575.....	26-3791519....	07/01/2012	Montgomery Re	VT	DIS/I	OL	0	1,772,573	1,793,477	426,859	0	0	0	0
1288888,	Total - General Account - Unauthorized - Affiliates - U.S. - Captive						70,937,036,678	776,079,559	715,582,064	103,833,267	0	0	0	0
1499999.	Total - General Account - Unauthorized - Affiliates - U.S. - Total						70,937,036,678	776,079,559	715,582,064	103,833,267	0	0	0	0
1899999.	Total - General Account - Unauthorized - Affiliates						70,937,036,678	776,079,559	715,582,064	103,833,267	0	0	0	0
General Account - Unauthorized - Non-Affiliates - Non-U.S. Non-Affiliates														
00000.....	AA-3190770...	01/01/2006	Chubb Tempest Reinsurance LTD	BMU	DIS/I	OL	0	574	389	1,038	0	0	0	0
00000.....	AA-3190770...	01/01/2006	Chubb Tempest Reinsurance LTD	BMU	YRT/I	OL	47,390,561	230,861	201,617	295,137	0	0	0	0
2099999.	Total - General Account - Unauthorized - Non-Affiliates - Non-U.S. Non-Affiliates						47,390,561	231,435	202,006	296,175	0	0	0	0
2199999.	Total - General Account - Unauthorized - Non-Affiliates						47,390,561	231,435	202,006	296,175	0	0	0	0
2299999.	Total - General Account - Unauthorized						70,984,427,239	776,310,994	715,784,070	104,129,442	0	0	0	0
3499999.	Total - General Account - Authorized, Unauthorized and Certified						142,166,121,201	2,436,427,580	2,226,626,836	341,709,537	0	0	0	0
6999999.	Total U.S.						142,118,730,640	2,436,196,145	2,226,424,830	341,413,362	0	0	0	0
7099999.	Total Non-U.S.						47,390,561	231,435	202,006	296,175	0	0	0	0
9999999.	Total						142,166,121,201	2,436,427,580	2,226,626,836	341,709,537	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	2	3	4	5	6	7	8	9	10	Outstanding Surplus Relief		13	14
										11	12		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Premiums	Unearned Premiums (Estimated)	Reserve Credit Taken Other Than for Unearned Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates													
39845	48-0921045	.09/01/1967	Westport Ins. Corp	MO	CO/I	LTDI	10,942	2,113	46,885	0	0	0	0
86258	13-2572994	.01/01/1999	General Re Life Corporation	CT	CO/I	LTDI	435,341	253,858	1,272,885	0	0	0	0
66346	58-0828824	.01/01/1999	Munich American Reassurance Company	GA	CO/I	LTDI	5,111,315	2,670,033	5,478,009	0	0	0	0
82627	06-0839705	.02/01/1981	Swiss Re Life & Health America, Inc	MO	CO/I	LTDI	4,945,774	2,473,812	90,525,342	0	0	0	0
67598	04-1768571	.11/01/1988	Paul Revere Life Ins Co	MA	CO/I	LTDI	616,455	258,115	13,643,068	0	0	0	0
0899999.	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates						11,119,827	5,657,931	110,966,189	0	0	0	0
1099999.	Total - General Account - Authorized - Non-Affiliates						11,119,827	5,657,931	110,966,189	0	0	0	0
1199999.	Total - General Account - Authorized						11,119,827	5,657,931	110,966,189	0	0	0	0
3499999.	Total - General Account - Authorized, Unauthorized and Certified						11,119,827	5,657,931	110,966,189	0	0	0	0
6999999.	Total - U.S.						11,119,827	5,657,931	110,966,189	0	0	0	0
9999999.	Total						11,119,827	5,657,931	110,966,189	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
General Account - Life and Annuity - Affiliates - U.S. - Captive														
15363	80-0955278	.12/31/2013	Kenwood Re Inc	470,798,127	8,007,545	0	478,805,672	0	0	169,029,349	0	318,855,911	6,640,753	478,805,672
15363	80-0955278	.12/31/2013	Kenwood Re Inc	7,501,438	0	0	7,501,438	0	0	8,345,035	0	0	0	7,501,438
13575	26-3791519	.06/30/2009	Montgomery Re	15,871,650	369,837	0	16,241,487	0	0	15,237,254	0	5,998,276	226,432	16,241,487
13575	26-3791519	.06/30/2009	Montgomery Re	609,917	0	0	609,917	0	0	941,265	0	0	0	609,917
13575	26-3791519	.05/01/2011	Montgomery Re	6,380	0	0	6,380	0	0	6,125	0	2,411	0	6,380
13575	26-3791519	.05/01/2011	Montgomery Re	160,036,508	1,193,021	0	161,229,529	0	0	153,639,790	0	60,481,619	2,283,154	161,229,529
13575	26-3791519	.05/01/2011	Montgomery Re	371,004	0	0	371,004	0	0	572,558	0	0	0	371,004
13575	26-3791519	.07/01/2012	Montgomery Re	119,111,962	2,028,136	0	121,140,098	0	0	114,351,013	0	45,015,256	1,699,306	121,140,098
13575	26-3791519	.07/01/2012	Montgomery Re	1,772,573	0	0	1,772,573	0	0	2,735,554	0	0	0	1,772,573
0199999	Total - General Account - Life and Annuity - Affiliates - U.S. - Captive			776,079,559	11,598,539	0	787,678,098	0	XXX	464,857,943	0	430,353,473	10,849,645	787,678,098
0399999	Total - General Account - Life and Annuity - Affiliates - U.S. - Total			776,079,559	11,598,539	0	787,678,098	0	XXX	464,857,943	0	430,353,473	10,849,645	787,678,098
0799999	Total - General Account - Life and Annuity - Affiliates			776,079,559	11,598,539	0	787,678,098	0	XXX	464,857,943	0	430,353,473	10,849,645	787,678,098
General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates														
00000	AA-3190770	.01/01/2006	Chubb Tempest Reinsurance LTD	574	0	0	574	574	0001	0	0	0	0	574
00000	AA-3190770	.01/01/2006	Chubb Tempest Reinsurance LTD	230,861	0	0	230,861	239,426	0001	0	0	0	20,920	230,861
0999999	Total - General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates			231,435	0	0	231,435	240,000	XXX	0	0	0	20,920	231,435
1099999	Total - General Account - Life and Annuity - Non-Affiliates			231,435	0	0	231,435	240,000	XXX	0	0	0	20,920	231,435
1199999	Total - General Account - Life and Annuity			776,310,994	11,598,539	0	787,909,533	240,000	XXX	464,857,943	0	430,353,473	10,870,565	787,909,533
2399999	Total - General Account			776,310,994	11,598,539	0	787,909,533	240,000	XXX	464,857,943	0	430,353,473	10,870,565	787,909,533
3599999	Total - U.S.			776,079,559	11,598,539	0	787,678,098	0	XXX	464,857,943	0	430,353,473	10,849,645	787,678,098
3699999	Total - Non-U.S.			231,435	0	0	231,435	240,000	XXX	0	0	0	20,920	231,435
9999999	Total			776,310,994	11,598,539	0	787,909,533	240,000	XXX	464,857,943	0	430,353,473	10,870,565	787,909,533

