



# ANNUAL STATEMENT

For the Year Ended December 31, 2017

of the Condition and Affairs of the

## Universal Guaranty Life Insurance Company

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

NAIC Company Code..... 70130

Employer's ID Number..... 31-0727974

Organized under the Laws of OH

State of Domicile or Port of Entry OH

Country of Domicile US

Incorporated/Organized..... November 15, 1966

Commenced Business..... December 31, 1966

Statutory Home Office

65 East State Street, Suite 2100..... Columbus .... OH .... US .... 43215-4260  
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office

5250 S 6th Street Rd..... Springfield .... IL .... US .... 62703-5158  
(Street and Number) (City or Town, State, Country and Zip Code)

877-881-1777

(Area Code) (Telephone Number)

Mail Address

P.O. Box 13080..... Springfield .... IL .... US .... 62791-3080  
(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records

5250 S 6th Street Rd..... Springfield .... IL .... US .... 62703-5158

877-881-1777

(Area Code) (Telephone Number)

Internet Web Site Address

(Street and Number) (City or Town, State, Country and Zip Code)

Statutory Statement Contact

Julie Ann Abel  
(Name)  
accounting@utgins.com  
(E-Mail Address)

217-241-6344

(Area Code) (Telephone Number) (Extension)

888-686-6567

(Fax Number)

### OFFICERS

Name	Title	Name	Title
1. James Patrick Rousey	President	2. Theodore Clayton Miller	Secretary/CFO
3. Julie Ann Abel	Treasurer	4.	

### OTHER

### DIRECTORS OR TRUSTEES

Randall Lanier Attkisson	Joseph Anthony Brinck II	Jesse Thomas Correll	Brian Jay Crall
Howard Lape Dayton Jr	Thomas Eugene Harmon	Peter Loyd Ochs	James Patrick Rousey
Gabriel John Molnar #			

State of..... Kentucky  
County of.... Lincoln

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)  
James Patrick Rousey  
1. (Printed Name)  
President  
(Title)

(Signature)  
Theodore Clayton Miller  
2. (Printed Name)  
Secretary/CFO  
(Title)

(Signature)  
Julie Ann Abel  
3. (Printed Name)  
Treasurer  
(Title)

Subscribed and sworn to before me

This \_\_\_\_\_ day of \_\_\_\_\_ 2018

a. Is this an original filing?

Yes [ X ] No [ ]

b. If no 1. State the amendment number

2. Date filed

3. Number of pages attached

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		1,333			.30	1,363
2. Annuity considerations.....		80				.80
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		1,413	.0	.0	.30	1,443
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit.....		129				129
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		129	.0	.0	.0	129
Annuites:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		.0	.0	.0	.0	0
8. Grand Totals (Lines 6.5 + 7.4).....		129	.0	.0	.0	129
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		5,000				5,000
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		.0	.0	.0	.0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		5,000	.0	.0	.0	5,000

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	5	32,082					.15	11,375	.20	43,457
17. Incurred during current year.....		5,000							0	5,000
Settled during current year:										
18.1 By payment in full.....		5,000							0	5,000
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	5,000	0	0	0	0	0	0	0	5,000
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	5,000	0	0	0	0	0	0	0	5,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	5	32,082	0	0	0	0	.15	11,375	.20	43,457
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	22	139,684	(a)						.22	139,684
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	1	5,427					2	2,500	3	7,927
23. In force December 31 of current year.....	23	145,111	0	(a)	0	0	2	2,500	.25	147,611

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

**NONE**

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		46,332		375	341	47,048
2. Annuity considerations.....		1,929				1,929
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		48,261	0	375	341	48,977
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		435				435
6.2 Applied to pay renewal premiums.....		175				175
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		15,255				15,255
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		15,865	0	0	0	15,865
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		15,865	0	0	0	15,865
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		373,668				373,668
10. Matured endowments.....		18,007				18,007
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		60,534			180	60,714
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		452,209	0	0	180	452,389

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	10	28,382					4	2,500	14	30,882
17. Incurred during current year.....	3	372,487							3	372,487
<b>Settled during current year:</b>										
18.1 By payment in full.....	8	391,675							8	391,675
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	8	391,675	0	0	0	0	0	0	8	391,675
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	8	391,675	0	0	0	0	0	0	8	391,675
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	5	9,194	0	0	0	0	4	2,500	9	11,694
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	2,798	8,324,590	(a)	1	6,000				2,799	8,330,590
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(147)	(403,586)	0	1	6,500	17	19,434	(129)	(377,652)	
23. In force December 31 of current year.....	2,651	7,921,004	0	2	12,500	17	19,434	2,670	7,952,938	

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		111,693			6,122	117,815
2. Annuity considerations.....		480				480
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		112,173	0	0	6,122	118,295
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		779				779
6.2 Applied to pay renewal premiums.....		60				60
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		2,071				2,071
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		2,910	0	0	0	2,910
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		2,910	0	0	0	2,910
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		132,245			9,952	142,197
10. Matured endowments.....		3,000			2,038	5,038
11. Annuity benefits.....		165				165
12. Surrender values and withdrawals for life contracts.....		23,269			4,158	27,427
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		158,679	0	0	16,148	174,827

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	(1)	(22,832)					2	10,500	1	(12,332)
17. Incurred during current year.....	6	1					9	8,990	15	8,991
<b>Settled during current year:</b>										
18.1 By payment in full.....	4	135,245					14	11,990	18	147,235
18.2 By payment on compromised claims.....								0	0	0
18.3 Totals paid.....	4	135,245	0	0	0	0	14	11,990	18	147,235
18.4 Reduction by compromise.....								0	0	0
18.5 Amount rejected.....								0	0	0
18.6 Total settlements.....	4	135,245	0	0	0	0	14	11,990	18	147,235
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	(158,076)	0	0	0	0	(3)	7,500	(2)	(150,576)
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	1,968	10,682,477	(a)				1,913	1,446,573	3,881	12,129,050
21. Issued during year.....								0	0	0
22. Other changes to in force (Net).....	(96)	(454,934)	0	(a)	0	0	.58	.56,524	(38)	(398,410)
23. In force December 31 of current year.....	1,872	10,227,543	0	(a)	0	0	1,971	1,503,097	3,843	11,730,640

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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



DIRECT BUSINESS IN AMERICAN SAMOA DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

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

**DETAILS OF WRITE-INS**

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

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

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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



DIRECT BUSINESS IN THE STATE OF ARIZONA DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		19,719				19,719
2. Annuity considerations.....		800				800
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		20,519	0	0	0	20,519
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		923				923
6.2 Applied to pay renewal premiums.....		389				389
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		222				222
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		1,534	0	0	0	1,534
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		1,534	0	0	0	1,534
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		11,934				11,934
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		25,720				25,720
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		37,654	0	0	0	37,654

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	11	24,955					(1)	1,286	10	26,241
17. Incurred during current year.....	(1)	10,034							(1)	10,034
<b>Settled during current year:</b>										
18.1 By payment in full.....		11,934						0		11,934
18.2 By payment on compromised claims.....								0		0
18.3 Totals paid.....	0	11,934	0	0	0	0	0	0	0	11,934
18.4 Reduction by compromise.....								0		0
18.5 Amount rejected.....								0		0
18.6 Total settlements.....	0	11,934	0	0	0	0	0	0	0	11,934
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	10	23,055	0	0	0	0	(1)	1,286	9	24,341
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	261	3,309,122	(a)				4	2,500	265	3,311,622
21. Issued during year.....								0		0
22. Other changes to in force (Net).....	(2)	135,837					9	9,007	7	144,844
23. In force December 31 of current year.....	259	3,444,959	0	(a)	0	0	13	11,507	272	3,456,466

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employee Health Benefits Plan premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
<b>Other Individual Policies:</b>					
25.1 Non-cancelable (b).....					
25.2 Guaranteed renewable (b).....		84	84		
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....		84	84	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		84	84	0	0

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



DIRECT BUSINESS IN THE STATE OF CALIFORNIA DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		28,638			385	29,023
2. Annuity considerations.....		971				971
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		29,609	0	0	385	29,994
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		1,718				1,718
6.2 Applied to pay renewal premiums.....		617				617
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		481				481
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		2,816	0	0	0	2,816
<b>Annuites:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		2,816	0	0	0	2,816
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		56,503				56,503
10. Matured endowments.....		11,161				11,161
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		18,355			1,571	19,926
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		86,019	0	0	1,571	87,590

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	(9)	(11,327)					(11)	(9,889)	(20)	(21,216)
17. Incurred during current year.....	4	132,057							4	132,057
<b>Settled during current year:</b>										
18.1 By payment in full.....	3	67,664							3	67,664
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	3	67,664	0	0	0	0	0	0	3	67,664
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	3	67,664	0	0	0	0	0	0	3	67,664
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	(8)	53,066	0	0	0	0	(11)	(9,889)	(19)	43,177
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	557	6,360,721	(a)				.76	76,899	.633	6,437,620
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(95)	(659,732)					(15)	(29,077)	(110)	(688,809)
23. In force December 31 of current year.....	462	5,700,989	0	(a)	0	0	.61	47,822	.523	5,748,811

(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).....						20,000
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
<b>Other Individual Policies:</b>						
25.1 Non-cancelable (b).....						
25.2 Guaranteed renewable (b).....						250
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		0	0	0	250	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		0	0	0	20,250	0

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



DIRECT BUSINESS IN THE STATE OF CANADA DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

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

**DETAILS OF WRITE-INS**

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

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

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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



DIRECT BUSINESS IN THE STATE OF COLORADO DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		48,194			199	48,393
2. Annuity considerations.....		1,075				1,075
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		49,269	0	0	199	49,468
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		2,117				2,117
6.2 Applied to pay renewal premiums.....		1,229				1,229
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		575				575
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		3,921	0	0	0	3,921
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		3,921	0	0	0	3,921
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		60,525				60,525
10. Matured endowments.....						0
11. Annuity benefits.....		2,221				2,221
12. Surrender values and withdrawals for life contracts.....		10,060				10,060
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		72,806	0	0	0	72,806

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	3	12,186					1	300	4	12,486
17. Incurred during current year.....	(3)	48,340					(1)	(300)	(4)	48,040
<b>Settled during current year:</b>										
18.1 By payment in full.....		60,525						0	0	60,525
18.2 By payment on compromised claims.....								0	0	0
18.3 Totals paid.....	0	60,525	0	0	0	0	0	0	0	60,525
18.4 Reduction by compromise.....								0	0	0
18.5 Amount rejected.....								0	0	0
18.6 Total settlements.....	0	60,525	0	0	0	0	0	0	0	60,525
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	1	0	0	0	0	0	0	0	1
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	485	6,982,269	(a)					485	6,982,269	
21. Issued during year.....								0	0	0
22. Other changes to in force (Net).....	(12)	1,797					23	21,895	11	23,692
23. In force December 31 of current year.....	473	6,984,066	0	(a)	0	0	23	21,895	496	7,005,961

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....						
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
<b>Other Individual Policies:</b>						
25.1 Non-cancelable (b).....						
25.2 Guaranteed renewable (b).....		149	149			
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		149	149	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		149	149	0	0	0

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



DIRECT BUSINESS IN THE STATE OF CONNECTICUT DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		3,350				3,350
2. Annuity considerations.....		800				800
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		4,150	0	0	0	4,150
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		118				118
6.2 Applied to pay renewal premiums.....		38				38
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		156	0	0	0	156
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		156	0	0	0	156
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		1,385				1,385
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		1,385	0	0	0	1,385

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
<b>Settled during current year:</b>										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	.25	308,864	(a).....				3	.1,750	.28	310,614
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(3)	(14,462)	0	(a).....	0	0	4	.2,000	1	(12,462)
23. In force December 31 of current year.....	22	294,402	0	(a).....	0	0	7	.3,750	.29	298,152

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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



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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		3,031			147	3,178
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		3,031	0	0	147	3,178
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		.31				.31
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		.31	0	0	0	.31
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		.31	0	0	0	.31
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		0	0	0	0	0

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	(1)	(1,248)					1	1,248	0	0
17. Incurred during current year.....									0	0
<b>Settled during current year:</b>										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	(1)	(1,248)	0	0	0	0	1	1,248	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	.53	346,337	(a)	(2)	(17,500)				.51	328,837
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(1)	(10,266)		.2	17,500	.22	.27,500	.23		34,734
23. In force December 31 of current year.....	.52	336,071	0	0	0	.22	.27,500	.74		363,571

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		1,489				1,489
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		1,489	0	0	0	1,489
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....						0
10. Matured endowments.....		2,500			193	2,693
11. Annuity benefits.....		17,115				17,115
12. Surrender values and withdrawals for life contracts.....		662				662
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		20,277	0	0	193	20,470

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	(1)	(10,000)					1	10,000	0	0
17. Incurred during current year.....	1	2,500					1	193	2	2,693
Settled during current year:										
18.1 By payment in full.....	1	2,500					1	193	2	2,693
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	1	2,500	0	0	0	0	1	193	2	2,693
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	1	2,500	0	0	0	0	1	193	2	2,693
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	(1)	(10,000)	0	0	0	0	1	10,000	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	26	271,793	(a)						.26	271,793
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(2)	2,408							(2)	2,408
23. In force December 31 of current year.....	24	274,201	0	(a) 0	0	0	0	0	.24	274,201

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

**NONE**

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		.271,792		1,110	203	.273,105
2. Annuity considerations.....		3,808				3,808
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		.275,600	.0	1,110	203	.276,913
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		4,957				4,957
6.2 Applied to pay renewal premiums.....		1,214				1,214
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		8,579				8,579
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		.14,750	.0	.0	.0	.14,750
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		.0	.0	.0	.0	0
8. Grand Totals (Lines 6.5 + 7.4).....		.14,750	.0	.0	.0	.14,750
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		.210,849		2,512		.213,361
10. Matured endowments.....		3,483				3,483
11. Annuity benefits.....		3,606				3,606
12. Surrender values and withdrawals for life contracts.....		.163,661				.163,661
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		.0	.0	.0	.0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		.381,599	.0	2,512	.0	.384,111

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	4	.37,562					2	.20,000	6	.57,562
17. Incurred during current year.....	(2)	182,395			1	7,500			(1)	189,895
<b>Settled during current year:</b>										
18.1 By payment in full.....	2	.214,332							2	.214,332
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	2	.214,332	0	0	0	0	0	0	2	.214,332
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	2	.214,332	0	0	0	0	0	0	2	.214,332
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	.5,625	0	0	1	7,500	2	.20,000	3	.33,125
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	.2,988	.35,895,462	(a)		11	.75,000	.15	.7,361	3,014	.35,977,823
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(92)	-(2,094,629)			(6)	(42,500)	.34	.32,621	(64)	-(2,104,508)
23. In force December 31 of current year.....	.2,896	.33,800,833	0	(a)	0	.32,500	.49	.39,982	.2,950	.33,873,315

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		99,997		495	1,169	101,661
2. Annuity considerations.....		500				500
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		100,497	0	495	1,169	102,161
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		1,043				1,043
6.2 Applied to pay renewal premiums.....		240				240
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		480				480
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		1,763	0	0	0	1,763
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		1,763	0	0	0	1,763
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		158,204			5,004	163,208
10. Matured endowments.....		1,000				1,000
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		166,314			1,922	168,236
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		325,518	0	0	6,926	332,444

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....		(20,463)					5	36,146	5	15,683
17. Incurred during current year.....	2	160,567				2,512	1	804	3	163,883
<b>Settled during current year:</b>										
18.1 By payment in full.....	2	159,204		1	2,512		5,004	3	166,720	
18.2 By payment on compromised claims.....								0		0
18.3 Totals paid.....	2	159,204	0	0	1	2,512	0	5,004	3	166,720
18.4 Reduction by compromise.....								0		0
18.5 Amount rejected.....								0		0
18.6 Total settlements.....	2	159,204	0	0	1	2,512	0	5,004	3	166,720
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	(19,100)	0	0	(1)	0	6	31,946	5	12,846
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	755	13,026,978	(a)	1	5,000	3	2,300	759	13,034,278	
21. Issued during year.....								0		0
22. Other changes to in force (Net).....	(52)	(935,674)	0	1	7,500	120	133,742	69	(794,432)	
23. In force December 31 of current year.....	703	12,091,304	0	2	12,500	123	136,042	828	12,239,846	

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....						
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
<b>Other Individual Policies:</b>						
25.1 Non-cancelable (b).....						
25.2 Guaranteed renewable (b).....		210	210			
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		210	210	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		210	210	0	0	0

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



DIRECT BUSINESS IN GRAND TOTAL DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		7,902,650		117,680	192,949	8,213,279
2. Annuity considerations.....		230,774				230,774
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		8,133,424	0	117,680	192,949	8,444,053
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		251,905				251,905
6.2 Applied to pay renewal premiums.....		68,205				68,205
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		96,958				96,958
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		417,068	0	0	0	417,068
<b>Annuites:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		417,068	0	0	0	417,068
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		13,639,227		246,104	338,534	14,223,865
10. Matured endowments.....		202,381			73,804	276,185
11. Annuity benefits.....		410,232				410,232
12. Surrender values and withdrawals for life contracts.....		4,985,547			100,242	5,085,789
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
15. Totals.....		19,237,387	0	246,104	512,580	19,996,071

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	96	989,030			6	48,299	243	962,464	345	1,999,793
17. Incurred during current year.....	64	13,538,913				227,804	542	398,954	606	14,165,671
<b>Settled during current year:</b>										
18.1 By payment in full.....	146	13,841,608			54	246,104	542	412,338	742	14,500,050
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	146	13,841,608	0	0	54	246,104	542	412,338	742	14,500,050
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	146	13,841,608	0	0	54	246,104	542	412,338	742	14,500,050
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	14	686,336	0	0	(48)	29,999	243	949,080	209	1,665,414
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	74,458	1,195,955,151	(a)	741	7,522,000	63,071	47,279,330	138,270	1,250,756,481	
21. Issued during year.....	2	115,000							2	115,000
22. Other changes to in force (Net).....	(4,739)	(62,270,555)		(76)	(1,044,100)	(2,887)	(2,290,147)	(7,702)	(65,604,802)	
23. In force December 31 of current year.....	69,721	1,133,799,596	0	(a)	665	6,477,900	60,184	44,989,183	130,570	1,185,266,679

(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).....						80,000
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
<b>Other Individual Policies:</b>						
25.1 Non-cancelable (b).....						
25.2 Guaranteed renewable (b).....		17,803	17,803			31,676
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		17,803	17,803	0	31,676	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		17,803	17,803	0	111,676	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.



