LIFE AND ACCIDENT AND HEALTH COMPANIES—ASSOCIATION EDITION

ANNUAL STATEMENT

For the Year Ended December 31, 2018
of the Condition and Affairs of the

U.S. FINANCIAL LIFE INSURANCE COMPANY

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

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

Incorporated/Organized: September 30, 1974 Commenced Business: September 30, 1974

Statutory Home Office: 4000 Smith Road, Suite 300, Cincinnati, Ohio 45209

Main Administrative Office: 525 Washington Boulevard Jersey City, New Jersey 07310 35th Floor - Telephone Number: (201) 743-5073

Mail Address: 525 Washington Boulevard Jersey City, New Jersey 07310 – Controllers 35th Floor, Telephone Number: (201) 743-5073

Primary Location of Books and Records: 525 Washington Boulevard Jersey City, New Jersey 07310 – Controllers 35th FL Telephone Number: (201) 743-5073

Internet Website Address: www.usfli.com

Statutory Statement Contact: Nicholas Gismondi, Vice President, (201) 743-5073

E-Mail Address: controllers@axa.us.com Fax Number: (201) 743-5006

OFFICERS

ANDERS BJÖRN MALMSTRÖM Chairman of the Board	RONALD PAUL HERRMANN President and Chief Executive Officer	ANDREA MARIE NITZAN Executive Vice President, Chief Accounting Officer and Controller
DOMINIQUE BAEDE Senior Vice President and Actuary	KEITH ELLIOTT FLOMAN Senior Vice President and Appointed Actuary	ROBIN MATTHEW RAJU # Senior Vice President and Chief Financial Officer
ANTHONY FRANK RECINE Senior Vice President and Chief Auditor	DENISE TEDESCHI Assistant Vice President and Secretary	

DIRECTORS

RONALD PAUL HERRMANN ROBIN MATTHEW RAJU #	ANDERS BJÖRN MALMSTRÖM BRIAN ROSS WINIKOFF	KEVIN MOLLOY

State of..... New Jersey.....
} ss
County of..... Hudson.....

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

RONALD PAUL HERRMANN
President and Chief Executive Officer

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

KEITH ELLIOTT FLOMAN
Senior Vice President and Appointed Actuary

DENISE TEDESCHI
Assistant Vice President and Secretary

Subscribed and sworn to before me this 21st day of February, 2019

PAOLA T MIRABAL
NOTARY PUBLIC
STATE OF NEW JERSEY
ID # 2441705
MY COMMISSION EXPIRES DECEMBER 24, 2023

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

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DIRECT BUSINESS IN Other Alien # 1 DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	48,581	0	0	0	48,581
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	48,581	0	0	0	48,581
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	0	0	0	0	0
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	0	0	0	0	0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	0	0	0	0	0
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

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

NONE

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF ALASKA DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	129,729	0	0	0	129,729
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	129,729	0	0	0	129,729
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	445,000	0	0	0	445,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	11,587	0	0	0	11,587
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	456,587	0	0	0	456,587
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	245,000	0	0	0	0	0	0	1	245,000
17.	Incurred during current year	2	400,000	0	0	0	0	0	0	2	400,000
	Settled during current year:										
18.1	By payment in full	2	445,000	0	0	0	0	0	0	2	445,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	2	445,000	0	0	0	0	0	0	2	445,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	2	445,000	0	0	0	0	0	0	2	445,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	200,000	0	0	0	0	0	0	1	200,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	86	28,943,647	0	(a) 0	0	0	0	0	86	28,943,647
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(7)	(1,619,881)	0	0	0	0	0	0	(7)	(1,619,881)
23.	In force December 31 of current year	79	27,323,766	0	(a) 0	0	0	0	0	79	27,323,766

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF ALABAMA DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	2,491,987	0	0	0	2,491,987
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	2,491,987	0	0	0	2,491,987
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	4,289,000	0	0	0	4,289,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	228,918	0	0	0	228,918
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	4,517,918	0	0	0	4,517,918
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	25,000	0	0	0	0	0	0	1	25,000
17.	Incurred during current year	40	5,387,000	0	0	0	0	0	0	40	5,387,000
	Settled during current year:										
18.1	By payment in full	31	4,289,000	0	0	0	0	0	0	31	4,289,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	31	4,289,000	0	0	0	0	0	0	31	4,289,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	31	4,289,000	0	0	0	0	0	0	31	4,289,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	10	1,123,000	0	0	0	0	0	0	10	1,123,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,920	560,719,944	0	(a) 0	0	0	0	0	1,920	560,719,944
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(155)	(39,352,030)	0	0	0	0	0	0	(155)	(39,352,030)
23.	In force December 31 of current year	1,765	521,367,914	0	(a) 0	0	0	0	0	1,765	521,367,914