SCHEDULE S - PART 4

Reinsurance Ceded To Unauthorized Companies

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
NAIC Company Code	ID Number	Effective Date	Name of Reinsurer	Reserve Credit Taken	Paid and Unpaid Losses Recoverable (Debit)	Other Debits	Total (Cols. 5 + 6 + 7)	Letters of Credit	Issuing or Confirming Bank Reference Number (a)	Trust Agreements	Funds Deposited by and Withheld from Reinsurers	Other	Miscellaneous Balances (Credit)	Sum of Cols. 9 + 11 + 12 + 13 + 14 But Not in Excess of Col. 8

(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
0001	2	121000248	Chubb Tempest Life Reinsuranc LTD	24,000
0001	2	021000089	Citibank, N.A.	24,000
0001	2	021000021	JPMorgan Chase Bank, N.A.	24,000
0001	2	026009593	Bank of America, N.A.	18,000
0001	2	026002574	Barclays Bank PLC	18,000
0001	2	021001088	HSBC Bank USA, National Association	18,000
0001	2	026002655	Lloyds Bank PLC	18,000
0001	2	026009632	The Bank of Tokyo-Mitsubishi UFJ, LTD	18,000
0001	2	026009917	Australia and New Zealand Banking Group Limited	12,000
0001	2	011000028	Wells Fargo Bank, National Association as Fronting Bank for ING Bank N.V., London Branck	12,000
0001	2	121000248	State Street Bank and Trust Company	12,000
0001	2	026014601	Wells Fargo Bank, National Association as Fronting Bank for the Royal Bank of Scotland PLC	12,000
0001	2	026014601	Goldman Sachs Bank USA	6,000
0001	2	026014630	Morgan Stanley Bank, N.A.	6,000
0001	2	026004093	Royao Bank of Canada	6,000
0001	2	026004093	Standard Chartered Bank	6,000
0001	2	021000018	The Bank of New York Mellon	6,000