\* 7 0 1 3 0 2 0 1 7 4 3 0 5 3 1 0 0 0 \*

DIRECT BUSINESS IN GUAM DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

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

**DETAILS OF WRITE-INS**

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

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

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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



DIRECT BUSINESS IN THE STATE OF HAWAII DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		1,196				1,196
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		1,196	0	0	0	1,196
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		.84				.84
6.2 Applied to pay renewal premiums.....		.64				.64
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		148	0	0	0	148
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		148	0	0	0	148
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		0	0	0	0	0

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
<b>Settled during current year:</b>										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	.20	140,315	(a)						.20	140,315
21. Issued during year.....									0	0
22. Other changes to in force (Net).....		(1)							0	(1)
23. In force December 31 of current year.....	.20	140,314	0	(a)	0	0	0	0	.20	140,314

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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



DIRECT BUSINESS IN THE STATE OF IOWA DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		191,725				191,725
2. Annuity considerations.....		29,659				29,659
3. Deposit-type contract funds.....		XXX				0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		221,384	0	0	0	221,384
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		11,152				11,152
6.2 Applied to pay renewal premiums.....		560				560
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		1,040				1,040
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		12,752	0	0	0	12,752
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		12,752	0	0	0	12,752
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		136,477				136,477
10. Matured endowments.....		506				506
11. Annuity benefits.....		109,139				109,139
12. Surrender values and withdrawals for life contracts.....		151,140				151,140
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		397,262	0	0	0	397,262

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	(1)	(2,581)					1	2,580	0	(1)
17. Incurred during current year.....	1	186,984							1	186,984
<b>Settled during current year:</b>										
18.1 By payment in full.....		136,984							0	136,984
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	136,984	0	0	0	0	0	0	0	136,984
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	136,984	0	0	0	0	0	0	0	136,984
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	47,419	0	0	0	0	1	2,580	1	49,999
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	770	29,924,881	(a)						770	29,924,881
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(28)	(1,209,275)					6	2,850	(22)	(1,206,425)
23. In force December 31 of current year.....	742	28,715,606	0	(a)	0	0	6	2,850	748	28,718,456

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		4,483				4,483
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX.....			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		4,483	0	0	0	4,483
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		3,398				3,398
10. Matured endowments.....		4,900				4,900
11. Annuity benefits.....		3,594				3,594
12. Surrender values and withdrawals for life contracts.....		9,792				9,792
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		21,684	0	0	0	21,684

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	(1)	(293)					1	293	0	0
17. Incurred during current year.....	2	8,298					2			8,298
<b>Settled during current year:</b>										
18.1 By payment in full.....	2	8,298					2			8,298
18.2 By payment on compromised claims.....							0			0
18.3 Totals paid.....	2	8,298	0	0	0	0	2			8,298
18.4 Reduction by compromise.....							0			0
18.5 Amount rejected.....							0			0
18.6 Total settlements.....	2	8,298	0	0	0	0	2			8,298
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	(1)	(293)	0	0	0	0	1	293	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	36	734,195	(a)				1	500	.37	734,695
21. Issued during year.....							0			0
22. Other changes to in force (Net).....	(1)	44,447	0	0	0	0	500	(1)		44,947
23. In force December 31 of current year.....	35	778,642	0	(a)	0	0	1	1,000	.36	779,642

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		1,210,214		1,379	2,524	1,214,117
2. Annuity considerations.....		63,734				63,734
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		1,273,948	0	1,379	2,524	1,277,851
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		73,302				73,302
6.2 Applied to pay renewal premiums.....		32,883				32,883
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		30,896				30,896
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		137,081	0	0	0	137,081
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		137,081	0	0	0	137,081
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		917,358			7,000	924,358
10. Matured endowments.....		2,058			1,500	3,558
11. Annuity benefits.....		62,783				62,783
12. Surrender values and withdrawals for life contracts.....		679,691			3,794	683,485
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		1,661,890	0	0	12,294	1,674,184

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	(6)	48,836					18	53,134	12	101,970
17. Incurred during current year.....	4	1,000,976						7,000	4	1,007,976
<b>Settled during current year:</b>										
18.1 By payment in full.....	7	919,416					2	8,500	9	927,916
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	7	919,416	0	0	0	0	2	8,500	9	927,916
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	7	919,416	0	0	0	0	2	8,500	9	927,916
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	(9)	130,396	0	0	0	0	16	51,634	7	182,030
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	7,268	241,185,988	(a)	9	85,600	1,005	825,493	8,282		242,097,081
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(287)	(9,723,849)		(1)	(20,300)	27	31,361	(261)		(9,712,788)
23. In force December 31 of current year.....	6,981	231,462,139	0	8	65,300	1,032	856,854	8,021		232,384,293

(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).....						60,000
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
<b>Other Individual Policies:</b>						
25.1 Non-cancelable (b).....						
25.2 Guaranteed renewable (b).....		12	12			
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		12	12	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		12	12	0	60,000	0

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		.211,002		360	.96	.211,458
2. Annuity considerations.....		16,366				16,366
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		.227,368	.0	360	.96	.227,824
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		.13,455				.13,455
6.2 Applied to pay renewal premiums.....		1,046				1,046
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		1,700				1,700
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		.16,201	.0	.0	.0	.16,201
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		.0	.0	.0	.0	0
8. Grand Totals (Lines 6.5 + 7.4).....		.16,201	.0	.0	.0	.16,201
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		.467,960				.467,960
10. Matured endowments.....		7,400				7,400
11. Annuity benefits.....		.687				.687
12. Surrender values and withdrawals for life contracts.....		.198,257				.198,257
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		.0	.0	.0	.0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		.674,304	.0	.0	.0	.674,304

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	5	.56,948					3	.23,956	8	.80,904
17. Incurred during current year.....	(1)	426,758							(1)	426,758
<b>Settled during current year:</b>										
18.1 By payment in full.....	4	.475,360							4	.475,360
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	4	.475,360	0	0	0	0	0	0	4	.475,360
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	4	.475,360	0	0	0	0	0	0	4	.475,360
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	.8,346	0	0	0	0	3	.23,956	3	.32,302
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	1,687	.27,707,827	(a)	.2	.15,000	7	.6,500	1,696		.27,729,327
21. Issued during year.....	1	.15,000						1		.15,000
22. Other changes to in force (Net).....	(75)	-(1,290,564)	0	0	0	19	.24,000	(56)		-(1,266,564)
23. In force December 31 of current year.....	1,613	.26,432,263	0	0	15,000	26	.30,500	1,641		.26,477,763

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....						
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
<b>Other Individual Policies:</b>						
25.1 Non-cancelable (b).....						
25.2 Guaranteed renewable (b).....		4,977	4,977		250	
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		4,977	4,977	0	250	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		4,977	4,977	0	250	0

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		432,319		180	1,318	433,817
2. Annuity considerations.....		2,580				2,580
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		434,899	0	180	1,318	436,397
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		6,047				6,047
6.2 Applied to pay renewal premiums.....		541				541
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		2,917				2,917
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		9,505	0	0	0	9,505
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		9,505	0	0	0	9,505
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		849,853			2,000	851,853
10. Matured endowments.....		6,107				6,107
11. Annuity benefits.....		284				284
12. Surrender values and withdrawals for life contracts.....		264,812				264,812
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		1,121,056	0	0	2,000	1,123,056

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	(4)	(61,141)					10	82,826	6	21,685
17. Incurred during current year.....	5	903,068					1	2,500	6	905,568
<b>Settled during current year:</b>										
18.1 By payment in full.....	3	855,960						2,000	3	857,960
18.2 By payment on compromised claims.....								0	0	0
18.3 Totals paid.....	3	855,960	0	0	0	0	0	2,000	3	857,960
18.4 Reduction by compromise.....								0	0	0
18.5 Amount rejected.....								0	0	0
18.6 Total settlements.....	3	855,960	0	0	0	0	0	2,000	3	857,960
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	(2)	(14,033)	0	0	0	0	11	83,326	9	69,293
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	2,256	38,757,215	(a)				8	8,890	2,264	38,766,105
21. Issued during year.....								0	0	0
22. Other changes to in force (Net).....	(119)	(2,388,616)			1	7,500	124	143,016	6	(2,238,100)
23. In force December 31 of current year.....	2,137	36,368,599	0	(a)	0	7,500	132	151,906	2,270	36,528,005

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....						
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
<b>Other Individual Policies:</b>						
25.1 Non-cancelable (b).....						
25.2 Guaranteed renewable (b).....		1,219	1,219			16,800
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		1,219	1,219	0	16,800	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		1,219	1,219	0	16,800	0

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		54,391		12,116	227	66,734
2. Annuity considerations.....		959				959
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		55,350	0	12,116	227	67,693
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		347				347
6.2 Applied to pay renewal premiums.....		485				485
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		1,260				1,260
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		2,092	0	0	0	2,092
<b>Annuites:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		2,092	0	0	0	2,092
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		296,636		8,500		305,136
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		38,055			811	38,866
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		334,691	0	8,500	811	344,002

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	3	3,001							3	3,001
17. Incurred during current year.....	(2)	343,636				8,500			(2)	352,136
<b>Settled during current year:</b>										
18.1 By payment in full.....		296,636		.2	8,500			2	305,136	
18.2 By payment on compromised claims.....								0	0	
18.3 Totals paid.....	0	296,636	0	0	8,500	0	0	2	305,136	
18.4 Reduction by compromise.....								0	0	
18.5 Amount rejected.....								0	0	
18.6 Total settlements.....	0	296,636	0	0	8,500	0	0	2	305,136	
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	50,001	0	0	(2)	0	0	(1)	50,001	
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	372	6,496,008	(a)	77	1,029,700	.10	.6,195	.459	7,531,903	
21. Issued during year.....								0	0	
22. Other changes to in force (Net).....	(15)	(382,876)		(3)	(125,500)	8	15,975	(10)	(492,401)	
23. In force December 31 of current year.....	357	6,113,132	0	74	904,200	.18	.22,170	.449	7,039,502	

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....						
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
<b>Other Individual Policies:</b>						
25.1 Non-cancelable (b).....						
25.2 Guaranteed renewable (b).....		553	553		260	
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		553	553	0	260	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		553	553	0	260	0

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		.231,164			.34,574	.265,738
2. Annuity considerations.....		1,783				1,783
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		.232,947	.0	.0	.34,574	.267,521
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		291				291
6.2 Applied to pay renewal premiums.....		225				225
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		1,351				1,351
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		1,867	.0	.0	.0	1,867
<b>Annuites:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		.0	.0	.0	.0	0
8. Grand Totals (Lines 6.5 + 7.4).....		1,867	.0	.0	.0	1,867
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		.429,765			.61,155	.490,920
10. Matured endowments.....		7,000			13,385	20,385
11. Annuity benefits.....		1,673				1,673
12. Surrender values and withdrawals for life contracts.....		.147,541			.12,961	.160,502
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		.0	.0	.0	.0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		.585,979	.0	.0	.87,501	.673,480

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	.11	.22,730					.30	.44,675	.41	.67,405
17. Incurred during current year.....	-(4)	406,036					.61	.75,385	.57	.481,421
<b>Settled during current year:</b>										
18.1 By payment in full.....	2	.436,765					.60	.74,540	.62	.511,305
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	2	.436,765	.0	0	0	0	.60	.74,540	.62	.511,305
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	2	.436,765	.0	0	0	0	.60	.74,540	.62	.511,305
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	5	-(7,999)	.0	0	0	0	.31	.45,520	.36	.37,521
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	.2,668	.27,122,744	(a)				.11,612	.10,195,609	.14,280	.37,318,353
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	-(143)	-(2,858,049)					-(739)	-(716,131)	-(882)	-(3,574,180)
23. In force December 31 of current year.....	.2,525	.24,264,695	0	(a)	0	0	.10,873	.9,479,478	.13,398	.33,744,173

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

**NONE**



DIRECT BUSINESS IN THE STATE OF MASSACHUSETTS DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		1,945				1,945
2. Annuity considerations.....		160				160
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		2,105	0	0	0	2,105
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		317				317
6.2 Applied to pay renewal premiums.....		131				131
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		25				25
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		473	0	0	0	473
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		473	0	0	0	473
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		1,000				1,000
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		1,000	0	0	0	1,000

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....	1	11,000							1	11,000
<b>Settled during current year:</b>										
18.1 By payment in full.....		1,000							0	1,000
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	1,000	0	0	0	0	0	0	0	1,000
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	1,000	0	0	0	0	0	0	0	1,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	10,000	0	0	0	0	0	0	1	10,000
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	.52	2,725,454	(a)						.52	2,725,454
21. Issued during year.....									0	0
22. Other changes to in force (Net).....		13,506							0	13,506
23. In force December 31 of current year.....	.52	2,738,960	0 (a)	0	0	0	0	0	.52	2,738,960

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		12,944			103	13,047
2. Annuity considerations.....		10,867				10,867
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		23,811	0	0	103	23,914
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		558				558
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		558	0	0	0	558
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		558	0	0	0	558
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		55,509			(1,570)	53,939
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		22,625				22,625
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		78,134	0	0	(1,570)	76,564

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....	1	71,509					1	(570)	2	70,939
<b>Settled during current year:</b>										
18.1 By payment in full.....		55,509						(1,570)	0	53,939
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	55,509	0	0	0	0	0	(1,570)	0	53,939
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	55,509	0	0	0	0	0	(1,570)	0	53,939
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	16,000	0	0	0	0	1	1,000	2	17,000
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	154	1,585,405	(a)				8	4,010	162	1,589,415
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(7)	(37,048)					.51	.55,972	.44	18,924
23. In force December 31 of current year.....	147	1,548,357	0	(a)	0	0	.59	.59,982	.206	1,608,339

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		66				.66
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		66	0	0	0	.66
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		206				206
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		206	0	0	0	206
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		206	0	0	0	206
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		4,661				4,661
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		4,661	0	0	0	4,661

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
<b>Settled during current year:</b>										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	.11	246,615	(a)						.11	246,615
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(2)	(3,762)					1	.5,000	(1)	1,238
23. In force December 31 of current year.....	9	242,853	0	(a)	0	0	1	.5,000	.10	247,853

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		157,017		180	265	157,462
2. Annuity considerations.....		1,962				1,962
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		158,979	0	180	265	159,424
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		2,315				2,315
6.2 Applied to pay renewal premiums.....		799				799
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		227				227
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		3,341	0	0	0	3,341
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		3,341	0	0	0	3,341
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		912,950				912,950
10. Matured endowments.....		399				399
11. Annuity benefits.....		20,574				20,574
12. Surrender values and withdrawals for life contracts.....		100,051				100,051
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		1,033,974	0	0	0	1,033,974

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....		44,155					2	6,000	2	50,155
17. Incurred during current year.....	1	871,193					1	232	2	871,425
<b>Settled during current year:</b>										
18.1 By payment in full.....	1	913,349							1	913,349
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	1	913,349	0	0	0	0	0	0	1	913,349
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	1	913,349	0	0	0	0	0	0	1	913,349
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	1,999	0	0	0	0	3	6,232	3	8,231
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	.844	17,782,601	(a)				7	4,078	.851	17,786,679
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(50)	(1,603,707)			1	5,000	.63	50,744	14	(1,547,963)
23. In force December 31 of current year.....	.794	16,178,894	0	(a)	1	5,000	.70	54,822	.865	16,238,716

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....						
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
<b>Other Individual Policies:</b>						
25.1 Non-cancelable (b).....						
25.2 Guaranteed renewable (b).....		168	168			
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		168	168	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		168	168	0	0	0

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		12,449			16	12,465
2. Annuity considerations.....		92				.92
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		12,541	0	0	16	12,557
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		751				751
6.2 Applied to pay renewal premiums.....		68				.68
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		16				16
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		835	0	0	0	835
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		835	0	0	0	835
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		5,850				5,850
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		5,850	0	0	0	5,850