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF ARKANSAS DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	1,005,999	0	0	0	1,005,999
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	1,005,999	0	0	0	1,005,999
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	735,447	0	0	0	735,447
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	196,468	0	0	0	196,468
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	931,915	0	0	0	931,915
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	13	900,447	0	0	0	0	0	0	13	900,447
	Settled during current year:										
18.1	By payment in full	10	735,447	0	0	0	0	0	0	10	735,447
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	10	735,447	0	0	0	0	0	0	10	735,447
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	10	735,447	0	0	0	0	0	0	10	735,447
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	3	165,000	0	0	0	0	0	0	3	165,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	708	211,934,608	0	(a) 0	0	0	0	0	708	211,934,608
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(67)	(12,842,017)	0	0	0	0	0	0	(67)	(12,842,017)
23.	In force December 31 of current year	641	199,092,591	0	(a) 0	0	0	0	0	641	199,092,591

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

DIRECT BUSINESS IN AMERICAN SAMOA DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

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

NONE

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

NONE

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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

DIRECT BUSINESS IN THE STATE OF ARIZONA DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	1,438,341	0	0	0	1,438,341
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	1,438,341	0	0	0	1,438,341
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	960,000	0	0	0	960,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	12,000	0	0	0	12,000
12.	Surrender values and withdrawals for life contracts	17,780	0	0	0	17,780
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	989,780	0	0	0	989,780
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	50,000	0	0	0	0	0	0	1	50,000
17.	Incurred during current year	8	1,060,000	0	0	0	0	0	0	8	1,060,000
	Settled during current year:										
18.1	By payment in full	7	960,000	0	0	0	0	0	0	7	960,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	7	960,000	0	0	0	0	0	0	7	960,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	7	960,000	0	0	0	0	0	0	7	960,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	150,000	0	0	0	0	0	0	2	150,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	702	230,480,310	0	(a) 0	0	0	0	0	702	230,480,310
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(53)	(15,919,735)	0	0	0	0	0	0	(53)	(15,919,735)
23.	In force December 31 of current year	649	214,560,575	0	(a) 0	0	0	0	0	649	214,560,575

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF CALIFORNIA DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	8,411,631	0	0	0	8,411,631
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	8,411,631	0	0	0	8,411,631
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	22,976,082	0	0	0	22,976,082
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	638,001	0	0	0	638,001
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	5,894	0	0	0	5,894
15.	Totals	23,619,978	0	0	0	23,619,978
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	10	3,019,145	0	0	0	0	0	0	10	3,019,145
17.	Incurred during current year	71	23,782,193	0	0	0	0	0	0	71	23,782,193
	Settled during current year:										
18.1	By payment in full	72	22,976,082	0	0	0	0	0	0	72	22,976,082
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	72	22,976,082	0	0	0	0	0	0	72	22,976,082
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	72	22,976,082	0	0	0	0	0	0	72	22,976,082
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	9	3,825,256	0	0	0	0	0	0	9	3,825,256
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	4,971	1,979,896,156	0	(a) 0	0	0	0	0	4,971	1,979,896,156
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(413)	(162,784,706)	0	0	0	0	0	0	(413)	(162,784,706)
23.	In force December 31 of current year	4,558	1,817,111,450	0	(a) 0	0	0	0	0	4,558	1,817,111,450

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

DIRECT BUSINESS IN THE STATE OF CANADA DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	11,121	0	0	0	11,121
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	11,121	0	0	0	11,121
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	0	0	0	0	0
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	0	0	0	0	0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	0	0	0	0	0
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

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

NONE

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF COLORADO DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	1,941,342	0	0	0	1,941,342
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	1,941,342	0	0	0	1,941,342
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	3,889,165	0	0	0	3,889,165
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	317,680	0	0	0	317,680
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	12,595	0	0	0	12,595
15.	Totals	4,219,440	0	0	0	4,219,440
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	4	201,936	0	0	0	0	0	0	4	201,936
17.	Incurred during current year	24	4,239,165	0	0	0	0	0	0	24	4,239,165
	Settled during current year:										
18.1	By payment in full	22	3,889,165	0	0	0	0	0	0	22	3,889,165
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	22	3,889,165	0	0	0	0	0	0	22	3,889,165
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	22	3,889,165	0	0	0	0	0	0	22	3,889,165
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	6	551,936	0	0	0	0	0	0	6	551,936
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,572	486,437,815	0	(a) 0	0	0	0	0	1,572	486,437,815
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(149)	(38,339,309)	0	0	0	0	0	0	(149)	(38,339,309)
23.	In force December 31 of current year	1,423	448,098,506	0	(a) 0	0	0	0	0	1,423	448,098,506