SCHEDULE S - PART 5

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	Collateral							23	24	25	26
															16	17	18	19	20	21	22				
NAIC Company Code	ID Number	Effective Date	Name of Reinsurer	Domiciliary Jurisdiction	Certified Reinsurer Rating 1 thru 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% - 100%)	Reserve Credit Taken	Paid and Unpaid Losses Recoverable (Debit)	Other Debits	Total Recoverable Reserve Credit Taken (Cols. 9 + 10 + 11)	Miscellaneous Balances (Credit)	Net Obligation Subject to Collateral (Col. 12 - 13)	Dollar Amount of Collateral Required for Full Credit (Col. 14 x Col. 8)	Multiple Beneficiary Trust	Letters of Credit	Issuing or Confirming Bank Reference Number (a)	Trust Agreements	Funds Deposited by and Withheld from Reinsurers	Other	Total Collateral Provided (Cols. 16 + 17 + 19 + 20 + 21)	Percent of Collateral Provided for Net Obligation Subject to Collateral (Col. 22 / Col. 14)	Percent Credit Allowed on Net Obligation Subject to Collateral (Col. 23 / Col. 8, not to Exceed 100%)	Amount of Credit Allowed for Net Obligation Subject to Collateral (Col. 14 x Col. 24)	Liability for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 14 - Col. 25)

NONE

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	352,829	342,605	345,715	303,873	323,959
2.	Commissions and reinsurance expense allowances	39,956	38,830	56,641	63,585	50,686
3.	Contract claims	195,567	197,739	186,279	160,974	160,380
4.	Surrender benefits and withdrawals for life contracts	0	0	0	0	0
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	0	0	0	0	0
B.	**BALANCE SHEET ITEMS**					
8.	Premiums and annuity considerations for life and accident and health contracts deferred and uncollected	0	0	0	0	0
9.	Aggregate reserves for life and accident and health contracts	0	0	0	0	0
10.	Liability for deposit-type contracts	0	0	0	0	0
11.	Contract claims unpaid	22,213	30,188	20,340	14,394	16,773
12.	Amounts recoverable on reinsurance	6,436	8,153	10,879	7,791	8,961
13.	Experience rating refunds due or unpaid	0	0	0	0	0
14.	Policyholders' dividends (not included in Line 10)	0	0	0	0	0
15.	Commissions and reinsurance expense allowances due	0	0	0	0	0
16.	Unauthorized reinsurance offset	0	0	0	0	0
17.	Offset for reinsurance with certified reinsurers	0	0	0	0	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)	240	815	195	40,185	0
20.	Trust agreements (T)	464,858	433,553	437,958	379,911	0
21.	Other (O)	430,353	389,925	334,566	173,904	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

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)	3,434,185,349	0	3,434,185,349
2.	Reinsurance (Line 16)	6,435,787	0	6,435,787
3.	Premiums and considerations (Line 15)	138,534,122	0	138,534,122
4.	Net credit for ceded reinsurance	XXX	2,575,264,856	2,575,264,856
5.	All other admitted assets (balance)	124,585,414	0	124,585,414
6.	Total assets excluding Separate Accounts (Line 26)	3,703,740,672	2,575,264,856	6,279,005,528
7.	Separate Account assets (Line 27)	253,233,283	0	253,233,283
8.	Total assets (Line 28)	3,956,973,955	2,575,264,856	6,532,238,811
	LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9.	Contract reserves (Lines 1 and 2)	3,142,578,855	2,553,051,698	5,695,630,553
10.	Liability for deposit-type contracts (Line 3)	105,168,825	0	105,168,825
11.	Claim reserves (Line 4)	14,190,173	22,213,158	36,403,331
12.	Policyholder dividends/reserves (Lines 5 through 7)	0	0	0
13.	Premium & annuity considerations received in advance (Line 8)	537,542	0	537,542
14.	Other contract liabilities (Line 9)	8,158,986	0	8,158,986
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)	155,155,613	0	155,155,613
20.	Total liabilities excluding Separate Accounts (Line 26)	3,425,789,994	2,575,264,856	6,001,054,850
21.	Separate Account liabilities (Line 27)	253,233,283	0	253,233,283
22.	Total liabilities (Line 28)	3,679,023,277	2,575,264,856	6,254,288,133
23.	Capital & surplus (Line 38)	277,950,678	XXX	277,950,678
24.	Total liabilities, capital & surplus (Line 39)	3,956,973,955	2,575,264,856	6,532,238,811
	NET CREDIT FOR CEDED REINSURANCE			
25.	Contract reserves	2,553,051,698		
26.	Claim reserves	22,213,158		
27.	Policyholder dividends/reserves	0		
28.	Premium & annuity considerations received in advance	0		
29.	Liability for deposit-type contracts	0		
30.	Other contract liabilities	0		
31.	Reinsurance ceded assets	0		
32.	Other ceded reinsurance recoverables	0		
33.	Total ceded reinsurance recoverables	2,575,264,856		
34.	Premiums and considerations	0		
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	0		
41.	Total net credit for ceded reinsurance	2,575,264,856		