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....		5,850							0	5,850
<b>Settled during current year:</b>										
18.1 By payment in full.....		5,850							0	5,850
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	5,850	0	0	0	0	0	0	0	5,850
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	5,850	0	0	0	0	0	0	0	5,850
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	105	1,580,085	(a)						105	1,580,085
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(4)	(184,099)					8	5,500	4	(178,599)
23. In force December 31 of current year.....	101	1,395,986	0	(a)	0	0	8	5,500	109	1,401,486

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		234,546		119	3,904	238,569
2. Annuity considerations.....		13,154				13,154
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		247,700	0	119	3,904	251,723
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		6,925				6,925
6.2 Applied to pay renewal premiums.....		2,453				2,453
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		489				489
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		9,867	0	0	0	9,867
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		9,867	0	0	0	9,867
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		462,455			8,000	470,455
10. Matured endowments.....		2,066			1,236	3,302
11. Annuity benefits.....		4,093				4,093
12. Surrender values and withdrawals for life contracts.....		212,774			3,710	216,484
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		681,388	0	0	12,946	694,334

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	(12)	(50,920)					.20	124,452	8	73,532
17. Incurred during current year.....		407,469					6	9,736	6	417,205
<b>Settled during current year:</b>										
18.1 By payment in full.....	4	464,521					5	9,236	9	473,757
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	4	464,521	0	0	0	0	5	9,236	9	473,757
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	4	464,521	0	0	0	0	5	9,236	9	473,757
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	(16)	(107,972)	0	0	0	0	.21	124,952	5	16,980
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	2,593	38,994,790	(a)				1,551	1,277,373	4,144	40,272,163
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(119)	(1,615,701)			1	20,300	(24)	(12,241)	(142)	(1,607,642)
23. In force December 31 of current year.....	2,474	37,379,089	0	(a)	0	20,300	1,527	1,265,132	4,002	38,664,521

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....						
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
<b>Other Individual Policies:</b>						
25.1 Non-cancelable (b).....						
25.2 Guaranteed renewable (b).....		675	675			8,496
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		675	675	0	8,496	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		675	675	0	8,496	0

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



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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

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

**DETAILS OF WRITE-INS**

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

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

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		153,942			42,509	196,451
2. Annuity considerations.....		1,161				1,161
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		155,103	0	0	42,509	197,612
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		34				34
6.2 Applied to pay renewal premiums.....		852				852
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		2,365				2,365
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		3,251	0	0	0	3,251
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		3,251	0	0	0	3,251
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		240,763			34,629	275,392
10. Matured endowments.....		11,000			19,105	30,105
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		26,119			5,603	31,722
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		277,882	0	0	59,337	337,219

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	10	39,990					3	1,850	13	41,840
17. Incurred during current year.....	(3)	218,776					338	55,934	335	274,710
<b>Settled during current year:</b>										
18.1 By payment in full.....	2	251,763					336	53,734	338	305,497
18.2 By payment on compromised claims.....								0	0	0
18.3 Totals paid.....	2	251,763	0	0	0	0	336	53,734	338	305,497
18.4 Reduction by compromise.....								0	0	0
18.5 Amount rejected.....								0	0	0
18.6 Total settlements.....	2	251,763	0	0	0	0	336	53,734	338	305,497
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	5	7,003	0	0	0	0	5	4,050	10	11,053
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	1,734	18,693,546	(a)				19,284	8,525,603	21,018	27,219,149
21. Issued during year.....								0	0	0
22. Other changes to in force (Net).....	(117)	(2,121,924)					(1,129)	(654,795)	(1,246)	(2,776,719)
23. In force December 31 of current year.....	1,617	16,571,622	0	(a)	0	0	18,155	7,870,808	19,772	24,442,430

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		30,745				30,745
2. Annuity considerations.....		360				360
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		31,105	0	0	0	31,105
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		32				.32
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		32	0	0	0	.32
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		32	0	0	0	.32
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		6,713				6,713
10. Matured endowments.....		800				800
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		7,513	0	0	0	7,513

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....		(1)							0	(1)
17. Incurred during current year.....	2	19,339							2	19,339
<b>Settled during current year:</b>										
18.1 By payment in full.....	1	7,513							1	7,513
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	1	7,513	0	0	0	0	0	0	1	7,513
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	1	7,513	0	0	0	0	0	0	1	7,513
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	11,825	0	0	0	0	0	0	1	11,825
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	109	2,328,136	(a)						109	2,328,136
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(1)	9,164							(1)	9,164
23. In force December 31 of current year.....	108	2,337,300	0	(a)	0	0	0	0	108	2,337,300

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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



DIRECT BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		139,282		2,313	172	141,767
2. Annuity considerations.....		2,461				2,461
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		141,743	0	2,313	172	144,228
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		1,412				1,412
6.2 Applied to pay renewal premiums.....		304				304
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		215				215
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		1,931	0	0	0	1,931
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		1,931	0	0	0	1,931
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		117,469		5,000	1,038	123,507
10. Matured endowments.....		1,000				1,000
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		142,360				142,360
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		260,829	0	5,000	1,038	266,867

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	(1)	(8,572)					1	8,572	0	0
17. Incurred during current year.....	1	118,469			1	10,000		1,038	2	129,507
<b>Settled during current year:</b>										
18.1 By payment in full.....	1	118,469			1	5,000		1,038	2	124,507
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	1	118,469	0	0	1	5,000	0	1,038	2	124,507
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	1	118,469	0	0	1	5,000	0	1,038	2	124,507
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	(1)	(8,572)	0	0	0	5,000	1	8,572	0	5,000
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	750	17,042,494	(a)		10	70,000	.14	.7,763	.774	.17,120,257
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(21)	(683,438)			2	11,000	.41	.43,462	.22	(628,976)
23. In force December 31 of current year.....	729	16,359,056	0	(a)	12	.81,000	.55	.51,225	.796	.16,491,281

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....						
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
<b>Other Individual Policies:</b>						
25.1 Non-cancelable (b).....						
25.2 Guaranteed renewable (b).....		130	130			
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		130	130	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		130	130	0	0	0

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



DIRECT BUSINESS IN THE STATE OF NORTH DAKOTA DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		1,632			.96	1,728
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		1,632	0	.0	.96	1,728
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		0	0	0	0	0

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....	1	50,206							1	50,206
<b>Settled during current year:</b>										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	50,206	0	0	0	0	0	0	1	50,206
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	6	224,207	(a)						6	224,207
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(1)	(50,000)					2	2,000	1	(48,000)
23. In force December 31 of current year.....	5	174,207	0	(a)	0	0	2	2,000	7	176,207

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....						
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
<b>Other Individual Policies:</b>						
25.1 Non-cancelable (b).....						
25.2 Guaranteed renewable (b).....		147	147			
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		147	147	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		147	147	0	0	0

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		61,116				61,116
2. Annuity considerations.....		2,527				2,527
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		63,643	0	0	0	63,643
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		81				81
6.2 Applied to pay renewal premiums.....		183				183
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		20				20
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		284	0	0	0	284
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		284	0	0	0	284
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....		1,829				1,829
12. Surrender values and withdrawals for life contracts.....		16,275				16,275
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		18,104	0	0	0	18,104

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....	1	5,000							1	5,000
<b>Settled during current year:</b>										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	5,000	0	0	0	0	0	0	1	5,000
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	214	9,527,937	(a)				2	2,000	216	9,529,937
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(5)	(56,643)	0	0	0	0	1	1,500	(4)	(55,143)
23. In force December 31 of current year.....	209	9,471,294	0	0	0	0	3	3,500	212	9,474,794

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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



DIRECT BUSINESS IN THE STATE OF NEW HAMPSHIRE DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		228				228
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		228	0	0	0	228
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
<i>Life insurance:</i>						
6.1 Paid in cash or left on deposit.....		.61				.61
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		125				125
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		186	0	0	0	186
<i>Annuities:</i>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		186	0	0	0	186
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		0	0	0	0	0

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
<i>Settled during current year:</i>										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	.11	317,678	(a)						.11	317,678
21. Issued during year.....									0	0
22. Other changes to in force (Net).....		165							0	165
23. In force December 31 of current year.....	.11	317,843	0	(a)	0	0	0	0	.11	317,843

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		6,057				6,057
2. Annuity considerations.....		1,483				1,483
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		7,540	0	0	0	7,540
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		445				445
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		80				80
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		525	0	0	0	525
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		525	0	0	0	525
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		16,900				16,900
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		14,363				14,363
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		31,263	0	0	0	31,263

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....		16,900							0	16,900
<b>Settled during current year:</b>										
18.1 By payment in full.....		16,900							0	16,900
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	16,900	0	0	0	0	0	0	0	16,900
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	16,900	0	0	0	0	0	0	0	16,900
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	95	1,123,871	(a)						95	1,123,871
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(5)	(59,413)					8	6,500	3	(52,913)
23. In force December 31 of current year.....	90	1,064,458	0	(a)	0	0	8	6,500	98	1,070,958

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		25,073				25,073
2. Annuity considerations.....		1,497				1,497
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		26,570	0	0	0	26,570
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		242				242
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		56				56
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		298	0	0	0	298
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		298	0	0	0	298
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		11,768				11,768
10. Matured endowments.....		1,000				1,000
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		9,796				9,796
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		22,564	0	0	0	22,564

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....		1							0	1
17. Incurred during current year.....	2	22,768							2	22,768
<b>Settled during current year:</b>										
18.1 By payment in full.....	1	12,768							1	12,768
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	1	12,768	0	0	0	0	0	0	1	12,768
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	1	12,768	0	0	0	0	0	0	1	12,768
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	10,001	0	0	0	0	0	0	1	10,001
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	148	2,344,631	(a)				1	500	149	2,345,131
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(8)	(62,994)					1	1,000	(7)	(61,994)
23. In force December 31 of current year.....	140	2,281,637	0	(a)	0	0	2	1,500	142	2,283,137

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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



DIRECT BUSINESS IN THE STATE OF NEVADA DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		12,599			.45	12,644
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		12,599	0	.0	.45	12,644
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit.....		406				406
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		36				36
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		442	0	.0	.0	442
Annuites:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		442	0	0	0	442
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		4,581				4,581
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		13,101			938	14,039
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		17,682	0	0	938	18,620

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	1	2,501						1	2,501	
17. Incurred during current year.....	(1)	2,081						(1)	2,081	
Settled during current year:										
18.1 By payment in full.....		4,581						0	4,581	
18.2 By payment on compromised claims.....								0	0	
18.3 Totals paid.....	0	4,581	0	0	0	0	0	0	4,581	
18.4 Reduction by compromise.....								0	0	
18.5 Amount rejected.....								0	0	
18.6 Total settlements.....	0	4,581	0	0	0	0	0	0	4,581	
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	1	0	0	0	0	0	0	1	
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	.64	1,548,889	(a)					.64	1,548,889	
21. Issued during year.....								0	0	
22. Other changes to in force (Net).....		(17,042)					9	10,500	9	(6,542)
23. In force December 31 of current year.....	64	1,531,847	0	(a)	0	0	9	10,500	.73	1,542,347

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

**NONE**

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		9,520			.33	9,553
2. Annuity considerations.....		186				186
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		9,706	0	.0	.33	9,739
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		468				468
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		31				31
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		499	0	0	0	499
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		499	0	0	0	499
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		1,003				1,003
10. Matured endowments.....		318				318
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		22,042				22,042
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		23,363	0	0	0	23,363

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....	1	1,321							1	1,321
<b>Settled during current year:</b>										
18.1 By payment in full.....	1	1,321							1	1,321
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	1	1,321	0	0	0	0	0	0	1	1,321
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	1	1,321	0	0	0	0	0	0	1	1,321
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	150	1,593,124	(a)				1	500	151	1,593,624
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(7)	(112,514)					18	19,500	11	(93,014)
23. In force December 31 of current year.....	143	1,480,610	0	(a)	0	0	19	20,000	162	1,500,610

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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



DIRECT BUSINESS IN THE STATE OF OHIO DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		2,153,416		11,201	.72	2,164,689
2. Annuity considerations.....		22,078				22,078
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		2,175,494	0	11,201	.72	2,186,767
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		99,800				99,800
6.2 Applied to pay renewal premiums.....		13,110				13,110
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		19,719				19,719
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		132,629	0	0	0	132,629
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		132,629	0	0	0	132,629
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		4,133,010		35,086	2,056	4,170,152
10. Matured endowments.....		5,344			1,786	7,130
11. Annuity benefits.....		15,517				15,517
12. Surrender values and withdrawals for life contracts.....		1,194,105				1,194,105
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		5,347,976	0	35,086	3,842	5,386,904

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	2	511,366					.19	121,862	.21	633,228
17. Incurred during current year.....	(1)	4,049,282					35,086	1	3,842	4,088,210
<b>Settled during current year:</b>										
18.1 By payment in full.....	3	4,138,354		.8	35,086	1	3,842	.12	4,177,282	
18.2 By payment on compromised claims.....								0	0	0
18.3 Totals paid.....	3	4,138,354	0	0	.8	35,086	1	3,842	.12	4,177,282
18.4 Reduction by compromise.....								0	0	0
18.5 Amount rejected.....								0	0	0
18.6 Total settlements.....	3	4,138,354	0	0	.8	35,086	1	3,842	.12	4,177,282
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	(2)	422,294	0	0	(8)	0	.19	121,862	9	544,156
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	11,918	406,733,476	(a)	74	582,800	.37	22,829	.12,029	407,339,105	
21. Issued during year.....								0	0	0
22. Other changes to in force (Net).....	(1,789)	(20,151,022)		(12)	(131,500)	.24	18,187	(1,777)	(20,264,335)	
23. In force December 31 of current year.....	10,129	386,582,454	0 (a)	62	451,300	.61	41,016	10,252	387,074,770	

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....						
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
<b>Other Individual Policies:</b>						
25.1 Non-cancelable (b).....						
25.2 Guaranteed renewable (b).....		270	270			
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		270	270	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		270	270	0	0	0

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		208,710			1,923	210,633
2. Annuity considerations.....		4,012				4,012
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		212,722	0	0	1,923	214,645
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		3,118				3,118
6.2 Applied to pay renewal premiums.....		5,337				5,337
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		8,455	0	0	0	8,455
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		8,455	0	0	0	8,455
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		331,735			4,507	336,242
10. Matured endowments.....		19,240			521	19,761
11. Annuity benefits.....		187				187
12. Surrender values and withdrawals for life contracts.....		112,444			2,862	115,306
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		463,606	0	0	7,890	471,496

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	(5)	55,500					.14	45,451	9	100,951
17. Incurred during current year.....	12	277,302					3	6,028	15	283,330
<b>Settled during current year:</b>										
18.1 By payment in full.....	17	350,974					2	5,028	19	356,002
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	17	350,974	0	0	0	0	2	5,028	19	356,002
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	17	350,974	0	0	0	0	2	5,028	19	356,002
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	(10)	(18,172)	0	0	0	0	.15	46,451	5	28,279
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	2,063	16,443,231	(a)				.923	753,418	2,986	17,196,649
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(111)	(1,477,972)					(36)	(33,966)	(147)	(1,511,938)
23. In force December 31 of current year.....	1,952	14,965,259	0	(a)	0	0	.887	719,452	2,839	15,684,711

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....						
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
<b>Other Individual Policies:</b>						
25.1 Non-cancelable (b).....						
25.2 Guaranteed renewable (b).....		57	57			
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		57	57	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		57	57	0	0	0

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



DIRECT BUSINESS IN THE STATE OF OREGON DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		6,667				6,667
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		6,667	0	0	0	6,667
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit.....		302				302
6.2 Applied to pay renewal premiums.....		100				100
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		74				74
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		476	0	0	0	476
Annuites:						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		476	0	0	0	476
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		2,000				2,000
10. Matured endowments.....		1,000				1,000
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		3,000	0	0	0	3,000

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....	2	4,000							2	4,000
Settled during current year:										
18.1 By payment in full.....	1	3,000							1	3,000
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	1	3,000	0	0	0	0	0	0	1	3,000
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	1	3,000	0	0	0	0	0	0	1	3,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	1,000	0	0	0	0	0	0	1	1,000
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	.80	779,358	(a)						.80	779,358
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(5)	(8,152)							1	(7,152)
23. In force December 31 of current year.....	.75	771,206	0	(a)	0	0	0	1	1,000	.76

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

**NONE**



DIRECT BUSINESS IN OTHER ALIEN GRAND TOTAL DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

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

**DETAILS OF WRITE-INS**

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

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

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		197,165			133	197,298
2. Annuity considerations.....		20,103				20,103
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		217,268	0	0	133	217,401
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		1,830				1,830
6.2 Applied to pay renewal premiums.....		1,229				1,229
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		540				540
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		3,599	0	0	0	3,599
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		3,599	0	0	0	3,599
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		150,619				150,619
10. Matured endowments.....		3,000				3,000
11. Annuity benefits.....		36,474				36,474
12. Surrender values and withdrawals for life contracts.....		255,507			172	255,679
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		445,600	0	0	172	445,772