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

84530201843007100

DIRECT BUSINESS IN THE STATE OF CONNECTICUT DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	2,005,107	0	0	0	2,005,107
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	2,005,107	0	0	0	2,005,107
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,125,000	0	0	0	2,125,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	126,665	0	0	0	126,665
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	2,251,665	0	0	0	2,251,665
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	150,000	0	0	0	0	0	0	1	150,000
17.	Incurred during current year	17	2,400,000	0	0	0	0	0	0	17	2,400,000
	Settled during current year:										
18.1	By payment in full	15	2,125,000	0	0	0	0	0	0	15	2,125,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	15	2,125,000	0	0	0	0	0	0	15	2,125,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	15	2,125,000	0	0	0	0	0	0	15	2,125,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	3	425,000	0	0	0	0	0	0	3	425,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,600	584,536,538	0	(a) 0	0	0	0	0	1,600	584,536,538
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(147)	(42,707,388)	0	0	0	0	0	0	(147)	(42,707,388)
23.	In force December 31 of current year	1,453	541,829,150	0	(a) 0	0	0	0	0	1,453	541,829,150

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

84530201843009100

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

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	67,141	0	0	0	67,141
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	67,141	0	0	0	67,141
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	0	0	0	0	0
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	0	0	0	0	0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	0	0	0	0	0
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	0	0	0	0	0	0	0	0	0	0
	Settled during current year:										
18.1	By payment in full	0	0	0	0	0	0	0	0	0	0
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	0	0	0	0	0	0	0	0	0	0
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	0	0	0	0	0	0	0	0	0	0
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	14	9,075,073	0	(a) 0	0	0	0	0	14	9,075,073
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(1)	(499,962)	0	0	0	0	0	0	(1)	(499,962)
23.	In force December 31 of current year	13	8,575,111	0	(a) 0	0	0	0	0	13	8,575,111

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF DELAWARE DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	1,501,575	0	0	0	1,501,575
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	1,501,575	0	0	0	1,501,575
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	380,859	0	0	0	380,859
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	1,582	0	0	0	1,582
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	382,441	0	0	0	382,441
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	50,000	0	0	0	0	0	0	1	50,000
17.	Incurred during current year	7	460,859	0	0	0	0	0	0	7	460,859
	Settled during current year:										
18.1	By payment in full	6	380,859	0	0	0	0	0	0	6	380,859
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	6	380,859	0	0	0	0	0	0	6	380,859
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	6	380,859	0	0	0	0	0	0	6	380,859
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	130,000	0	0	0	0	0	0	2	130,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	191	58,112,457	0	(a) 0	0	0	0	0	191	58,112,457
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(17)	(3,804,767)	0	0	0	0	0	0	(17)	(3,804,767)
23.	In force December 31 of current year	174	54,307,690	0	(a) 0	0	0	0	0	174	54,307,690

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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

DIRECT BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	7,388,557	0	0	0	7,388,557
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	7,388,557	0	0	0	7,388,557
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	22,222,362	0	0	0	22,222,362
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	21,681	0	0	0	21,681
12.	Surrender values and withdrawals for life contracts	471,774	0	0	0	471,774
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	22,715,817	0	0	0	22,715,817
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	6	525,477	0	0	0	0	0	0	6	525,477
17.	Incurred during current year	83	22,741,237	0	0	0	0	0	0	83	22,741,237
	Settled during current year:										
18.1	By payment in full	75	22,222,362	0	0	0	0	0	0	75	22,222,362
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	75	22,222,362	0	0	0	0	0	0	75	22,222,362
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	75	22,222,362	0	0	0	0	0	0	75	22,222,362
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	14	1,044,352	0	0	0	0	0	0	14	1,044,352
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	3,990	1,268,050,805	0	(a) 0	0	0	0	0	3,990	1,268,050,805
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(373)	(106,939,122)	0	0	0	0	0	0	(373)	(106,939,122)
23.	In force December 31 of current year	3,617	1,161,111,683	0	(a) 0	0	0	0	0	3,617	1,161,111,683

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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