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.		Direct Business Only					
		1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1.	Alabama AL	5,250,171	240	345,727	0	0	5,596,138
2.	Alaska AK	126,624	0	3,257	0	0	129,881
3.	Arizona AZ	6,684,160	300	215,818	0	0	6,900,278
4.	Arkansas AR	7,324,367	0	139,159	0	0	7,463,526
5.	California CA	48,297,546	0	1,196,933	0	413,051	49,907,530
6.	Colorado CO	10,519,544	0	1,326,212	0	0	11,845,756
7.	Connecticut CT	6,278,582	0	254,411	0	0	6,532,993
8.	Delaware DE	607,947	0	33,611	0	0	641,558
9.	District of Columbia DC	794,986	0	58,542	0	0	853,528
10.	Florida FL	42,801,451	0	1,153,892	0	0	43,955,343
11.	Georgia GA	14,519,825	0	453,419	0	0	14,973,244
12.	Hawaii HI	112,789	0	5,376	0	0	118,165
13.	Idaho ID	3,551,186	225	250,509	0	0	3,801,920
14.	Illinois IL	19,640,690	0	642,142	0	0	20,282,832
15.	Indiana IN	8,779,154	0	270,046	0	0	9,049,200
16.	Iowa IA	8,703,920	0	173,277	0	0	8,877,197
17.	Kansas KS	20,680,234	14,500	322,268	0	0	21,017,002
18.	Kentucky KY	18,092,150	0	302,005	0	0	18,394,155
19.	Louisiana LA	4,792,299	0	294,886	0	0	5,087,185
20.	Maine ME	6,526,835	0	8,357	0	0	6,535,192
21.	Maryland MD	11,350,743	3,080	548,984	0	0	11,902,807
22.	Massachusetts MA	17,842,877	0	246,265	0	0	18,089,142
23.	Michigan MI	17,414,825	0	970,404	0	0	18,385,229
24.	Minnesota MN	7,753,925	0	303,384	0	0	8,057,309
25.	Mississippi MS	4,492,004	0	181,622	0	103,036	4,776,662
26.	Missouri MO	18,733,280	340	256,571	0	0	18,990,191
27.	Montana MT	2,610,488	0	96,161	0	0	2,706,649
28.	Nebraska NE	4,639,066	0	127,091	0	0	4,766,157
29.	Nevada NV	1,625,967	0	48,417	0	0	1,674,384
30.	New Hampshire NH	3,082,741	0	107,481	0	0	3,190,222
31.	New Jersey NJ	20,614,381	500	556,974	0	0	21,171,855
32.	New Mexico NM	1,119,785	0	43,354	0	0	1,163,139
33.	New York NY	1,129,306	0	45,279	0	0	1,174,585
34.	North Carolina NC	29,449,606	8,680	478,093	0	0	29,936,379
35.	North Dakota ND	1,152,206	0	48,308	0	41,667	1,242,181
36.	Ohio OH	45,233,613	0	1,644,777	0	102,313,563	149,191,953
37.	Oklahoma OK	11,635,821	0	301,161	0	0	11,936,982
38.	Oregon OR	5,729,320	0	275,650	0	0	6,004,970
39.	Pennsylvania PA	20,348,675	46,127	1,144,508	0	0	21,539,310
40.	Rhode Island RI	1,530,303	0	45,887	0	0	1,576,190
41.	South Carolina SC	3,845,181	0	110,994	0	0	3,956,175
42.	South Dakota SD	469,322	0	32,501	0	0	501,823
43.	Tennessee TN	19,920,025	0	609,283	0	125,339	20,654,647
44.	Texas TX	48,554,967	113	1,346,596	0	0	49,901,676
45.	Utah UT	6,818,706	0	201,247	0	0	7,019,953
46.	Vermont VT	527,191	0	8,929	0	0	536,120
47.	Virginia VA	23,225,555	1,260	369,652	0	0	23,596,467
48.	Washington WA	8,065,550	0	380,764	0	0	8,446,314
49.	West Virginia WV	1,315,487	100	231,958	0	0	1,547,545
50.	Wisconsin WI	6,134,359	0	466,740	0	47,543	6,648,642
51.	Wyoming WY	949,499	0	20,926	0	81,726	1,052,151
52.	American Samoa AS	0	0	0	0	0	0
53.	Guam GU	73,992	0	0	0	0	73,992
54.	Puerto Rico PR	4,124,426	0	1,054,708	0	0	5,179,134
55.	US Virgin Islands VI	17,789	0	0	0	0	17,789
56.	Northern Mariana Islands MP	0	0	0	0	0	0
57.	Canada CAN	6,245	0	0	0	0	6,245
58.	Aggregate Other Alien OT	28,428	0	16,143	0	0	44,571
59.	Totals	585,650,114	75,465	19,770,659	0	103,125,925	708,622,163