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	3	77,306							3	77,306
17. Incurred during current year.....	(1)	76,313							(1)	76,313
<b>Settled during current year:</b>										
18.1 By payment in full.....	2	153,619							2	153,619
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	2	153,619	0	0	0	0	0	0	2	153,619
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	2	153,619	0	0	0	0	0	0	2	153,619
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	1,020	23,172,278	(a)				5	4,000	1,025	23,176,278
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(44)	(1,259,369)					15	16,600	(29)	(1,242,769)
23. In force December 31 of current year.....	.976	21,912,909	0	(a)	0	0	20	20,600	.996	21,933,509

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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



\* 7 0 1 3 0 2 0 1 7 4 3 0 5 4 1 0 0 \*

DIRECT BUSINESS IN PUERTO RICO DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

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

**DETAILS OF WRITE-INS**

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

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

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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



DIRECT BUSINESS IN THE STATE OF RHODE ISLAND DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		488			.28	516
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		488	0	.0	.28	516
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		.46				.46
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		.46	0	.0	.0	.46
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		.0	0	.0	.0	0
8. Grand Totals (Lines 6.5 + 7.4).....		.46	0	.0	.0	.46
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		.0	0	.0	.0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		.0	0	.0	.0	0

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	(1)	(5,000)					1	5,000	0	0
17. Incurred during current year.....									0	0
<b>Settled during current year:</b>										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	(1)	(5,000)	0	0	0	0	1	5,000	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	9	72,974	(a)						9	72,974
21. Issued during year.....									0	0
22. Other changes to in force (Net).....							3	3,420	3	3,420
23. In force December 31 of current year.....	9	72,974	0	(a)	0	0	3	3,420	12	76,394

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		162,973		478	108	163,559
2. Annuity considerations.....		640				640
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		163,613	0	478	108	164,199
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		643				643
6.2 Applied to pay renewal premiums.....		466				466
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		204				204
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		1,313	0	0	0	1,313
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		1,313	0	0	0	1,313
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		169,266		5,000		174,266
10. Matured endowments.....						0
11. Annuity benefits.....		809				809
12. Surrender values and withdrawals for life contracts.....		118,386				118,386
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		288,461	0	5,000	0	293,461

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....		117,026					1	2,449	1	119,475
17. Incurred during current year.....		74,791				5,000			0	79,791
<b>Settled during current year:</b>										
18.1 By payment in full.....		169,266		1	5,000				1	174,266
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	169,266	0	0	1	5,000	0	0	1	174,266
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	169,266	0	0	1	5,000	0	0	1	174,266
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	22,551	0	0	(1)	0	1	2,449	0	25,000
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	.594	19,423,072	(a)	.3	22,500	7	3,250	.604		19,448,822
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(42)	(1,629,606)		(1)	(7,500)	11	5,732	(32)		(1,631,374)
23. In force December 31 of current year.....	.552	17,793,466	0	(a)	15,000	18	8,982	.572		17,817,448

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		1,521				1,521
2. Annuity considerations.....		107				107
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		1,628	0	0	0	1,628
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....						0
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		0	0	0	0	0
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		320				320
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		320	0	0	0	320

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
<b>Settled during current year:</b>										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	.17	142,155	(a)						.17	142,155
21. Issued during year.....									0	0
22. Other changes to in force (Net).....		(50,088)							1	1,000
23. In force December 31 of current year.....	.17	.92,067	0	(a)	0	0	1	1,000	1	(49,088)

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		129,243		1,732	31,773	162,748
2. Annuity considerations.....		941				941
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		130,184	0	1,732	31,773	163,689
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		1,293				1,293
6.2 Applied to pay renewal premiums.....		111				111
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		3,681				3,681
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		5,085	0	0	0	5,085
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		5,085	0	0	0	5,085
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		263,654		11,000	46,863	321,517
10. Matured endowments.....		4,390			7,064	11,454
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		46,171			19,526	65,697
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		314,215	0	11,000	73,453	398,668

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	6	6,450				(0)	17	18,800	23	25,250
17. Incurred during current year.....	11	281,093				11,000	22	42,717	33	334,810
<b>Settled during current year:</b>										
18.1 By payment in full.....	9	268,044		2	11,000	28	53,927	39	332,971	
18.2 By payment on compromised claims.....								0	0	0
18.3 Totals paid.....	9	268,044	0	0	2	11,000	28	53,927	39	332,971
18.4 Reduction by compromise.....								0	0	0
18.5 Amount rejected.....								0	0	0
18.6 Total settlements.....	9	268,044	0	0	2	11,000	28	53,927	39	332,971
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	8	19,499	0	0	(2)	(0)	11	7,590	17	27,089
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	3,123	14,921,804	(a)	10	139,700	7,859	7,198,493	10,992	22,259,997	
21. Issued during year.....								0	0	0
22. Other changes to in force (Net).....	(190)	(1,746,035)			(20,300)	(734)	(680,624)	(924)	(2,446,959)	
23. In force December 31 of current year.....	2,933	13,175,769	0	10	119,400	7,125	6,517,869	10,068	19,813,038	

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....						
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
<b>Other Individual Policies:</b>						
25.1 Non-cancelable (b).....						
25.2 Guaranteed renewable (b).....		238	238			
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		238	238	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		238	238	0	0	0

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		628,646			53,700	682,346
2. Annuity considerations.....		15,069				15,069
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		643,715	0	0	53,700	697,415
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		7,219				7,219
6.2 Applied to pay renewal premiums.....		1,846				1,846
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		1,587				1,587
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		10,652	0	0	0	10,652
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		10,652	0	0	0	10,652
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		1,442,163			98,766	1,540,929
10. Matured endowments.....		64,583			13,294	77,877
11. Annuity benefits.....		83,317				83,317
12. Surrender values and withdrawals for life contracts.....		324,137			33,986	358,123
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		1,914,200	0	0	146,046	2,060,246

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	40	45,177					.19	143,191	.59	188,368
17. Incurred during current year.....	39	1,535,211					.70	119,115	.109	1,654,326
<b>Settled during current year:</b>										
18.1 By payment in full.....	52	1,506,746					.63	112,062	.115	1,618,808
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	52	1,506,746	0	0	0	0	.63	112,062	.115	1,618,808
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	52	1,506,746	0	0	0	0	.63	112,062	.115	1,618,808
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	27	73,642	0	0	0	0	.26	150,244	.53	223,886
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	11,320	62,701,938	(a)				12,274	11,463,971	23,594	74,165,909
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(447)	(3,239,239)					(606)	(604,152)	(1,053)	(3,843,391)
23. In force December 31 of current year.....	10,873	59,462,699	0	(a)	0	0	11,668	10,859,819	22,541	70,322,518

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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



DIRECT BUSINESS IN THE STATE OF UTAH DURING THE YEAR

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		3,918		1,440		5,358
2. Annuity considerations.....		320				320
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		4,238	0	1,440	0	5,678
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		100				100
6.2 Applied to pay renewal premiums.....		59				.59
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		15				15
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		174	0	0	0	174
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		174	0	0	0	174
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		0	0	0	0	0

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	.39	543,589	(a)	.4	35,100			.43	578,689	
21. Issued during year.....								0	0	0
22. Other changes to in force (Net).....	(1)	(25,094)		.4	45,200			3	20,106	
23. In force December 31 of current year.....	.38	518,495	0 (a)	.8	.80,300	0	0	.46	598,795	

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

**NONE**

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		104,130		11,898	9,925	125,953
2. Annuity considerations.....		2,608				2,608
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		106,738	0	11,898	9,925	128,561
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		2,324				2,324
6.2 Applied to pay renewal premiums.....		247				247
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		94				94
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		2,665	0	0	0	2,665
<b>Annuites:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		2,665	0	0	0	2,665
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		193,779		40,669	41,349	275,797
10. Matured endowments.....		6,971			10,582	17,553
11. Annuity benefits.....		13,557				13,557
12. Surrender values and withdrawals for life contracts.....		166,459			6,599	173,058
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		380,766	0	40,669	58,530	479,965

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	5	6,172				(1)	14	41,311	19	47,482
17. Incurred during current year.....	10	240,516				40,669	24	48,098	34	329,283
<b>Settled during current year:</b>										
18.1 By payment in full.....	8	200,750		.8	40,669	25	51,930	41	293,349	
18.2 By payment on compromised claims.....								0	0	0
18.3 Totals paid.....	8	200,750	0	0	40,669	25	51,930	41	293,349	
18.4 Reduction by compromise.....								0	0	0
18.5 Amount rejected.....								0	0	0
18.6 Total settlements.....	8	200,750	0	0	40,669	25	51,930	41	293,349	
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	7	45,938	0	0	(8)	(1)	13	37,479	12	83,416
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	2,274	16,077,857	(a)	70	570,500	5,071	4,516,247	7,415	21,164,604	
21. Issued during year.....								0	0	0
22. Other changes to in force (Net).....	(125)	(1,236,141)	0	(a)	(3,000)	(275)	(301,405)	(401)	(1,540,546)	
23. In force December 31 of current year.....	2,149	14,841,716	0	69	567,500	4,796	4,214,842	7,014	19,624,058	

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

**NONE**



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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

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

**DETAILS OF WRITE-INS**

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

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

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		400				400
2. Annuity considerations.....						0
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		400	0	0	0	400
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		46				46
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		46	0	0	0	46
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		46	0	0	0	46
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		10,027				10,027
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		10,027	0	0	0	10,027

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....		(1)							0	(1)
17. Incurred during current year.....		10,027							0	10,027
<b>Settled during current year:</b>										
18.1 By payment in full.....		10,027							0	10,027
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....		0	10,027	0	0	0	0	0	0	10,027
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....		0	10,027	0	0	0	0	0	0	10,027
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....		0	(1)	0	0	0	0	0	0	(1)
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	7	81,000	(a)						7	81,000
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(2)	(20,000)						1	300	(19,700)
23. In force December 31 of current year.....	5	61,000	(a)	0	0	0	1	300	6	61,300

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		12,449			188	12,637
2. Annuity considerations.....		141				141
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		12,590	0	0	188	12,778
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		945				945
6.2 Applied to pay renewal premiums.....		192				192
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		35				35
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		1,172	0	0	0	1,172
<b>Annuites:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		1,172	0	0	0	1,172
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		9,324				9,324
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		58,868				58,868
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		68,192	0	0	0	68,192

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....								(1)	0	(1)
17. Incurred during current year.....		9,324						0	0	9,324
<b>Settled during current year:</b>										
18.1 By payment in full.....		9,324						0	0	9,324
18.2 By payment on compromised claims.....								0	0	0
18.3 Totals paid.....	0	9,324	0	0	0	0	0	0	0	9,324
18.4 Reduction by compromise.....								0	0	0
18.5 Amount rejected.....								0	0	0
18.6 Total settlements.....	0	9,324	0	0	0	0	0	0	0	9,324
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	(1)	0	0	(1)
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	133	1,581,836	(a)					133	1,581,836	
21. Issued during year.....								0	0	0
22. Other changes to in force (Net).....	(5)	(61,038)		1	5,000	15	11,532	11	(44,506)	
23. In force December 31 of current year.....	128	1,520,798	0	(a)	5,000	15	11,532	144	1,537,330	

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		25,324			250	25,574
2. Annuity considerations.....		1,283				1,283
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		26,607	0	0	250	26,857
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		1,896				1,896
6.2 Applied to pay renewal premiums.....		871				871
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		307				307
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		3,074	0	0	0	3,074
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		3,074	0	0	0	3,074
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		15,026				15,026
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		33,813				33,813
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		48,839	0	0	0	48,839

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....		(3)							0	(3)
17. Incurred during current year.....	1	27,226							1	27,226
<b>Settled during current year:</b>										
18.1 By payment in full.....		15,026							0	15,026
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	15,026	0	0	0	0	0	0	0	15,026
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	15,026	0	0	0	0	0	0	0	15,026
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	12,197	0	0	0	0	0	0	1	12,197
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	228	5,545,085	(a)	1	5,000	7	4,500	236	5,554,585	
21. Issued during year.....								0	0	
22. Other changes to in force (Net).....	(11)	(237,454)		(1)	(5,000)	15	20,800	3	(221,654)	
23. In force December 31 of current year.....	217	5,307,631	0	0	0	22	25,300	239	5,332,931	

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		432,931		72,304	371	505,606
2. Annuity considerations.....		1,858				1,858
3. Deposit-type contract funds.....			XXX		XXX	0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		434,789	0	72,304	371	507,464
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		948				948
6.2 Applied to pay renewal premiums.....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....		190				190
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		1,138	0	0	0	1,138
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		1,138	0	0	0	1,138
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....		971,288		138,337	17,785	1,127,410
10. Matured endowments.....		14,148			3,100	17,248
11. Annuity benefits.....		32,608				32,608
12. Surrender values and withdrawals for life contracts.....		126,003			1,449	127,452
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		1,144,047	0	138,337	22,334	1,304,718

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....	20	11,086			.6	48,300	.50	152,597	.76	211,983
17. Incurred during current year.....	(31)	942,811			(2)	107,537	4	18,212	(29)	1,068,560
<b>Settled during current year:</b>										
18.1 By payment in full.....	5	985,436			31	138,337	5	20,884	.41	1,144,657
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	5	985,436	0	0	31	138,337	5	20,884	.41	1,144,657
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	5	985,436	0	0	31	138,337	5	20,884	.41	1,144,657
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	(16)	(31,539)	0	0	(27)	17,500	.49	149,925	6	135,886
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	9,546	51,910,510	(a)		.470	4,897,600	1,363	910,225	.11,379	57,718,335
21. Issued during year.....	1	100,000							1	100,000
22. Other changes to in force (Net).....	(449)	(2,182,429)			(65)	(814,000)	(91)	(60,930)	(605)	(3,057,359)
23. In force December 31 of current year.....	9,098	49,828,081	0	(a)	405	4,083,600	1,272	849,295	10,775	54,760,976

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

		1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....						
24.1 Federal Employee Health Benefits Plan premium (b).....						
24.2 Credit (group and individual).....						
24.3 Collectively renewable policies (b).....						
24.4 Medicare Title XVIII exempt from state taxes or fees.....						
<b>Other Individual Policies:</b>						
25.1 Non-cancelable (b).....						
25.2 Guaranteed renewable (b).....		8,712	8,712			5,620
25.3 Non-renewable for stated reasons only (b).....						
25.4 Other accident only.....						
25.5 All other (b).....						
25.6 Totals (Sum of Lines 25.1 to 25.5).....		8,712	8,712	0	5,620	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....		8,712	8,712	0	5,620	0

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

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

NAIC Group Code.....0

NAIC Company Code.....70130

**LIFE INSURANCE**

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>						
1. Life insurance.....		3,446				3,446
2. Annuity considerations.....		180				180
3. Deposit-type contract funds.....			XXX			0
4. Other considerations.....						0
5. Totals (Sum of Lines 1 to 4).....		3,626	0	0	0	3,626
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
6.1 Paid in cash or left on deposit.....		214				214
6.2 Applied to pay renewal premiums.....		81				81
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....						0
6.4 Other.....						0
6.5 Totals (Sum of Lines 6.1 to 6.4).....		295	0	0	0	295
<b>ANNUITIES:</b>						
7.1 Paid in cash or left on deposit.....						0
7.2 Applied to provide paid-up annuities.....						0
7.3 Other.....						0
7.4 Totals (Sum of Lines 7.1 to 7.3).....		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....		295	0	0	0	295
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits.....						0
10. Matured endowments.....						0
11. Annuity benefits.....						0
12. Surrender values and withdrawals for life contracts.....		5,919				5,919
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....		0	0	0	0	0
14. All other benefits, except accident and health.....						0
15. Totals.....		5,919	0	0	0	5,919

**DETAILS OF WRITE-INS**

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
<b>Settled during current year:</b>										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....	.32	448,055	(a)						.32	448,055
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(2)	(124,869)		0	0				(2)	(124,869)
23. In force December 31 of current year.....	30	323,186	0	(a)	0	0	0	0	.30	323,186

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

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

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

# Universal Guaranty Life Insurance Company

## FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

### Interest Maintenance Reserve

	1 Amount
1. Reserve as of December 31, prior year.....	12,239,589
2. Current year's realized pre-tax capital gains/(losses) of \$....695,467 transferred into the reserve net of taxes of \$....114,935.....	580,535
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).....	12,820,124
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4).....	1,044,611
6. Reserve as of December 31, current year (Line 4 minus Line 5).....	11,775,513