DIRECT BUSINESS IN THE STATE OF GEORGIA DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	3,908,232	0	0	0	3,908,232
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	3,908,232	0	0	0	3,908,232
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	8,787,672	0	0	0	8,787,672
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	181,796	0	0	0	181,796
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	0	0	0	0
15.	Totals	8,969,468	0	0	0	8,969,468
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	12	565,310	0	0	0	0	0	0	12	565,310
17.	Incurred during current year	39	13,015,622	0	0	0	0	0	0	39	13,015,622
	Settled during current year:										
18.1	By payment in full	38	8,787,672	0	0	0	0	0	0	38	8,787,672
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	38	8,787,672	0	0	0	0	0	0	38	8,787,672
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	38	8,787,672	0	0	0	0	0	0	38	8,787,672
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	13	4,793,260	0	0	0	0	0	0	13	4,793,260
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	2,687	875,469,423	0	(a) 0	0	0	0	0	2,687	875,469,423
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(213)	(57,294,351)	0	0	0	0	0	0	(213)	(57,294,351)
23.	In force December 31 of current year	2,474	818,175,072	0	(a) 0	0	0	0	0	2,474	818,175,072

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN GRAND TOTAL DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	120,682,165	0	0	0	120,682,165
2.	Annuity considerations	29,553	0	0	0	29,553
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	120,711,718	0	0	0	120,711,718
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	209,517,430	0	0	0	209,517,430
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	617,590	0	0	0	617,590
12.	Surrender values and withdrawals for life contracts	12,106,996	0	0	0	12,106,996
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	80,801	0	0	0	80,801
15.	Totals	222,322,818	0	0	0	222,322,818
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	231	37,360,820	0	0	0	0	0	0	231	37,360,820
17.	Incurred during current year	1,219	218,861,206	0	0	0	0	0	0	1,219	218,861,206
	Settled during current year:										
18.1	By payment in full	1,152	209,517,430	0	0	0	0	0	0	1,152	209,517,430
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	1,152	209,517,430	0	0	0	0	0	0	1,152	209,517,430
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	1,152	209,517,430	0	0	0	0	0	0	1,152	209,517,430
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	298	46,704,596	0	0	0	0	0	0	298	46,704,596
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	81,543	25,714,147,330	0	(a) 0	0	0	0	0	81,543	25,714,147,330
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(6,751)	(1,843,791,049)	0	0	0	0	0	0	(6,751)	(1,843,791,049)
23.	In force December 31 of current year	74,792	23,870,356,281	0	(a) 0	0	0	0	0	74,792	23,870,356,281

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

DIRECT BUSINESS IN GUAM DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	1,063	0	0	0	1,063
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	1,063	0	0	0	1,063
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	0	0	0	0	0
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	0	0	0	0	0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	0	0	0	0	0
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

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

NONE

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF HAWAII DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	309,549	0	0	0	309,549
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	309,549	0	0	0	309,549
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	10,000	0	0	0	10,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	66,981	0	0	0	66,981
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	76,981	0	0	0	76,981
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	2	110,000	0	0	0	0	0	0	2	110,000
	Settled during current year:										
18.1	By payment in full	1	10,000	0	0	0	0	0	0	1	10,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	1	10,000	0	0	0	0	0	0	1	10,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	1	10,000	0	0	0	0	0	0	1	10,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	100,000	0	0	0	0	0	0	1	100,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	208	50,152,173	0	(a) 0	0	0	0	0	208	50,152,173
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(15)	(2,405,700)	0	0	0	0	0	0	(15)	(2,405,700)
23.	In force December 31 of current year	193	47,746,473	0	(a) 0	0	0	0	0	193	47,746,473

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

84530201843016100

DIRECT BUSINESS IN THE STATE OF IOWA DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	1,369,580	0	0	0	1,369,580
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	1,369,580	0	0	0	1,369,580
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	3,102,542	0	0	0	3,102,542
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	92,387	0	0	0	92,387
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	657	0	0	0	657
15.	Totals	3,195,586	0	0	0	3,195,586
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	4	1,094,918	0	0	0	0	0	0	4	1,094,918
17.	Incurred during current year	17	3,162,624	0	0	0	0	0	0	17	3,162,624
	Settled during current year:										
18.1	By payment in full	16	3,102,542	0	0	0	0	0	0	16	3,102,542
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	16	3,102,542	0	0	0	0	0	0	16	3,102,542
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	16	3,102,542	0	0	0	0	0	0	16	3,102,542
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	5	1,155,000	0	0	0	0	0	0	5	1,155,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,329	333,570,627	0	(a) 0	0	0	0	0	1,329	333,570,627
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(83)	(16,964,396)	0	0	0	0	0	0	(83)	(16,964,396)
23.	In force December 31 of current year	1,246	316,606,231	0	(a) 0	0	0	0	0	1,246	316,606,231