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Y/N)	16 *
Members															
0704	Ohio National Mutual Holdings, Inc.	0	31-1614095	0	0		Ohio National Mutual Holdings, Inc	OH	UIP		Ownership, Board of Directors, Management	0.000		N	0
0704	Ohio National Mutual Holdings, Inc.	0	31-1614097	0	0		Ohio National Financial Sevices, Inc	OH	UIP	Ohio National Mutual Holdings, Inc	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc	N	0
0704	Ohio National Mutual Holdings, Inc.	0	98-0602966	0	0		Sycamore Re, Ltd	CYM	IA	Ohio National Financial Services, Inc	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc	N	0
0704	Ohio National Mutual Holdings, Inc.	0	46-3873878	0	0		Ohio National Foreign Holdings, LLC	OH	NIA	Sycamore Re LTD	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc	N	0
0704	Ohio National Mutual Holdings, Inc.	0		0	0		Ohio National International Holdings Cooperatief U.A.	NLD	NIA	Ohio National Foreign Holdings, LLC	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc	N	0
0704	Ohio National Mutual Holdings, Inc.	0		0	0		ON Netherlands Holdings B.V.	NLD	NIA	Ohio National International Holdings Cooperatief U.A.	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc	N	0
0704	Ohio National Mutual Holdings, Inc.	0	31-1702660	0	0		ON Global Holdings, SMLLC	OH	NIA	ON Netherlands Holdings B.V.	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc	N	0
0704	Ohio National Mutual Holdings, Inc.	0	0	0	0		Ohio National Sudamerica S.A.	CHL	NIA	ON Global Holding, SMLLC	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc	N	0
0704	Ohio National Mutual Holdings, Inc.	0	0	0	0		Ohio National Seguros de Vida S.A.	CHL	NIA	Ohio National Sudamerica S.A.	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc	N	0
0704	Ohio National Mutual Holdings, Inc.	0	0	0	0		Ohio National Seguros de Vida S.A.	PER	IA	ON Netherlands Holdings B.V.	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc	N	0