### 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. 2017.....	981,888	62,723		1,044,611
2. 2018.....	880,552	127,435		1,007,987
3. 2019.....	757,985	113,473		871,458
4. 2020.....	612,811	85,158		697,969
5. 2021.....	511,405	56,039		567,445
6. 2022.....	448,159	25,702		473,861
7. 2023.....	405,055	9,717		414,772
8. 2024.....	374,954	9,424		384,379
9. 2025.....	369,017	8,812		377,829
10. 2026.....	385,336	8,433		393,770
11. 2027.....	398,082	7,735		405,817
12. 2028.....	427,089	7,859		434,948
13. 2029.....	454,357	7,990		462,347
14. 2030.....	477,535	8,383		485,918
15. 2031.....	487,081	8,645		495,726
16. 2032.....	499,073	9,169		508,242
17. 2033.....	500,834	8,383		509,216
18. 2034.....	495,666	6,680		502,346
19. 2035.....	504,994	4,846		509,840
20. 2036.....	527,635	2,882		530,516
21. 2037.....	517,526	1,048		518,574
22. 2038.....	454,246			454,246
23. 2039.....	353,629			353,629
24. 2040.....	248,440			248,440
25. 2041.....	133,628			133,628
26. 2042.....	32,619			32,619
27. 2043.....	(8)			(8)
28. 2044.....				0
29. 2045.....				0
30. 2046.....				0
31. 2047 and Later.....				0
32. Total (Lines 1 to 31).....	12,239,589	580,535	0	12,820,124

**ASSET VALUATION RESERVE**

	Default Component			Equity Component			7 Total Amount (Cols. 3 + 6)
	1 Other Than Mortgage Loans	2 Mortgage Loans	3 Total (Cols. 1 + 2)	4 Common Stock	5 Real Estate and Other Invested Assets	6 Total (Cols. 4 + 5)	
1. Reserve as of December 31, prior year.....	2,546,100	555,380	3,101,480	4,666,959	6,774,931	11,441,890	14,543,370
2. Realized capital gains/(losses) net of taxes - General Account.....	2,758,089	(99,021)	2,659,068	1,287,411	1,671,052	2,958,463	5,617,531
3. Realized capital gains/(losses) net of taxes - Separate Accounts.....			0			0	0
4. Unrealized capital gains/(losses) - net of deferred taxes - General Account.....	(97,351)		(97,351)	3,743,563	358,291	4,101,854	4,004,503
5. Unrealized capital gains/(losses) - net of deferred taxes - Separate Accounts.....			0			0	0
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves.....			0			0	0
7. Basic contribution.....	270,233	44,256	314,489			0	314,489
8. Accumulated balances (Lines 1 through 5, minus 6 plus 7).....	5,477,071	500,614	5,977,685	9,697,933	8,804,274	18,502,207	24,479,892
9. Maximum reserve.....	2,326,660	517,036	2,843,696	5,999,384	6,873,446	12,872,831	15,716,527
10. Reserve objective.....	1,916,417	476,649	2,393,065	5,997,762	6,873,446	12,871,208	15,264,273
11. 20% of (Line 10 minus Line 8).....	(712,131)	(4,793)	(716,924)	(740,034)	(386,166)	(1,126,200)	(1,843,124)
12. Balance before transfers (Lines 8 + 11).....	4,764,940	495,821	5,260,761	8,957,899	8,418,109	17,376,007	22,636,769
13. Transfers.....	(21,215)	21,215	0			0	0
14. Voluntary contribution.....			0			0	0
15. Adjustment down to maximum/up to zero.....	(2,417,065)		(2,417,065)	(2,958,515)	(1,544,663)	(4,503,178)	(6,920,243)
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15).....	2,326,660	517,036	2,843,696	5,999,384	6,873,446	12,872,829	15,716,526

**ASSET VALUATION RESERVE**

## Basic Contribution, Reserve Objective and Maximum Reserve Calculations

## Default Component

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
<b>LONG-TERM BONDS</b>												
1		Exempt obligations.....	2,679,325	XXX.....	XXX.....	2,679,325	0.0000	0	0.0000	0	0.0000	
2	1	Highest quality.....	67,687,249	XXX.....	XXX.....	67,687,249	0.0004	27,075	0.0023	155,681	0.0030	
3	2	High quality.....	78,642,204	XXX.....	XXX.....	78,642,204	0.0019	149,420	0.0058	456,125	0.0090	
4	3	Medium quality.....	5,549,472	XXX.....	XXX.....	5,549,472	0.0093	51,610	0.0230	127,638	0.0340	
5	4	Low quality.....		XXX.....	XXX.....	0	0.0213	0	0.0530	0	0.0750	
6	5	Lower quality.....		XXX.....	XXX.....	0	0.0432	0	0.1100	0	0.1700	
7	6	In or near default.....	5,354,261	XXX.....	XXX.....	5,354,261	0.0000	0	0.2000	1,070,852	0.2000	
8		Total unrated multi-class securities acquired by conversion.....		XXX.....	XXX.....	0	XXX.....	0	XXX.....	0	XXX.....	
9		Total long-term bonds (sum of Lines 1 through 8).....	159,912,511	XXX.....	XXX.....	159,912,511	XXX.....	228,105	XXX.....	1,810,296	XXX.....	
<b>PREFERRED STOCKS</b>												
10	1	Highest quality.....	1,476,000	XXX.....	XXX.....	1,476,000	0.0004	590	0.0023	3,395	0.0030	
11	2	High quality.....		XXX.....	XXX.....	0	0.0019	0	0.0058	0	0.0090	
12	3	Medium quality.....	4,466,358	XXX.....	XXX.....	4,466,358	0.0093	41,537	0.0230	102,726	0.0340	
13	4	Low quality.....		XXX.....	XXX.....	0	0.0213	0	0.0530	0	0.0750	
14	5	Lower quality.....		XXX.....	XXX.....	0	0.0432	0	0.1100	0	0.1700	
15	6	In or near default.....		XXX.....	XXX.....	0	0.0000	0	0.2000	0	0.2000	
16		Affiliated life with AVR.....		XXX.....	XXX.....	0	0.0000	0	0.0000	0	0.0000	
17		Total preferred stocks (sum of Lines 10 through 16).....	5,942,358	XXX.....	XXX.....	5,942,358	XXX.....	42,128	XXX.....	106,121	XXX.....	
<b>SHORT-TERM BONDS</b>												
18		Exempt obligations.....		XXX.....	XXX.....	0	0.0000	0	0.0000	0	0.0000	
19	1	Highest quality.....		XXX.....	XXX.....	0	0.0004	0	0.0023	0	0.0030	
20	2	High quality.....		XXX.....	XXX.....	0	0.0019	0	0.0058	0	0.0090	
21	3	Medium quality.....		XXX.....	XXX.....	0	0.0093	0	0.0230	0	0.0340	
22	4	Low quality.....		XXX.....	XXX.....	0	0.0213	0	0.0530	0	0.0750	
23	5	Lower quality.....		XXX.....	XXX.....	0	0.0432	0	0.1100	0	0.1700	
24	6	In or near default.....		XXX.....	XXX.....	0	0.0000	0	0.2000	0	0.2000	
25		Total short-term bonds (sum of Lines 18 through 24).....	0	XXX.....	XXX.....	0	XXX.....	0	XXX.....	0	XXX.....	
<b>DERIVATIVE INSTRUMENTS</b>												
26		Exchange traded.....		XXX.....	XXX.....	0	0.0004	0	0.0023	0	0.0030	
27	1	Highest quality.....		XXX.....	XXX.....	0	0.0004	0	0.0023	0	0.0030	
28	2	High quality.....		XXX.....	XXX.....	0	0.0019	0	0.0058	0	0.0090	
29	3	Medium quality.....		XXX.....	XXX.....	0	0.0093	0	0.0230	0	0.0340	
30	4	Low quality.....		XXX.....	XXX.....	0	0.0213	0	0.0530	0	0.0750	
31	5	Lower quality.....		XXX.....	XXX.....	0	0.0432	0	0.1100	0	0.1700	
32	6	In or near default.....		XXX.....	XXX.....	0	0.0000	0	0.2000	0	0.2000	
33		Total derivative instruments.....	0	XXX.....	XXX.....	0	XXX.....	0	XXX.....	0	XXX.....	
34		Total (Lines 9 + 17 + 25 + 33).....	165,854,869	XXX.....	XXX.....	165,854,869	XXX.....	270,233	XXX.....	1,916,417	XXX.....	

**ASSET VALUATION RESERVE (continued)**

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

## Default Component

Line Number	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
		<b>MORTGAGE LOANS</b>										
		In good standing:										
35		Farm mortgages - CM1 - highest quality.....	441,969	XXX.....		441,969	0.0010	442	0.0050	2,210	0.0065	2,873
36		Farm mortgages - CM2 - high quality.....		XXX.....	0	0	0.0035	0	0.0100	0	0.0130	0
37		Farm mortgages - CM3 - medium quality.....		XXX.....	0	0	0.0060	0	0.0175	0	0.0225	0
38		Farm mortgages - CM4 - low medium quality.....		XXX.....	0	0	0.0105	0	0.0300	0	0.0375	0
39		Farm mortgages - CM5 - low quality.....		XXX.....	0	0	0.0160	0	0.0425	0	0.0550	0
40		Residential mortgages-insured or guaranteed.....		XXX.....	0	0	0.0003	0	0.0006	0	0.0010	0
41		Residential mortgages-all other.....	1,666,879	XXX.....	1,666,879	0	0.0013	2,167	0.0030	5,001	0.0040	6,668
42		Commercial mortgages-insured or guaranteed.....		XXX.....	0	0	0.0003	0	0.0006	0	0.0010	0
43		Commercial mortgages-all other - CM1 - highest quality.....	4,198,930	XXX.....	4,198,930	0	0.0010	4,199	0.0050	20,995	0.0065	27,293
44		Commercial mortgages-all other - CM2 - high quality.....	6,628,379	XXX.....	6,628,379	0	0.0035	23,199	0.0100	66,284	0.0130	86,169
45		Commercial mortgages-all other - CM3 - medium quality.....	2,374,784	XXX.....	2,374,784	0	0.0060	14,249	0.0175	41,559	0.0225	53,433
46		Commercial mortgages-all other - CM4 - low medium quality.....		XXX.....	0	0	0.0105	0	0.0300	0	0.0375	0
47		Commercial mortgages-all other - CM5 - low quality.....		XXX.....	0	0	0.0160	0	0.0425	0	0.0550	0
		Overdue, not in process:										
48		Farm mortgages.....		XXX.....	0	0	0.0420	0	0.0760	0	0.1200	0
49		Residential mortgages-insured or guaranteed.....		XXX.....	0	0	0.0005	0	0.0012	0	0.0020	0
50		Residential mortgages-all other.....		XXX.....	0	0	0.0025	0	0.0058	0	0.0090	0
51		Commercial mortgages-insured or guaranteed.....		XXX.....	0	0	0.0005	0	0.0012	0	0.0020	0
52		Commercial mortgages-all other.....		XXX.....	0	0	0.0420	0	0.0760	0	0.1200	0
		In process of foreclosure:										
53		Farm mortgages.....		XXX.....	0	0	0.0000	0	0.1700	0	0.1700	0
54		Residential mortgages-insured or guaranteed.....		XXX.....	0	0	0.0000	0	0.0040	0	0.0040	0
55		Residential mortgages-all other.....		XXX.....	0	0	0.0000	0	0.0130	0	0.0130	0
56		Commercial mortgages-insured or guaranteed.....		XXX.....	0	0	0.0000	0	0.0040	0	0.0040	0
57		Commercial mortgages-all other.....	2,003,536	XXX.....	2,003,536	0	0.0000	0	0.1700	340,601	0.1700	340,601
58		Total Schedule B mortgages (sum of Lines 35 through 57).....	17,314,477	0	XXX.....	17,314,477	XXX.....	44,256	XXX.....	476,649	XXX.....	517,036
59		Schedule DA mortgages.....		XXX.....	0	0	0.0030	0	0.0100	0	0.0130	0
60		Total mortgage loans on real estate (Lines 58 + 59).....	17,314,477	0	XXX.....	17,314,477	XXX.....	44,256	XXX.....	476,649	XXX.....	517,036

**ASSET VALUATION RESERVE**

## Basic Contribution, Reserve Objective and Maximum Reserve Calculations

## Equity and Other Invested Asset Component

Line Number	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
<b>COMMON STOCK</b>												
1		Unaffiliated public.....	26,214,660	XXX.....	XXX.....	26,214,660	0.0000	0	(a).....0.1000	.....2,621,466	(a).....0.1000	.....2,621,466
2		Unaffiliated private.....	16,177,559	XXX.....	XXX.....	16,177,559	0.0000	0	.....0.1600	.....2,588,409	.....0.1600	.....2,588,409
3		Federal Home Loan Bank.....	540,900	XXX.....	XXX.....	540,900	0.0000	0	.....0.0050	.....2,705	.....0.0080	.....4,327
4		Affiliated life with AVR.....		XXX.....	XXX.....	0	0.0000	0	.....0.0000	.....0	.....0.0000	.....0
32		Affiliated Investment Subsidiary:										
5		Fixed income exempt obligations.....				0	XXX.....		.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....
6		Fixed income highest quality.....				0	XXX.....		.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....
7		Fixed income high quality.....				0	XXX.....		.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....
8		Fixed income medium quality.....				0	XXX.....		.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....
9		Fixed income low quality.....				0	XXX.....		.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....
10		Fixed income lower quality.....				0	XXX.....		.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....
11		Fixed income in or near default.....				0	XXX.....		.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....
12		Unaffiliated common stock public.....				0	0.0000	0	(a).....0.1300	.....0	(a).....0.1300	.....0
13		Unaffiliated common stock private.....				0	0.0000	0	.....0.1600	.....0	.....0.1600	.....0
14		Real estate.....				0	(b).....	0	(b).....	0	(b).....	0
15		Affiliated - certain other (see SVO Purposes and Procedures Manual).....	4,907,386	XXX.....	XXX.....	0	0.0000	0	.....0.1300	.....0	.....0.1300	.....0
16		Affiliated - all other.....				4,907,386	0.0000	0	.....0.1600	.....785,182	.....0.1600	.....785,182
17		Total common stock (sum of Lines 1 through 16).....	47,840,505	0	0	47,840,505	XXX.....	0	.....XXX.....	.....5,997,762	.....XXX.....	.....5,999,384
<b>REAL ESTATE</b>												
18		Home office property (General Account only).....	638,827			638,827	0.0000	0	.....0.0750	.....47,912	.....0.0750	.....47,912
19		Investment properties.....	19,078,883			19,078,883	0.0000	0	.....0.0750	.....1,430,916	.....0.0750	.....1,430,916
20		Properties acquired in satisfaction of debt.....				0	0.0000	0	.....0.1100	.....0	.....0.1100	.....0
21		Total real estate (sum of Lines 18 through 20).....	19,717,710	0	0	19,717,710	XXX.....	0	.....XXX.....	.....1,478,828	.....XXX.....	.....1,478,828
<b>OTHER INVESTED ASSETS</b>												
<b>INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS</b>												
22		Exempt obligations.....		XXX.....	XXX.....	0	0.0000	0	.....0.0000	.....0	.....0.0000	.....0
23	1	Highest quality.....		XXX.....	XXX.....	0	0.0004	0	.....0.0023	.....0	.....0.0030	.....0
24	2	High quality.....		XXX.....	XXX.....	0	0.0019	0	.....0.0058	.....0	.....0.0090	.....0
25	3	Medium quality.....		XXX.....	XXX.....	0	0.0093	0	.....0.0230	.....0	.....0.0340	.....0
26	4	Low quality.....		XXX.....	XXX.....	0	0.0213	0	.....0.0530	.....0	.....0.0750	.....0
27	5	Lower quality.....		XXX.....	XXX.....	0	0.0432	0	.....0.1100	.....0	.....0.1700	.....0
28	6	In or near default.....		XXX.....	XXX.....	0	0.0000	0	.....0.2000	.....0	.....0.2000	.....0
29		Total with bond characteristics (sum of Lines 22 through 28).....	0	XXX.....	XXX.....	0	XXX.....	0	.....XXX.....	.....0	.....XXX.....	.....0

