
AMENDED FILING EXPLANATION

Amending the following pages for correction to 2017 federal income taxes to mirror the 2017 Audited Financial Statement Balance Sheets and Statement of Cash Flows.

- Page 2 ASSETS
- Page 3 LIAB
- Page 4 SUMOPS
- Page 5 CASH
- Page 6 ANAOPS
- Page 19 NOTES
- Page 22 HIST5YR
- Page 23 HIST5YR
- Page 48 SCSPT7



ANNUAL STATEMENT

For the Year Ended December 31, 2017
of the Condition and Affairs of the

United Benefit Life Insurance Company

NAIC Group Code.....0901, 0901
(Current Period) (Prior Period)

Organized under the Laws of OH

Incorporated/Organized..... June 26, 1957

Statutory Home Office

Main Administrative Office

Mail Address

Primary Location of Books and Records

Internet Web Site Address

Statutory Statement Contact

NAIC Company Code..... 65269

State of Domicile or Port of Entry OH

1300 East Ninth Street..... Cleveland OH US 44114
(Street and Number) (City or Town, State, Country and Zip Code)

11200 Lakeline Blvd Ste 100..... Austin TX US..... 78717
(Street and Number) (City or Town, State, Country and Zip Code)

11200 Lakeline Blvd Ste 100..... Austin TX US 78717
(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)

11200 Lakeline Blvd Ste 100..... Austin TX US 78717
(Street and Number) (City or Town, State, Country and Zip Code)

www.CignaSupplementalBenefits.com

Renee Wilkins Feldman
(Name)
CSBFinRpt@cigna.com
(E-Mail Address)

Employer's ID Number..... 75-2305400

Country of Domicile US

Commenced Business..... August 13, 1957

512-451-2224
(Area Code) (Telephone Number)

512-451-2224
(Area Code) (Telephone Number)

(512) 531-1465
(Area Code) (Telephone Number) (Extension)
512-467-1399
(Fax Number)

OFFICERS

Name	Title	Name	Title
1. Stephen Burnett Jones #	President	2. Byron Keith Buescher	Treasurer and Chief Accounting Officer
3. Anna Krishtul	Secretary	4. Susan Eadaoine Buck	Appointed Actuary

OTHER

Gregory John Czar #	Executive Vice President and Chief Financial Officer	David Lawrence Chambers	Vice President-Sales and Marketing
Mark Fleming	Vice President and Assistant Treasurer	Joanne Ruth Hart	Vice President and Assistant Treasurer
Ryan Bruce McGoarty #	Vice President	Scott Ronald Lambert	Vice President and Assistant Treasurer
Maureen Hardiman Ryan	Vice President and Assistant Treasurer	Man-Kit Simon Tang	Vice President and Chief Actuary

DIRECTORS OR TRUSTEES

Gregory John Czar #	Brian Case Evanko	Stephen Burnett Jones #	Ryan Bruce McGoarty #
Frank Sataline, Jr.	James Yablecki		

State of..... Texas
County of..... Williamson

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) Stephen Burnett Jones	(Signature) Byron Keith Buescher	(Signature) Anna Krishtul
1. (Printed Name) President	2. (Printed Name) Treasurer and Chief Accounting Officer	3. (Printed Name) Secretary
(Title)	(Title)	(Title)
Subscribed and sworn to before me	a. Is this an original filing?	Yes [] No [x]
This _____ day of _____ 2018	b. If no	1. State the amendment number 1
		2. Date filed _____
		3. Number of pages attached 9

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1	2	3
	As Reported (Net of Ceded)	Restatement Adjustments	Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12).....	3,187,363		3,187,363
2. Reinsurance (Line 16).....			0
3. Premiums and considerations (Line 15).....			0
4. Net credit for ceded reinsurance.....	XXX	0	0
5. All other admitted assets (balance).....	17,043		17,043
6. Total assets excluding Separate Accounts (Line 26).....	3,204,406	0	3,204,406
7. Separate Account assets (Line 27).....			0
8. Total assets (Line 28).....	3,204,406	0	3,204,406
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9. Contract reserves (Lines 1 and 2).....			0
10. Liability for deposit-type contracts (Line 3).....			0
11. Claim reserves (Line 4).....			0
12. Policyholder dividends/reserves (Lines 5 through 7).....			0
13. Premium & annuity considerations received in advance (Line 8).....			0
14. Other contract liabilities (Line 9).....	38,354		38,354
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount).....			0
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount).....			0
17. Reinsurance with certified reinsurers (Line 24.02 inset amount).....			0
18. Funds held under reinsurance treaties with certified reinsurers (Line 24.03 inset amount).....			0
19. All other liabilities (balance).....	243,822		243,822
20. Total liabilities excluding Separate Accounts (Line 26).....	282,176	0	282,176
21. Separate Account liabilities (Line 27).....			0
22. Total liabilities (Line 28).....	282,176	0	282,176
23. Capital & surplus (Line 38).....	2,922,230	XXX	2,922,230
24. Total liabilities, capital & surplus (Line 39).....	3,204,406	0	3,204,406
NET CREDIT FOR CEDED REINSURANCE			
25. Contract reserves.....	0		
26. Claim reserves.....	0		
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.....	0		
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.....	0		