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Y/N)	16 *
0704	Ohio National Mutual Holdings, Inc.	0	0	0	0		ONSV do Brasil Participações Ltda	BRA	NIA	ON Netherlands Holdings B.V.	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc	N	0
0704	Ohio National Mutual Holdings, Inc.	0	0	0	0		O.N. International do Brasil Participações Ltda.	BRA	NIA	ONSV do Brasil Participações Ltda.	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc	N	0
0704	Ohio National Mutual Holdings, Inc.	0	06-1187459	0	0		Fiduciary Capital Management, Inc	CT	NIA	Ohio National Financial Services, Inc.	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc	N	0
0704	Ohio National Mutual Holdings, Inc.	67172	31-0397080	0	0		The Ohio National Life Insurance Company	OH	UDP	Ohio National Financial Services, Inc.	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc	N	0
0704	Ohio National Mutual Holdings, Inc.	89206	31-0962495	0	0		Ohio National Life Assurance Coporation	OH	RE	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc	N	0
0704	Ohio National Mutual Holdings, Inc.	85472	13-2740556	0	0		National Security Life and Annuity Company	NY	IA	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc	N	0
0704	Ohio National Mutual Holdings, Inc.	13575	26-3791519	0	0		Montgomery Re, Inc	VT	IA	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc	N	0
0704	Ohio National Mutual Holdings, Inc.	15363	80-0955278	0	0		Kenwood Re, Inc	VT	IA	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc	N	0
0704	Ohio National Mutual Holdings, Inc.	15855	47-4249160	0	0		Camargo Re Captive, Inc	OH	IA	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc	N	0

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Y/N)	16 *
0704	Ohio National Mutual Holdings, Inc.	0	31-1454693	0	0		Ohio National Investments, Inc.	OH	NIA	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.	Y	0
0704	Ohio National Mutual Holdings, Inc.	0	31-1454699	0	0		Ohio National Equities, Inc.	OH	NIA	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.	Y	0
0704	Ohio National Mutual Holdings, Inc.	0	31-0742113	0	0		The O.N. Equity Sales Company	OH	NIA	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.	Y	0
0704	Ohio National Mutual Holdings, Inc.	0	32-0071428	0	0		Ohio National Insurance Agency, Inc.	OH	NIA	The O.N. Equity Sales Company	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.	N	0
0704	Ohio National Mutual Holdings, Inc.	0	31-0784369	0	0		O.N. Investment Management Company	OH	NIA	The O.N. Equity Sales Company	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.	N	0
0704	Ohio National Mutual Holdings, Inc.	0	63-1202147	0	0		Ohio National Insurance Agency of Alabama, Inc.	AL	NIA	The O.N. Equity Sales Company	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.	N	0
0704	Ohio National Mutual Holdings, Inc.	0	31-1684349	0	0		ON Flight, Inc.	OH	NIA	Ohio National Financial Services, Inc.	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.	N	0
0704	Ohio National Mutual Holdings, Inc.	0	26-4812790	0	0		Financial Way Realty, Inc.	OH	NIA	Ohio National Financial Services, Inc.	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.	N	0
0704	Ohio National Mutual Holdings, Inc.	0	46-5464819	0	0		ON Tech, LLC	DE	NIA	Ohio National Financial Services, Inc.	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.	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 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
Affiliated Transactions												
00000	31-1614095	Ohio National Mutual Holdings, Inc	0	0	0	0	0	0		0	0	0
00000	31-1614097	Ohio National Financial Sevices, Inc	0	0	0	0	0	0		0	0	0
00000	98-0602966	Sycamore Re, Ltd	0	0	0	0	0	0		0	0	0
00000	46-3873878	Ohio National Foreign Holdings, LLC	0	0	0	0	0	0		0	0	0
00000	00-0000000	Ohio National International Holdings Cooperatief U.A	0	0	0	0	0	0		0	0	0
00000	00-0000000	ON Netherlands Holdings B.V	0	0	0	0	0	0		0	0	0
00000	31-1702660	ON Global Holdings, SMLLC	0	0	0	0	0	0		0	0	0
00000	00-0000000	Ohio National Sudamerica S.A	0	0	0	0	0	0		0	0	0
00000	00-0000000	Ohio National Seguros de Vida S.A	0	0	0	0	0	0		0	0	0
00000	00-0000000	Ohio National Seguros de Vida S.A	0	0	0	0	0	0		0	0	0
00000	00-0000000	ONSV do Brasil Participações Ltda	0	0	0	0	0	0		0	0	0
00000	00-0000000	O.N. International do Brasil Participações Ltda	0	0	0	0	0	0		0	0	0
00000	06-1187459	Fiduciary Capital Management, Inc	0	0	0	0	0	0		0	0	0
67172	31-0397080	The Ohio National Life Insurance Company	28,000,000	0	0	0	57,204,422	(32,690,175)		0	52,514,247	(900,118,268)
89206	31-0962495	Ohio National Life Assurance Corporation	(28,000,000)	0	0	0	(57,212,454)	84,534,981		0	(677,473)	1,745,479,740
85472	13-2740556	National Security Life and Annuity Co	0	0	0	0	0	0		0	0	0
13575	26-3791519	Montgomery Re, Inc	0	0	0	0	0	7,607,086		0	7,607,086	(301,370,988)
15363	80-0955278	Kenwood Re, Inc	0	0	0	0	0	(47,708,771)		0	(47,708,771)	(486,307,110)
15855	47-4249160	Camargo Re Captive, Inc	0	0	0	0	0	(11,743,121)		0	(11,743,121)	(57,683,374)
00000	31-1454693	Ohio National Investments, Inc	0	0	0	0	0	0		0	0	0
00000	31-1454699	Ohio National Equities, Inc	0	0	0	0	6,453	0		0	6,453	0
00000	31-0742113	The O.N. Equity Sales Company	0	0	0	0	1,579	0		0	1,579	0
00000	32-0071428	Ohio National Insurance Agency, Inc	0	0	0	0	0	0		0	0	0
00000	31-0784369	O.N. Investment Management Company	0	0	0	0	0	0		0	0	0
00000	63-1202147	Ohio National Insurance Agency of Alabama, Inc	0	0	0	0	0	0		0	0	0
00000	31-1684349	ON Flight, Inc	0	0	0	0	0	0		0	0	0
00000	26-4812790	Financial Way Reality, Inc	0	0	0	0	0	0		0	0	0
00000	03-0374493	Suffolk Capital Management, LLC	0	0	0	0	0	0		0	0	0
00000	46-5464819	ONTech, LLC	0	0	0	0	0	0		0	0	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
	MARCH FILING	
1.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2.	Will the confidential Risk-Based Capital Report be filed with the NAIC by March 1?	YES
3.	Will the confidential Risk-Based Capital Report be filed with the state of domicile, if required, by March 1?	YES
4.	Will an actuarial opinion be filed by March 1?	YES
	APRIL FILING	
5.	Will Management's Discussion and Analysis be filed by April 1?	YES
6.	Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
7.	Will the Adjustment Form (if required) be filed with state of domicile and the NAIC by April 1?	YES
8.	Will the Supplemental Investment Risk Interrogatories be filed by April 1?	YES
	JUNE FILING	
9.	Will an audited financial report be filed by June 1?	YES
10.	Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES
	AUGUST FILING	
11.	Will 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