**ASSET VALUATION RESERVE (continued)**

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

## Equity and Other Invested Asset Component

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

NONE

**ASSET VALUATION RESERVE (continued)**

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

## Equity and Other Invested Asset Component

Line Number	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
		<b>INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK</b>										
65		Unaffiliated public.....		XXX.....	XXX.....	0	0.0000	0	(a).....0.1300	0	(a).....0.1300	0
66		Unaffiliated private.....		XXX.....	XXX.....	0	0.0000	0	.....0.1600	0	.....0.1600	0
67		Affiliated life with AVR.....		XXX.....	XXX.....	0	0.0000	0	.....0.0000	0	.....0.0000	0
68		Affiliated certain other (see SVO Purposes and Procedures Manual).....		XXX.....	XXX.....	0	0.0000	0	.....0.1300	0	.....0.1300	0
69		Affiliated other - all other.....		XXX.....	XXX.....	0	0.0000	0	.....0.1600	0	.....0.1600	0
70		Total with Common Stock Characteristics (Sum of Lines 65 through 69).....	0	XXX.....	XXX.....	0	XXX.....	0	XXX.....	0	XXX.....	0
		<b>INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE</b>										
71		Home office property (general account only).....				0	0.0000	0	.....0.0750	0	.....0.0750	0
72		Investment properties.....	18,160,237			18,160,237	0.0000	0	.....0.0750	1,362,018	.....0.0750	1,362,018
73		Properties acquired in satisfaction of debt.....				0	0.0000	0	.....0.1100	0	.....0.1100	0
74		Total with Real Estate Characteristics (Sum of Lines 71 through 73).....	18,160,237	0	0	18,160,237	XXX.....	0	XXX.....	1,362,018	XXX.....	1,362,018
		<b>LOW INCOME HOUSING TAX CREDIT INVESTMENTS</b>										
75		Guaranteed federal low income housing tax credit.....				0	0.0003	0	.....0.0006	0	.....0.0010	0
76		Non-guaranteed federal low income housing tax credit.....				0	0.0063	0	.....0.0120	0	.....0.0190	0
77		Guaranteed state low income housing tax credit.....				0	0.0003	0	.....0.0006	0	.....0.0010	0
78		Non-guaranteed state low income housing tax credit.....				0	0.0063	0	.....0.0120	0	.....0.0190	0
79		All other low income housing tax credit.....				0	0.0273	0	.....0.0600	0	.....0.0975	0
80		Total LIHTC (Sum of Lines 75 through 79).....	0	0	0	0	XXX.....	0	XXX.....	0	XXX.....	0
		<b>ALL OTHER INVESTMENTS</b>										
81		NAIC 1 working capital finance investments.....		XXX.....		0	0.0000	0	.....0.0037	0	.....0.0037	0
82		NAIC 2 working capital finance investments.....		XXX.....		0	0.0000	0	.....0.0120	0	.....0.0120	0
83		Other invested assets - Schedule BA.....	31,020,001	XXX.....		31,020,001	0.0000	0	.....0.1300	4,032,600	.....0.1300	4,032,600
84		Other short-term invested assets - Schedule DA.....		XXX.....		0	0.0000	0	.....0.1300	0	.....0.1300	0
85		Total All Other (sum of Lines 81, 82, 83 and 84).....	31,020,001	XXX.....	0	31,020,001	XXX.....	0	XXX.....	4,032,600	XXX.....	4,032,600
86		Total Other Invested Assets - Schedule BA & DA (Sum of Lines 29, 37, 64, 70, 74, 80 and 85).....	49,180,238	0	0	49,180,238	XXX.....	0	XXX.....	5,394,618	XXX.....	5,394,618

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

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

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

**Asset Valuation Reserve - Replications (Synthetic) Assets**  
**NONE**

**Sch. F - Claims**  
**NONE**

**SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT**

	Total		Group Accident and Health		Credit A&H (Group and Individual)		Collectively Renewable		Other Individual Contracts									
			1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %	15 Amount	16 %
<b>PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS</b>																		
1. Premiums written.....	11,995	XXX.....	XXX.....	XXX.....	269	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	11,726	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....
2. Premiums earned.....	(2,170)	XXX.....	XXX.....	XXX.....	269	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	(2,439)	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....
3. Incurred claims.....	11,749	(541.4)	3,267	0.0	0.0	0.0	0.0	0.0	0.0	0.0	8,482	(347.8)	0.0	0.0	0.0	0.0	0.0	0.0
4. Cost containment expenses.....	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
5. Incurred claims and cost containment expenses (Lines 3 and 4).....	11,749	(541.4)	3,267	0.0	0.0	0.0	0.0	0.0	0.0	0.0	8,482	(347.8)	0.0	0.0	0.0	0.0	0.0	0.0
6. Increase in contract reserves.....	(4,418)	203.6	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	(4,418)	181.1	0	0.0	0.0	0.0	0.0	0.0
7. Commissions (a).....	(579)	26.7	0.0	0.0	50	18.6	0.0	0.0	0.0	0.0	(629)	25.8	0.0	0.0	0.0	0.0	0.0	0.0
8. Other general insurance expenses.....	78,926	(3,637.1)	0.0	0.0	1,175	436.8	0.0	0.0	0.0	0.0	77,751	(3,187.8)	0.0	0.0	0.0	0.0	0.0	0.0
9. Taxes, licenses and fees.....	2,695	(124.2)	0.0	0.0	40	14.9	0.0	0.0	0.0	0.0	2,655	(108.9)	0.0	0.0	0.0	0.0	0.0	0.0
10. Total other expenses incurred.....	81,042	(3,734.7)	0	0.0	1,265	470.3	0	0.0	0	0.0	79,777	(3,270.9)	0	0.0	0	0.0	0	0.0
11. Aggregate write-ins for deductions.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
12. Gain from underwriting before dividends or refunds.....	(90,543)	4,172.5	(3,267)	0.0	(996)	(370.3)	0	0.0	0	0.0	(86,280)	3,537.5	0	0.0	0	0.0	0	0.0
13. Dividends or refunds.....	0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
14. Gain from underwriting after dividends or refunds.....	(90,543)	4,172.5	(3,267)	0.0	(996)	(370.3)	0	0.0	0	0.0	(86,280)	3,537.5	0	0.0	0	0.0	0	0.0

**DETAILS OF WRITE-INS**

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

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

**SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (continued)**

	1 Total	2 Group Accident and Health	3 Credit A&H (Group and Individual)	4 Collectively Renewable	Other Individual Contracts				
					5 Non-Cancelable	6 Guaranteed Renewable	7 Non-Renewable for Stated Reasons Only	8 Other Accident Only	9 All Other
<b>PART 2 - RESERVES AND LIABILITIES</b>									
A. Premium Reserves:									
1. Unearned premiums.....	2,377		516			1,861			
2. Advance premiums.....	0								
3. Reserve for rate credits.....	0								
4. Total premium reserves, current year.....	2,377	0	516	0	0	1,861	0	0	0
5. Total premium reserves, prior year.....	2,799		516			2,283		0	
6. Increase in total premium reserves.....	(422)	0	0	0	0	(422)	0	0	0
B. Contract Reserves:									
1. Additional reserves (a).....	28,703					28,703			
2. Reserve for future contingent benefits.....	0								
3. Total contract reserves, current year.....	28,703	0	0	0	0	28,703	0	0	0
4. Total contract reserves, prior year.....	33,121					33,121		0	
5. Increase in contract reserves.....	(4,418)	0	0	0	0	(4,418)	0	0	0
C. Claim Reserves and Liabilities:									
1. Total current year.....	134,293	40,270	0	0	0	.94,023	0	0	0
2. Total prior year.....	148,289	49,343				.98,946			
3. Increase.....	(13,996)	(9,073)	0	0	0	(4,923)	0	0	0

83

**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.....	19,865	12,340				7,525			
1.2 On claims incurred during current year.....	5,880					5,880			
2. Claim Reserves and Liabilities, December 31, current year:									
2.1 On claims incurred prior to current year.....	96,293	40,270				56,023			
2.2 On claims incurred during current year.....	38,000					38,000			
3. Test:									
3.1 Lines 1.1 and 2.1.....	116,158	52,610	0	0	0	63,548	0	0	0
3.2 Claim reserves and liabilities, December 31, prior year.....	148,289	49,343				.98,946			
3.3 Line 3.1 minus Line 3.2.....	(32,131)	3,267	0	0	0	(35,398)	0	0	0

**PART 4 - REINSURANCE**

A. Reinsurance Assumed:									
1. Premiums written.....	269		269						
2. Premiums earned.....	269		269						
3. Incurred claims.....	0								
4. Commissions.....	50		50						
B. Reinsurance Ceded:									
1. Premiums written.....	8,215					8,215			
2. Premiums earned.....	8,215					8,215			
3. Incurred claims.....	26,261	16,252				10,009			
4. Commissions.....	629					629			

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

**Universal Guaranty Life Insurance Company**  
**SCHEDULE H - PART 5 - HEALTH CLAIMS**

	1 Medical	2 Dental	3 Other	4 Total
<b>A. Direct:</b>				
1. Incurred claims.....	6,380		31,630	38,010
2. Beginning claim reserves and liabilities.....			479,843	479,843
3. Ending claim reserves and liabilities.....			405,263	405,263
4. Claims paid.....	6,380	0	106,210	112,590
<b>B. Assumed Reinsurance:</b>				
5. Incurred claims.....				0
6. Beginning claim reserves and liabilities.....				0
7. Ending claim reserves and liabilities.....				0
8. Claims paid.....	0	0	0	0
<b>C. Ceded Reinsurance:</b>				
9. Incurred claims.....			26,261	26,261
10. Beginning claim reserves and liabilities.....	1,059		346,854	347,913
11. Ending claim reserves and liabilities.....	1,059		279,470	280,529
12. Claims paid.....	0	0	93,645	93,645
<b>D. Net:</b>				
13. Incurred claims.....	6,380	0	5,369	11,749
14. Beginning claim reserves and liabilities.....	(1,059)	0	132,989	131,930
15. Ending claim reserves and liabilities.....	(1,059)	0	125,793	124,734
16. Claims paid.....	6,380	0	12,565	18,945
<b>E. Net Incurred Claims and Cost Containment Expenses:</b>				
17. Incurred claims and cost containment expenses.....			11,749	11,749
18. Beginning reserves and liabilities.....	(1,059)		132,989	131,930
19. Ending reserves and liabilities.....			124,734	124,734
20. Paid claims and cost containment expenses.....	(1,059)	0	20,004	18,945

**SCHEDULE S - PART 1 - SECTION 1**

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

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

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

57509.....	36-1260620....	09/30/1998	INDEPENDENT ORDER OF VIKINGS.....	IL.....	CO/I.....	.....	.....	5,295	.....	.....	.....
64904.....	61-0574893....	06/07/2000	INVESTORS HERITAGE LIFE INSURANCE CO.....	KY.....	CO/I.....	110,154	1,434	617	22	.....	.....
0899999.	Total - General Account - Non-Affiliates - U.S. Non-Affiliates.....					110,154	1,434	5,912	22	0	0
1099999.	Total - General Account - Non-Affiliates.....					110,154	1,434	5,912	22	0	0
1199999.	Total - General Account.....					110,154	1,434	5,912	22	0	0
2399999.	Total U.S.....					110,154	1,434	5,912	22	0	0
9999999.	Total.....					110,154	1,434	5,912	22	0	0

**SCHEDULE S - PART 1 - SECTION 2**

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Premiums	8 Unearned Premiums	9 Reserve Liability Other Than for Unearned Premiums	10 Reinsurance Payable on Paid and Unpaid Losses	11 Modified Coinsurance Reserve	12 Funds Withheld Under Coinsurance
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**Non-Affiliates - U.S. Non-Affiliates**

64904.....	61-0574893....	06/07/2000	INVESTORS HERITAGE LIFE INSURANCE CO.....	KY.....	CO/I.....	269		358			
0899999.	Total - Non-Affiliates - U.S. Non-Affiliates.....					269	0	358	0	0	0
1099999.	Total - Non-Affiliates.....					269	0	358	0	0	0
1199999.	Total - U.S.....					269	0	358	0	0	0
9999999.	Total.....					269	0	358	0	0	0

**Universal Guaranty Life Insurance Company**  
**SCHEDULE S - PART 2**

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 Unpaid Losses
<b>Life and Annuity - Non-Affiliates - U.S. Non-Affiliates</b>						
86258.....	13-2572994....	05/01/1975	GENERAL RE LIFE CORP.....	CT.....		
65676.....	35-0472300....	02/01/1971	LINCOLN NATIONAL LIFE INSURANCE COMPANY.....	IN.....		11,010
88099.....	75-1608507....	08/01/1991	OPTIMUM RE INSURANCE COMPANY.....	TX.....		246,095
60003.....	04-2350154....	09/30/1996	PARK AVENUE LIFE INSURANCE COMPANY.....	DE.....		
64688.....	75-6020048....	01/10/1991	SCOR GLOBAL LIFE AMERICAS REINSURANCE CO.....	DE.....		71,448
82627.....	06-0839705....	11/15/1976	SWISS RE LIFE & HEALTH AMERICA, INC.....	CT.....		161,222
86231.....	39-0989781....	10/01/1988	TRANSAMERICA LIFE INSURANCE CO.....	IA.....		
0899999.	Total - Life and Annuity Non-Affiliates - U.S. Non-Affiliates.....				0	489,775
1099999.	Total - Life and Annuity Non-Affiliates.....				0	489,775
1199999.	Total - Life and Annuity.....				0	489,775
<b>Accident and Health - Non-Affiliates - U.S. Non-Affiliates</b>						
19194.....	48-0214040....	11/01/1969	FARMERS ALLIANCE MUTUAL INSURANCE CO.....	KS.....		
65676.....	35-0472300....	09/01/1969	LINCOLN NATIONAL LIFE INSURANCE CO.....	IN.....	1,059	24,484
62235.....	01-0278678....	09/19/1989	UNUM LIFE INSURANCE COMPANY OF AMERICA.....	ME.....	8,500	
1999999.	Total - Accident and Health Non-Affiliates - U.S. Non-Affiliates.....				.9,559	24,484
2199999.	Total - Accident and Health Non-Affiliates.....				.9,559	24,484
2299999.	Total - Accident and Health.....				.9,559	24,484
2399999.	Total U.S.....				.9,559	514,259
9999999.	Total.....				.9,559	514,259

**SCHEDULE S - PART 3 - SECTION 1**

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

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount In Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9 Current Year	10 Prior Year		12 Current Year	13 Prior Year		
<b>General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates</b>														
86258....	13-2572994....	05/01/1975	GENERAL RE LIFE CORP.....	CT.....	YRT/I.....	OL.....	544,490	12,713	11,895	23,967				
65676....	35-0472300....	02/01/1971	LINCOLN NATIONAL LIFE INSURANCE COMPANY.....	IN.....	CO/I.....	OL.....	2,371,809	671,246	677,806	49,805				
65676....	35-0472300....	02/01/1971	LINCOLN NATIONAL LIFE INSURANCE COMPANY.....	IN.....	DIS/I.....	OL.....		6,231	6,231	-				
65676....	35-0472300....	02/01/1971	LINCOLN NATIONAL LIFE INSURANCE COMPANY.....	IN.....	YRT/I.....	OL.....	193,036	1,818	1,662	-				
85472....	13-2740556....	01/02/1981	NATIONAL SECURITY LIFE & ANN CO.....	NY.....	YRT/I.....	OL.....	25,000	608	608	-				
88099....	75-1608507....	08/01/1991	OPTIMUM RE INSURANCE COMPANY.....	TX.....	CO/I.....	OL.....	3,834,817	374,418	408,126	(67,417)				
88099....	75-1608507....	08/01/1991	OPTIMUM RE INSURANCE COMPANY.....	TX.....	ADB/I.....	OL.....				15,005				
88099....	75-1608507....	08/01/1991	OPTIMUM RE INSURANCE COMPANY.....	TX.....	YRT/I.....	OL.....	89,568,256	759,267	764,102	1,716,718				
60003....	04-2350154....	09/30/1996	PARK AVENUE LIFE INSURANCE COMPANY.....	DE.....	CO/I.....	OL.....	28,644,913	15,147,605	15,342,841	2,950				
60003....	04-2350154....	09/30/1996	PARK AVENUE LIFE INSURANCE COMPANY.....	DE.....	ACO/I.....	OL.....		339,679	329,887	-				
60003....	04-2350154....	09/30/1996	PARK AVENUE LIFE INSURANCE COMPANY.....	DE.....	OTH/I.....	OL.....		3,358,229	3,328,303	-				
64688....	75-6020048....	01/10/1991	SCOR GLOBAL LIFE AMERICAS REINSURANCE CO.....	DE.....	CO/I.....	OL.....	40,535,420	6,232,332	6,307,237	266,110				
64688....	75-6020048....	01/10/1991	SCOR GLOBAL LIFE AMERICAS REINSURANCE CO.....	DE.....	YRT/I.....	OL.....	167,708	693	643	423				
82627....	06-0839705....	11/15/1976	SWISS RE LIFE & HEALTH AMERICA INC.....	CT.....	CO/I.....	OL.....	24,682,055	2,742,259	2,872,482	109,285				
82627....	06-0839705....	11/15/1976	SWISS RE LIFE & HEALTH AMERICA INC.....	CT.....	YRT/I.....	OL.....	44,923,996	108,102	103,590	669,120				
86231....	39-0989781....	10/01/1988	TRANSAMERICA LIFE INSURANCE CO.....	IA.....	CO/I.....	OL.....				3,861				
86231....	39-0989781....	10/01/1988	TRANSAMERICA LIFE INSURANCE CO.....	IA.....	YRT/I.....	OL.....	6,503,127	97,894	101,364	126,262				
0899999....	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates.....						241,994,627	29,853,094	30,256,777	2,916,089	0	0	0	0
1099999....	Total - General Account - Authorized - Non-Affiliates.....						241,994,627	29,853,094	30,256,777	2,916,089	0	0	0	0
1199999....	Total - General Account - Authorized.....						241,994,627	29,853,094	30,256,777	2,916,089	0	0	0	0
3499999....	Total - General Account - Authorized, Unauthorized and Certified.....						241,994,627	29,853,094	30,256,777	2,916,089	0	0	0	0
6999999....	Total U.S.....						241,994,627	29,853,094	30,256,777	2,916,089	0	0	0	0
9999999....	Total.....						241,994,627	29,853,094	30,256,777	2,916,089	0	0	0	0

**SCHEDULE S - PART 3 - SECTION 2**

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Premiums	9 Unearned Premiums (Estimated)	10 Reserve Credit Taken Other Than for Unearned Premiums	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
										11 Current Year	12 Prior Year		
<b>General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates</b>													
19194....	48-0214040....	.11/01/1969	FARMERS ALLIANCE MUTUAL INSURANCE CO.....	KS.....	CO/I.....	OH.....	.....7						
65676....	35-0472300....	.09/01/1969	LINCOLN NATIONAL LIFE INSURANCE CO.....	IN.....	CO/I.....	OH.....	397	.....50	.....49,615				
82627....	06-0839705....	.11/15/1976	SWISS RE LIFE & HEALTH AMERICA INC.....	CT.....	CO/I.....	OH.....	.....42						
70408....	81-0170040....	.11/15/1976	UNION SECURITY INSURANCE CO.....	KS.....	CO/I.....	OH.....	5,631		.....8,037				
62235....	01-0278678....	.09/19/1989	UNUM LIFE INSURANCE CO OF AMERICA.....	ME.....	CO/I.....	OH.....		.....197,033					
0899999.	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates.....						6,077	.....50	254,685	.....0	.....0	.....0	.....0
1099999.	Total - General Account - Authorized - Non-Affiliates.....						6,077	.....50	254,685	.....0	.....0	.....0	.....0
1199999.	Total - General Account - Authorized.....						6,077	.....50	254,685	.....0	.....0	.....0	.....0
3499999.	Total - General Account - Authorized, Unauthorized and Certified.....						6,077	.....50	254,685	.....0	.....0	.....0	.....0
6999999.	Total - U.S.....						6,077	.....50	254,685	.....0	.....0	.....0	.....0
9999999.	Total.....						6,077	.....50	254,685	.....0	.....0	.....0	.....0

**Sch. S - Pt. 4**  
**NONE**

**Sch. S - Pt. 5**  
**NONE**

**Universal Guaranty Life Insurance Company**  
**SCHEDULE S - PART 6**

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

	1 2017	2 2016	3 2015	4 2014	5 2013
<b>A. OPERATIONS ITEMS</b>					
1. Premiums and annuity considerations for life and accident and health contracts.....	2,922	2,776	2,933	2,975	3,062
2. Commissions and reinsurance expense allowances.....	167	168	200	(3,175)	133
3. Contract claims.....	1,975	2,537	2,578	2,936	2,863
4. Surrender benefits and withdrawals for life contracts.....	313	390	608	648	568
5. Dividends to policyholders.....	46	52	52	52	54
6. Reserve adjustments on reinsurance ceded.....					
7. Increase in aggregate reserves for life and accident and health contracts.....	(493)	(457)	(448)	(808)	(543)
<b>B. BALANCE SHEET ITEMS</b>					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected.....	272	393	161	171	163
9. Aggregate reserves for life and accident and health contracts.....	26,750	27,242	27,699	28,147	32,211
10. Liability for deposit-type contracts.....	3,358	3,328	3,279	3,244	3,256
11. Contract claims unpaid.....	514	608	144	232	369
12. Amounts recoverable on reinsurance.....	10	53	133	312	301
13. Experience rating refunds due or unpaid.....					
14. Policyholders' dividends (not included in Line 10).....					
15. Commissions and reinsurance expense allowances due.....					
16. Unauthorized reinsurance offset.....					
17. Offset for reinsurance with certified reinsurers.....					
<b>C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)</b>					
18. Funds deposited by and withheld from (F).....					
19. Letters of credit (L).....					
20. Trust agreements (T).....					
21. Other (O).....					
<b>D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)</b>					
22. Multiple beneficiary trust.....					
23. Funds deposited by and withheld from (F).....					
24. Letters of credit (L).....					
25. Trust agreements (T).....					
26. Other (O).....					

Annual Statement for the year 2017 of the **Universal Guaranty Life Insurance Company**  
**SCHEDULE S - PART 7**

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12).....	338,893,474		338,893,474
2. Reinsurance (Line 16).....	235,082		235,082
3. Premiums and considerations (Line 15).....	495,978	272,105	768,083
4. Net credit for ceded reinsurance.....	XXX	30,367,089	30,367,089
5. All other admitted assets (balance).....	3,654,609		3,654,609
6. Total assets excluding Separate Accounts (Line 26).....	343,279,143	30,639,194	373,918,337
7. Separate Account assets (Line 27).....			0
8. Total assets (Line 28).....	343,279,143	30,639,194	373,918,337
<b>LIABILITIES, CAPITAL AND SURPLUS (Page 3)</b>			
9. Contract reserves (Lines 1 and 2).....	237,645,047	26,749,600	264,394,647
10. Liability for deposit-type contracts (Line 3).....	11,630,114	3,358,229	14,988,343
11. Claim reserves (Line 4).....	3,262,916	514,259	3,777,175
12. Policyholder dividends/reserves (Lines 5 through 7).....	401,737	15,937	417,674
13. Premium & annuity considerations received in advance (Line 8).....	22,092	1,169	23,261
14. Other contract liabilities (Line 9).....	11,781,915		11,781,915
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).....	23,817,335		23,817,335
20. Total liabilities excluding Separate Accounts (Line 26).....	288,561,156	30,639,194	319,200,350
21. Separate Account liabilities (Line 27).....			0
22. Total liabilities (Line 28).....	288,561,156	30,639,194	319,200,350
23. Capital & surplus (Line 38).....	54,717,987	XXX	54,717,987
24. Total liabilities, capital & surplus (Line 39).....	343,279,143	30,639,194	373,918,337
<b>NET CREDIT FOR CEDED REINSURANCE</b>			
25. Contract reserves.....	26,749,600		
26. Claim reserves.....	514,259		
27. Policyholder dividends/reserves.....	15,937		
28. Premium & annuity considerations received in advance.....	1,169		
29. Liability for deposit-type contracts.....	3,358,229		
30. Other contract liabilities.....	0		
31. Reinsurance ceded assets.....	0		
32. Other ceded reinsurance recoverables.....	0		
33. Total ceded reinsurance recoverables.....	30,639,194		
34. Premiums and considerations.....	272,105		
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.....	272,105		
41. Total net credit for ceded reinsurance.....	30,367,089		

**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	47,048	1,929				48,977
2. Alaska.....AK	1,363	.80				1,443
3. Arizona.....AZ	19,719	.800				20,519
4. Arkansas.....AR	117,815	.480				118,295
5. California.....CA	29,023	.971				29,994
6. Colorado.....CO	48,393	1,075				49,468
7. Connecticut.....CT	3,350	.800				4,150
8. Delaware.....DE	1,489					1,489
9. District of Columbia.....DC	3,178					3,178
10. Florida.....FL	273,105	3,808				276,913
11. Georgia.....GA	101,661	.500				102,161
12. Hawaii.....HI	1,196					1,196
13. Idaho.....ID	4,483					4,483
14. Illinois.....IL	1,214,117	63,734				1,277,851
15. Indiana.....IN	211,458	16,366				227,824
16. Iowa.....IA	191,725	29,659				221,384
17. Kansas.....KS	433,817	2,580				436,397
18. Kentucky.....KY	66,734	.959				67,693
19. Louisiana.....LA	265,738	1,783				267,521
20. Maine.....ME	.66					.66
21. Maryland.....MD	13,047	10,867				23,914
22. Massachusetts.....MA	1,945	.160				2,105
23. Michigan.....MI	157,462	1,962				159,424
24. Minnesota.....MN	12,465	.92				12,557
25. Mississippi.....MS	196,451	.1,161				197,612
26. Missouri.....MO	238,569	13,154				251,723
27. Montana.....MT	30,745	.360				31,105
28. Nebraska.....NE	61,116	.2,527				63,643
29. Nevada.....NV	12,644					12,644
30. New Hampshire.....NH	.228					.228
31. New Jersey.....NJ	.6,057	.1,483				7,540
32. New Mexico.....NM	25,073	.1,497				26,570
33. New York.....NY	.9,553	.186				9,739
34. North Carolina.....NC	141,767	.2,461				144,228
35. North Dakota.....ND	1,728					1,728
36. Ohio.....OH	2,164,689	22,078				2,186,767
37. Oklahoma.....OK	210,633	.4,012				214,645
38. Oregon.....OR	6,667					6,667
39. Pennsylvania.....PA	197,298	20,103				217,401
40. Rhode Island.....RI	.516					.516
41. South Carolina.....SC	163,559	.640				164,199
42. South Dakota.....SD	1,521	.107				1,628
43. Tennessee.....TN	162,748	.941				163,689
44. Texas.....TX	682,346	15,069				697,415
45. Utah.....UT	5,358	.320				5,678
46. Vermont.....VT	.400					.400
47. Virginia.....VA	125,953	.2,608				128,561
48. Washington.....WA	12,637	.141				12,778
49. West Virginia.....WV	505,606	1,858				507,464
50. Wisconsin.....WI	25,574	1,283				26,857
51. Wyoming.....WY	3,446	.180				3,626
52. American Samoa.....AS						0
53. Guam.....GU						0
54. Puerto Rico.....PR						0
55. US Virgin Islands.....VI						0
56. Northern Mariana Islands.....MP						0
57. Canada.....CAN						0
58. Aggregate Other Alien.....OT						0
59. Totals.....	8,213,279	230,774	0	0	0	8,444,053

**SCHEDULE Y****PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? *	
<b>Members</b>															
			61-1129777..				First Southern Bancorp, Inc.	KY	UIP	Jesse T. Correll.....	Ownership.....	....62.000	Jesse T. Correll.....	.....Y.....	
			61-1233349..				First Southern Funding, LLC	KY	NIA	Jesse T. Correll.....	Ownership.....	....74.000	Jesse T. Correll.....	.....N.....	
			61-1396135..				First Southern Holdings, LLC	KY	UIP	First Southern Bancorp, Inc.	Ownership.....	....99.000	Jesse T. Correll.....	.....N.....	
			61-0290000..	702612			First Southern National Bank	KY	NIA	First Southern Bancorp, Inc.	Ownership.....	....100.000	Jesse T. Correll.....	.....Y.....	
			20-2907892..				UTG, Inc.	DE	DS	First Southern Holdings, LLC	Ownership.....	....36.060	Jesse T. Correll.....	.....N.....	
			70130..	31-0727974..			Universal Guaranty Life Insurance Co.	OH	RE	UTG, Inc.	Ownership.....	....100.000	Jesse T. Correll.....	.....N.....	
			76-0293391..				Imperial Plan, Inc.	TX	DS	Universal Guaranty Life Insurance Co.	Ownership.....	....100.000	Jesse T. Correll.....	.....N.....	
			46-2793973..				BCG Land, LLC	KY	DS	Universal Guaranty Life Insurance Co.	Ownership.....	....100.000	Jesse T. Correll.....	.....N.....	
			45-2035659..				Collier Beach, LLC	SC	DS	Universal Guaranty Life Insurance Co.	Ownership.....	....100.000	Jesse T. Correll.....	.....N.....	
			81-3717960..				Consolidated Timberlands, LLC	GA	DS	Universal Guaranty Life Insurance Co.	Ownership.....	....50.000	Jesse T. Correll.....	.....N.....	
			26-1700910..				Cumberland Woodlands, LLC	KY	DS	Universal Guaranty Life Insurance Co.	Ownership.....	....100.000	Jesse T. Correll.....	.....N.....	
			61-1697704..				Red River Gorge Properties, LLC	KY	DS	Cumberland Woodlands, LLC	Ownership.....	....100.000	Jesse T. Correll.....	.....N.....	
			46-5378135..				Midland Superblock Partners, LLC	TX	DS	Universal Guaranty Life Insurance Co.	Ownership.....	....74.120	Jesse T. Correll.....	.....N.....	
			20-4148401..				Sand Lake, LLC	FL	DS	Universal Guaranty Life Insurance Co.	Ownership.....	....100.000	Jesse T. Correll.....	.....N.....	
			20-3705703..				Stanford Wilderness Road, LLC	KY	DS	Universal Guaranty Life Insurance Co.	Ownership.....	....100.000	Jesse T. Correll.....	.....N.....	
			45-3274236..				UG Acquisitions, LLC	DE	DS	Universal Guaranty Life Insurance Co.	Ownership.....	....100.000	Jesse T. Correll.....	.....N.....	
			81-3227691..				UG Norris Lake, LLC	KY	DS	Universal Guaranty Life Insurance Co.	Ownership.....	....90.000	Jesse T. Correll.....	.....N.....	
			47-1221269..				UGL Titusville Marina, LLC	FL	DS	Universal Guaranty Life Insurance Co.	Ownership.....	....100.000	Jesse T. Correll.....	.....N.....	
			47-1376544..				UGLIC, LLC	TX	DS	Universal Guaranty Life Insurance Co.	Ownership.....	....80.000	Jesse T. Correll.....	.....N.....	
			45-4146206..				UTG Avalon, LLC	FL	DS	Universal Guaranty Life Insurance Co.	Ownership.....	....100.000	Jesse T. Correll.....	.....N.....	
			45-5506139..				VMA Mobile, LLC	DE	DS	Universal Guaranty Life Insurance Co.	Ownership.....	....50.000	Jesse T. Correll.....	.....N.....	

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
<b>Affiliated Transactions</b>												
00000.....	61-1129777.....	First Southern Bancorp, Inc.....	.259,138									259,138
00000.....	61-1233349.....	First Southern Funding, LLC.....				(15,000)						(15,000)
00000.....	61-0290000.....	First Southern National Bank.....										(19,762)
00000.....	46-5378135.....	Midland Superblock Partners, LLC.....	.453,002									453,002
00000.....	36-4800767.....	NV Holding Group, LLC.....				1,729,000						1,729,000
00000.....	20-3705703.....	Stanford Wilderness Road, LLC.....			(700,000)							(700,000)
00000.....	47-1376544.....	UGLC, LLC.....	21,292									21,292
00000.....	45-4146206.....	UTG Avalon, LLC.....										(35,670)
00000.....	20-2907892.....	UTG, Inc.....	(2,000,000)	.1,020,250								(7,213,590)
70130.....	31-0727974.....	Universal Guaranty Life Insurance Company.....	1,266,568	(320,250)	(1,714,000)							7,269,022
9999999.....	Control Totals.....		0	0	0	0	0	0	0	XXX	0	0

**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

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

**MARCH FILING**

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

**Responses**

YES

YES

WAIVED

YES

**APRIL FILING**

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

YES

YES

YES

YES

**JUNE FILING**

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

YES

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?
13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?
14. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?
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?
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?
17. Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?
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?
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?
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?
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?
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?
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?
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?
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?
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?
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?
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?
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?
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?
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?
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?
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?
34. Will the Workers' Compensation Carve-Out Supplement be filed by March 1?
35. Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1?
36. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?
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?
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?
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?
40. Will the VM-20 Reserves Supplement be filed with the state of domicile and the NAIC by March 1?

**APRIL FILING**

41. Will the confidential Regulatory Asset Adequacy Issues Summary (RAAIS) required by the Valuation Manual be filed with the state of domicile by April 1?
42. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?
43. Will the Interest-Sensitive Life Insurance Products Report Forms be filed with the state of domicile and the NAIC by April 1?
44. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?
45. Will the Accident and Health Policy Experience Exhibit be filed by April 1?
46. Will the Analysis of Annuity Operations by Lines of Business be filed with the state of domicile and the NAIC by April 1?
47. Will the Analysis of Increase in Annuity Reserves During the Year be filed with the state of domicile and the NAIC by April 1?
48. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?
49. 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?
50. Will the confidential Actuarial Memorandum required by Actuarial Guideline XXXVIII 8D be filed with the state of domicile by April 30?
51. Will the Supplemental Term and Universal Life Insurance Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1?
52. Will the Variable Annuities Supplement be filed with the state of domicile and the NAIC by April 1?

**AUGUST FILING**

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

YES

NO

YES

NO

YES

YES

YES

NO

NO

YES

NO

NO

**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:****BAR CODE:**

1.

2.

3.

4.

5.

6.

7.

8.

9.

10.

11.

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



\* 7 0 1 3 0 2 0 1 7 3 9 0 0 0 0 0 0 0 \*

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



\* 7 0 1 3 0 2 0 1 7 3 6 0 0 0 0 0 0 0 \*

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



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15.

16.

17. 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.



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



\* 7 0 1 3 0 2 0 1 7 4 4 5 0 0 0 0 0 0 \*

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



\* 7 0 1 3 0 2 0 1 7 4 4 6 0 0 0 0 0 0 \*

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



\* 7 0 1 3 0 2 0 1 7 4 4 7 0 0 0 0 0 0 \*

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



\* 7 0 1 3 0 2 0 1 7 4 4 8 0 0 0 0 0 0 \*

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



\* 7 0 1 3 0 2 0 1 7 4 4 9 0 0 0 0 0 0 \*

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



\* 7 0 1 3 0 2 0 1 7 4 4 5 0 0 0 0 0 0 \*

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



\* 7 0 1 3 0 2 0 1 7 4 4 5 1 0 0 0 0 0 0 \*

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



\* 7 0 1 3 0 2 0 1 7 4 4 5 2 0 0 0 0 0 0 \*

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



\* 7 0 1 3 0 2 0 1 7 4 4 5 3 0 0 0 0 0 0 \*

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



\* 7 0 1 3 0 2 0 1 7 4 4 5 6 0 0 0 0 0 0 \*

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



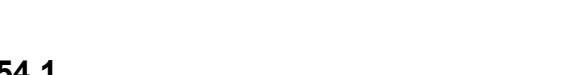
\* 7 0 1 3 0 2 0 1 7 4 4 5 7 0 0 0 0 0 0 \*

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



\* 7 0 1 3 0 2 0 1 7 4 4 5 8 0 0 0 0 0 0 \*

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



\* 7 0 1 3 0 2 0 1 7 4 4 5 9 0 0 0 0 0 0 \*

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



\* 7 0 1 3 0 2 0 1 7 4 4 5 4 0 0 0 0 0 0 \*

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



\* 7 0 1 3 0 2 0 1 7 4 4 5 5 0 0 0 0 0 0 \*

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



\* 7 0 1 3 0 2 0 1 7 4 4 5 6 0 0 0 0 0 0 \*

35.