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

	MARCH FILING	
12.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
13.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
14.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
15.	Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	NO
16.	Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	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?	YES
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?	YES
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?	YES
34.	Will the Workers' Compensation Carve-Out Supplement be filed by March 1?	NO
35.	Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1?	YES
36.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
37.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO
38.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
39.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
40.	Will the confidential Regulatory Asset Adequacy Issues Summary (RAAIS) required by Actuarial Opinion and Memorandum Regulation (Model 822), Section 7A(5), be filed with the state of domicile by March 15?	YES
	APRIL FILING	
41.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
42.	Will the Interest-Sensitive Life Insurance Products Report Forms be filed with the state of domicile and the NAIC by April 1?	YES
43.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
44.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	YES
45.	Will the Analysis of Annuity Operations by Lines of Business be filed with the state of domicile and the NAIC by April 1?	YES
46.	Will the Analysis of Increase in Annuity Reserves During the Year be filed with the state of domicile and the NAIC by April 1?	YES
47.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	NO
48.	Will the regulator only (non-public) Supplemental Health Care Exhibit's 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/AXXX Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
	AUGUST FILING	
51.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES

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.
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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.
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18. The data for this supplement is not required to be filed.
19. The data for this supplement is not required to be filed.
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30. The data for this supplement is not required to be filed.
31. The data for this supplement is not required to be filed.
32. The data for this supplement is not required to be filed.
33.
34. The data for this supplement is not required to be filed.

BAR CODE:

8920620164200000000
8920620163600000000
8920620164900000000
8920620163710000000
8920620164300000000
8920620164400000000
8920620164450000000
8920620164460000000
8920620164470000000
8920620164480000000
8920620164490000000
8920620164520000000
8920620164530000000
8920620164360000000
8920620164370000000
8920620164380000000
8920620164390000000
8920620164950000000

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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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.

Overflow Page for Write-Ins

Additional Write-ins for Summary of Operations:

		1 Current Year	2 Prior Year
08.304	Loss on Fixed Assets	0	(6,742,912)
08.397	Summary of remaining write-ins for Line 8.3	0	(6,742,912)

Additional Write-ins for Exhibit 2:

	Insurance				5	6
	1	Accident and Health		4		
		2	3	All Other Lines		
	Life	Cost Containment	All Other	of Business	Investment	Total
09.304. Regional General Agent Development	36,482	0	4,195	0	0	40,677
09.397. Summary of remaining write-ins for Line 9.3	36,482	0	4,195	0	0	40,677

Overflow Page for Write-Ins

NONE

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

SCHEDULE O SUPPLEMENT

NONE

For the year ended December 31, 2016
(To Be Filed March 1)

Of The.....OHIO NATIONAL LIFE ASSURANCE CORPORATION
Address (City, State, Zip Code).....Cincinnati, OH 45242
NAIC Group Code.....0704 NAIC Company Code.....89206 Employer's ID Number.....31-0962495

SUPPLEMENTAL SCHEDULE O - PART 1

Development of Incurred Losses
($000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Net Amounts Paid Policyholders				
	1	2	3	4	5
	2012	2013	2014	2015	2016 (a)
1. Prior	0	0	0	0	0
2. 2012	0	0	0	0	0
3. 2013	XXX	0	0	0	0
4. 2014	XXX	XXX	0	0	0
5. 2015	XXX	XXX	XXX	0	0
6. 2016	XXX	XXX	XXX	XXX	0

NONE

Section B - Other Accident and Health

1. Prior	2,924	2,642	6,743	8,893	8,524
2. 2012	75	209	423	244	199
3. 2013	XXX	77	600	397	493
4. 2014	XXX	XXX	473	396	323
5. 2015	XXX	XXX	XXX	146	637
6. 2016	XXX	XXX	XXX	XXX	160

Section C - Credit Accident and Health

1. Prior	0	0	0	0	0
2. 2012	0	0	0	0	0
3. 2013	XXX	0	0	0	0
4. 2014	XXX	XXX	0	0	0
5. 2015	XXX	XXX	XXX	0	0
6. 2016	XXX	XXX	XXX	XXX	0

NONE

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

SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O - PART 2

Development of Incurred Losses

($000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Net Amounts Paid for Cost Containment Expenses				
	1 2012	2 2013	3 2014	4 2015	5 2016
1. Prior	0	0	0	0	0
2. 2012	0	0	0	0	0
3. 2013	XXX	0	0	0	0
4. 2014	XXX	XXX	0	0	0
5. 2015	XXX	XXX	XXX	0	0
6. 2016	XXX	XXX	XXX	XXX	0

NONE

Section B - Other Accident and Health

1. Prior	0	0	0	0	0
2. 2012	402	0	0	0	0
3. 2013	XXX	158	0	0	0
4. 2014	XXX	XXX	265	0	0
5. 2015	XXX	XXX	XXX	351	0
6. 2016	XXX	XXX	XXX	XXX	145

Section C - Credit Accident and Health

1. Prior	0	0	0	0	0
2. 2012	0	0	0	0	0
3. 2013	XXX	0	0	0	0
4. 2014	XXX	XXX	0	0	0
5. 2015	XXX	XXX	XXX	0	0
6. 2016	XXX	XXX	XXX	XXX	0

NONE

SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O - PART 3

Development of Incurred Losses

($000 OMITTED)

Section A - Group Accident and Health

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

NONE

Section B - Other Accident and Health

1. 2012	1,932	1,071	2,193	XXX	XXX
2. 2013	XXX	1,885	3,158	2,600	XXX
3. 2014	XXX	XXX	4,482	2,473	1,574
4. 2015	XXX	XXX	XXX	7,356	6,726
5. 2016	XXX	XXX	XXX	XXX	6,037

Section C - Credit Accident and Health

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

NONE

SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O - PART 4

Development of Incurred Losses

($000 OMITTED)

Section A - Group Accident and Health

NONE

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	1,932	1,071	2,193	1,641	1,325
2. 2013	XXX	1,885	3,158	2,600	1,986
3. 2014	XXX	XXX	4,482	2,473	1,574
4. 2015	XXX	XXX	XXX	7,356	6,726
5. 2016	XXX	XXX	XXX	XXX	6,037

Section C - Credit Accident and Health

NONE

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 and Other	13,573
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	Standard Factor and Other	68,697
11. Total		82,270

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

2016 ALPHABETICAL INDEX
LIFE ANNUAL STATEMENT BLANK