**Universal Guaranty Life Insurance Company**  
**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

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

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

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

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

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

40.

41.

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

43.

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

45.

46.

47.

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

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

53.



\* 7 0 1 3 0 2 0 1 7 2 2 6 0 0 0 0 0 0 \*



\* 7 0 1 3 0 2 0 1 7 2 1 7 0 0 0 0 0 0 \*



\* 7 0 1 3 0 2 0 1 7 2 8 6 0 0 0 0 0 0 \*

**Overflow Page**  
**NONE**

**Overflow Page**  
**NONE**

**VM-20 RESERVES SUPPLEMENT - PART 1**

\* 7 0 1 3 0 2 0 1 7 4 5 6 0 0 1 0 0 \*

Life Insurance Reserves Valued According to VM-20 by Product Type

For the Year Ended December, 31, 2017

(To Be Filed by March 1)

NAIC Group Code: 0

NAIC Company Code: 70130

(\$000 Omitted Except for Number of Policies)

	Prior Year	Current Year													Section C		
		1 Reported Reserve	2 Reported Reserve	3 Deferred Premium Asset	Section A					9 Net Premium Reserve	10 Deterministic Reserve	11 Number of Policies	12 Face Amount	13 Net Premium Reserve	14 Number of Policies	15 Face Amount	
					4 Net Premium Reserve	5 Deterministic Reserve	6 Stochastic Reserve	7 Number of Policies	8 Face Amount								
1.	Post-Reinsurance-Ceded Reserve																
1.1	Term Life Insurance.....									XXX.....	XXX.....						
1.2	Universal Life with Secondary Guarantee.....									XXX.....	XXX.....						
1.3	Non-participating Whole Life.....									XXX.....	XXX.....						
1.4	Participating Whole Life.....									XXX.....	XXX.....						
1.5	Universal Life without Secondary Guarantee.....									XXX.....	XXX.....						
1.6	Variable Universal Life.....									XXX.....	XXX.....						
1.7	Variable Life.....									XXX.....	XXX.....						
1.8	Indexed Life.....									XXX.....	XXX.....						
1.9	Aggregate write-ins for other products.....	0	0	0	0	0	0	XXX.....	XXX.....		0	0	XXX.....	XXX.....	0	XXX.....	XXX.....
2.	Total Post-Reinsurance-Ceded Reserve (Sum of Lines 1.1 through 1.9).....	0	0	0	XXX.....	XXX.....	XXX.....			XXX.....	XXX.....						
3.	Pre-Reinsurance-Ceded Reserves																
3.1	Term Life Insurance.....																
3.2	Universal Life with Secondary Guarantee.....																
3.3	Non-participating Whole Life.....																
3.4	Participating Whole Life.....																
3.5	Universal Life without Secondary Guarantee.....																
3.6	Variable Universal Life.....																
3.7	Variable Life.....																
3.8	Indexed Life.....																
3.9	Aggregate write-ins for other products.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	Total Pre-Reinsurance-Ceded Reserve (Sum of Lines 3.1 through 3.9).....	0	0	0	XXX.....	XXX.....	XXX.....			XXX.....	XXX.....						
5.	Total Reserves Ceded (Line 4 minus Line 2).....	0	0	0	XXX.....	XXX.....	XXX.....			XXX.....	XXX.....						

**NONE****DETAILS OF WRITE-INS**

1.901										XXX.....	XXX.....						
1.902										XXX.....	XXX.....						
1.903										XXX.....	XXX.....						
1.998	Summ. of remaining write-ins for Line 1.9 from overflow.....	0	0	0	0	0	0	XXX.....	XXX.....		0	0	XXX.....	XXX.....	0	XXX.....	XXX.....
1.999	Totals (Lines 1.901 thru 1.903 + 1.998) (Line 1.9 above).....	0	0	0	0	0	0	XXX.....	XXX.....		0	0	XXX.....	XXX.....	0	XXX.....	XXX.....
3.901																	
3.902																	
3.903																	
3.998	Summ. of remaining write-ins for Line 3.9 from overflow.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3.999	Totals (Lines 3.901 thru 3.903 + 3.998) (Line 3.9 above).....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

**VM-20 RESERVES SUPPLEMENT - PART 2**

Reserves for Policies Not Based on VM-20 as a Result of the Three Year Transition Period

For the Year Ended December 31, 2017

(To Be filed by March 1)

(\$000 Omitted Except for Number of Policies)

	Three Transition Period					
	Prior Year		Current Year			
	1 Gross Reserve	2 Net Reserve	3 Gross Reserve	4 Net Reserve	5 Number of Policies	6 Face Amount
1. Life Insurance Reserves						
1.1 Term Life.....			1	1	2	100
1.2 Universal Life with Secondary Guarantee.....						
1.3 Non-participating Whole Life.....			1	1	2	15
1.4 Participating Whole Life.....						
1.5 Universal Life without Secondary Guarantee.....						
1.6 Variable Universal Life.....						
1.7 Variable Life.....						
1.8 Indexed Life.....						
1.9 Aggregate write-ins for other products.....	0	0	0	0	0	0
2. Total Life Insurance Reserves (Sum of Lines 1.1 through 1.9).....	0	0	2	2	4	115

**DETAILS OF WRITE-INS**

1.901 .....						
1.902 .....						
1.903 .....						
1.998 Summary of remaining write-ins for Line 1.9 from overflow page.....	0	0	0	0	0	0
1.999 Totals (Lines 1.901 through 1.903 plus 1.998) (Line 1.9 above).....	0	0	0	0	0	0

**VM-20 RESERVES SUPPLEMENT - PART 3**

Companywide Exemption

For the Year Ended December 31, 2017

(To be Filed by March 1)

(\$000 Omitted Except for Number of Policies)

## Companywide Exemption as Defined in the NAIC Adopted Valuation Manual (VM)

1. Has the company filed and been granted a companywide exemption from the reserve requirements of VM-20 of the Valuation Manual by their state of domicile? Yes [ ] No [ X ]

2. If the response to Question 1 is "Yes", then check the source of the granted "company exemption" definition. (Check either 2.1, 2.2 or 2.3)

2.1 NAIC Adopted VM [ ]

2.2 State Statute SVL [ ] Complete items "a" and "b", as appropriate.

a. Is the criteria in the State Statute (SVL) different from the NAIC adopted VM? Yes [ ] No [ ]

b. If the answer to "a" above is yes, provide the criteria the state has used to grant the companywide exemption (e.g., Group/Legal Entity criteria) and the minimum reserve requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS NAIC VM):

2.3 State Regulation [ ] Complete items "a" and "b", as appropriate.

a. Is the criteria in the State Regulation different from the NAIC adopted VM? Yes [ ] No [ ]

b. If the answer to "a" above is yes, provide the criteria the state has used to grant the companywide exemption (e.g., Group/Legal Entity criteria) and the minimum reserve requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS NAIC VM):

**SCHEDULE O SUPPLEMENT**

For the year ended December 31, 2017

**NONE**

Of The.....Universal Guaranty Life Insurance Company

Address (City, State, Zip Code)....Columbus, OH 43215-4260

NAIC Group Code.....0

NAIC Company Code.....70130

Employer's ID Number.....31-0727974

**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 2013	2 2014	3 2015	4 2016	5 2017 (a)
1. Prior.....	.....16	.....16	.....16	.....16	.....16
2. 2013.....					
3. 2014.....	....XXX.....				
4. 2015.....	....XXX.....	....XXX.....			
5. 2016.....	....XXX.....	....XXX.....	....XXX.....		
6. 2017.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....

**Section B - Other Accident and Health**

1. Prior.....	.....23	.....42	.....58	.....19	
2. 2013.....	.....46				
3. 2014.....	....XXX.....	....30			
4. 2015.....	....XXX.....	....XXX.....	....10		
5. 2016.....	....XXX.....	....XXX.....	....XXX.....	....15	
6. 2017.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	....6

**Section C - Credit Accident and Health**

1. Prior.....					
2. 2013.....					
3. 2014.....	....XXX.....				
4. 2015.....	....XXX.....	....XXX.....			
5. 2016.....	....XXX.....	....XXX.....	....XXX.....		
6. 2017.....	....XXX.....	....XXX.....	....XXX.....	....XXX.....	

**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 2013	2 2014	3 2015	4 2016	5 2017
1. Prior.....					
2. 2013.....					
3. 2014.....	XXX.....				
4. 2015.....	XXX.....	XXX.....			
5. 2016.....	XXX.....	XXX.....	XXX.....		
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....

**Section B - Other Accident and Health**

1. Prior.....					
2. 2013.....					
3. 2014.....	XXX.....				
4. 2015.....	XXX.....	XXX.....			
5. 2016.....	XXX.....	XXX.....	XXX.....		
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....

**Section C - Credit Accident and Health**

1. Prior.....					
2. 2013.....					
3. 2014.....	XXX.....				
4. 2015.....	XXX.....	XXX.....			
5. 2016.....	XXX.....	XXX.....	XXX.....		
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....

**Universal Guaranty Life Insurance Company**  
**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 2013	2 2014	3 2015	4 2016	5 2017
1. 2013.....				77	XXX.....
2. 2014.....	XXX.....				66
3. 2015.....	XXX.....	XXX			
4. 2016.....	XXX.....	XXX	XXX		
5. 2017.....	XXX.....	XXX	XXX	XXX	

## Section B - Other Accident and Health

1. 2013.....	84			122	XXX.....	XXX
2. 2014.....	XXX.....	68			80	XXX.....
3. 2015.....	XXX.....	XXX		48		
4. 2016.....	XXX.....	XXX	XXX		53	
5. 2017.....	XXX.....	XXX	XXX	XXX		.44

## Section C - Credit Accident and Health

1. 2013.....				XXX.....	XXX
2. 2014.....	XXX.....				XXX.....
3. 2015.....	XXX.....	XXX			
4. 2016.....	XXX.....	XXX	XXX		
5. 2017.....	XXX.....	XXX	XXX	XXX	

NONE

**Universal Guaranty Life Insurance Company**  
**SCHEDULE O SUPPLEMENT**  
**SUPPLEMENTAL SCHEDULE O - PART 4**

## Development of Incurred Losses

(\$000 OMITTED)

**Section A - Group Accident and Health**

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at End of Year				
	1 2013	2 2014	3 2015	4 2016	5 2017
1. 2013.....					
2. 2014.....	XXX.....				
3. 2015.....	XXX.....	XXX.....			
4. 2016.....	XXX.....	XXX.....	XXX.....		
5. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	

**Section B - Other Accident and Health**

1. 2013.....					
2. 2014.....	XXX.....				
3. 2015.....	XXX.....	XXX.....			
4. 2016.....	XXX.....	XXX.....	XXX.....		
5. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	

**Section C - Credit Accident and Health**

1. 2013.....					
2. 2014.....	XXX.....				
3. 2015.....	XXX.....	XXX.....			
4. 2016.....	XXX.....	XXX.....	XXX.....		
5. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	

**SUPPLEMENTAL SCHEDULE O - PART 5**

(\$000 OMITTED)

Reserve and Liability Methodology - Exhibits 6 and 8

Line of Business	1 Methodology	2 Amount
1. Industrial life.....	Other.....	144
2. Ordinary life.....	Other.....	2,983
3. Individual annuity.....	Other.....	18
4. Supplementary contracts.....		
5. Credit life.....	Other.....	
6. Group life.....	Other.....	60
7. Group annuities.....		
8. Group accident and health.....	Standard Valuation.....	40
9. Credit accident and health.....		
10. Other accident and health.....	Standard Valuation.....	94
11. Total.....		3,339

**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 Supp.**  
**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**

**2017 ALPHABETICAL INDEX**  
**LIFE ANNUAL STATEMENT BLANK**

Analysis of Increase in Reserves During The Year	7	Schedule D – Part 2 – Section 1	E11
Analysis of Operations By Lines of Business	6	Schedule D – Part 2 – Section 2	E12
Asset Valuation Reserve Default Component	30	Schedule D – Part 3	E13
Asset Valuation Reserve Equity	32	Schedule D – Part 4	E14
Asset Valuation Reserve Replications (Synthetic) Assets	35	Schedule D – Part 5	E15
Asset Valuation Reserve	29	Schedule D – Part 6 – Section 1	E16
Assets	2	Schedule D – Part 6 – Section 2	E16
Cash Flow	5	Schedule D – Summary By Country	SI04
Exhibit 1 – Part 1 – Premiums and Annuity Considerations for Life and Accident and Health Contracts	9	Schedule D – Verification Between Years	SI03
Exhibit 1 – Part 2 – Dividends and Coupons Applied, Reinsurance Commissions and Expense	10	Schedule DA – Part 1	E17
Exhibit 2 – General Expenses	11	Schedule DA – Verification Between Years	SI10
Exhibit 3 – Taxes, Licenses and Fees (Excluding Federal Income Taxes)	11	Schedule DB – Part A – Section 1	E18
Exhibit 4 – Dividends or Refunds	11	Schedule DB – Part A – Section 2	E19
Exhibit 5 – Aggregate Reserve for Life Contracts	12	Schedule DB – Part A – Verification Between Years	SI11
Exhibit 5 – Interrogatories	13	Schedule DB – Part B – Section 1	E20
Exhibit 5A – Changes in Bases of Valuation During The Year	13	Schedule DB – Part B – Section 2	E21
Exhibit 6 – Aggregate Reserves for Accident and Health Contracts	14	Schedule DB – Part B – Verification Between Years	SI11
Exhibit 7 – Deposit-Type Contracts	15	Schedule DB – Part C – Section 1	SI12
Exhibit 8 – Claims for Life and Accident and Health Contracts – Part 1	16	Schedule DB – Part C – Section 2	SI13
Exhibit 8 – Claims for Life and Accident and Health Contracts – Part 2	17	Schedule DB – Part D – Section 1	E22
Exhibit of Capital Gains (Losses)	8	Schedule DB – Part D – Section 2	E23
Exhibit of Life Insurance	25	Schedule DB – Verification	SI14
Exhibit of Net Investment Income	8	Schedule DL – Part 1	E24
Exhibit of Nonadmitted Assets	18	Schedule DL – Part 2	E25
Exhibit of Number of Policies, Contracts, Certificates, Income Payable and Account Values	27	Schedule E – Part 1 – Cash	E26
Five-Year Historical Data	22	Schedule E – Part 2 – Cash Equivalents	E27
Form for Calculating the Interest Maintenance Reserve (IMR)	28	Schedule E – Part 3 – Special Deposits	E28
General Interrogatories	20	Schedule E – Verification Between Years	SI15
Jurat Page	1	Schedule F	36
Liabilities, Surplus and Other Funds	3	Schedule H – Accident and Health Exhibit – Part 1	37
Life Insurance (State Page)	24	Schedule H – Part 2, Part 3 and Part 4	38
Notes To Financial Statements	19	Schedule H – Part 5 – Health Claims	39
Overflow Page For Write-ins	55	Schedule S – Part 1 – Section 1	40
Schedule A – Part 1	E01	Schedule S – Part 1 – Section 2	41
Schedule A – Part 2	E02	Schedule S – Part 2	42
Schedule A – Part 3	E03	Schedule S – Part 3 – Section 1	43
Schedule A – Verification Between Years	SI02	Schedule S – Part 3 – Section 2	44
Schedule B – Part 1	E04	Schedule S – Part 4	45
Schedule B – Part 2	E05	Schedule S – Part 5	46
Schedule B – Part 3	E06	Schedule S – Part 6	47
Schedule B – Verification Between Years	SI02	Schedule S – Part 7	48
Schedule BA – Part 1	E07	Schedule T – Part 2 Interstate Compact	50
Schedule BA – Part 2	E08	Schedule T – Premiums and Annuity Considerations	49
Schedule BA – Part 3	E09	Schedule Y – Information Concerning Activities of Insurer Members of a Holding Company Group	51
Schedule BA – Verification Between Years	SI03	Schedule Y – Part 1A – Detail of Insurance Holding Company System	52
Schedule D – Part 1	E10	Schedule Y – Part 2 – Summary of Insurer's Transactions With Any Affiliates	53
Schedule D – Part 1A – Section 1	SI05	Summary Investment Schedule	SI01
Schedule D – Part 1A – Section 2	SI08	Summary of Operations	4
		Supplemental Exhibits and Schedules Interrogatories	54