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF IDAHO DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	346,192	0	0	0	346,192
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	346,192	0	0	0	346,192
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	450,000	0	0	0	450,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	16,343	0	0	0	16,343
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	466,343	0	0	0	466,343
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	3	450,000	0	0	0	0	0	0	3	450,000
	Settled during current year:										
18.1	By payment in full	3	450,000	0	0	0	0	0	0	3	450,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	3	450,000	0	0	0	0	0	0	3	450,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	3	450,000	0	0	0	0	0	0	3	450,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	230	78,764,776	0	(a) 0	0	0	0	0	230	78,764,776
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(18)	(6,252,541)	0	0	0	0	0	0	(18)	(6,252,541)
23.	In force December 31 of current year	212	72,512,235	0	(a) 0	0	0	0	0	212	72,512,235

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	4,882,938	0	0	0	4,882,938
2.	Annuity considerations	18,443	0	0	0	18,443
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	4,901,381	0	0	0	4,901,381
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	10,015,939	0	0	0	10,015,939
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	419,521	0	0	0	419,521
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	1,590	0	0	0	1,590
15.	Totals	10,437,050	0	0	0	10,437,050
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	7	2,695,939	0	0	0	0	0	0	7	2,695,939
17.	Incurred during current year	40	7,798,000	0	0	0	0	0	0	40	7,798,000
	Settled during current year:										
18.1	By payment in full	43	10,015,939	0	0	0	0	0	0	43	10,015,939
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	43	10,015,939	0	0	0	0	0	0	43	10,015,939
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	43	10,015,939	0	0	0	0	0	0	43	10,015,939
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	4	478,000	0	0	0	0	0	0	4	478,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	3,601	1,334,987,033	0	(a) 0	0	0	0	0	3,601	1,334,987,033
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(278)	(84,549,746)	0	0	0	0	0	0	(278)	(84,549,746)
23.	In force December 31 of current year	3,323	1,250,437,287	0	(a) 0	0	0	0	0	3,323	1,250,437,287

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF INDIANA DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	2,085,973	0	0	0	2,085,973
2.	Annuity considerations	2,200	0	0	0	2,200
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	2,088,173	0	0	0	2,088,173
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,675,926	0	0	0	2,675,926
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	10,944	0	0	0	10,944
12.	Surrender values and withdrawals for life contracts	523,300	0	0	0	523,300
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	3,210,170	0	0	0	3,210,170
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	7	360,670	0	0	0	0	0	0	7	360,670
17.	Incurred during current year	23	3,625,255	0	0	0	0	0	0	23	3,625,255
	Settled during current year:										
18.1	By payment in full	27	2,675,926	0	0	0	0	0	0	27	2,675,926
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	27	2,675,926	0	0	0	0	0	0	27	2,675,926
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	27	2,675,926	0	0	0	0	0	0	27	2,675,926
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	3	1,309,999	0	0	0	0	0	0	3	1,309,999
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,826	500,761,011	0	(a) 0	0	0	0	0	1,826	500,761,011
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(170)	(46,743,926)	0	0	0	0	0	0	(170)	(46,743,926)
23.	In force December 31 of current year	1,656	454,017,085	0	(a) 0	0	0	0	0	1,656	454,017,085

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

84530201843017100

DIRECT BUSINESS IN THE STATE OF KANSAS DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	1,521,981	0	0	0	1,521,981
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	1,521,981	0	0	0	1,521,981
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,014,477	0	0	0	2,014,477
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	137,676	0	0	0	137,676
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	2,152,153	0	0	0	2,152,153
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	3	875,000	0	0	0	0	0	0	3	875,000
17.	Incurred during current year	19	2,014,477	0	0	0	0	0	0	19	2,014,477
	Settled during current year:										
18.1	By payment in full	19	2,014,477	0	0	0	0	0	0	19	2,014,477
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	19	2,014,477	0	0	0	0	0	0	19	2,014,477
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	19	2,014,477	0	0	0	0	0	0	19	2,014,477
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	3	875,000	0	0	0	0	0	0	3	875,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,126	329,734,465	0	(a) 0	0	0	0	0	1,126	329,734,465
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(91)	(19,324,772)	0	0	0	0	0	0	(91)	(19,324,772)
23.	In force December 31 of current year	1,035	310,409,693	0	(a) 0	0	0	0	0	1,035	310,409,693

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

84530201843018100

DIRECT BUSINESS IN THE STATE OF KENTUCKY DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	2,081,582	0	0	0	2,081,582
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	2,081,582	0	0	0	2,081,582
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	3,454,374	0	0	0	3,454,374
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	10,200	0	0	0	10,200
12.	Surrender values and withdrawals for life contracts	52,869	0	0	0	52,869
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	3,517,443	0	0	0	3,517,443
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	11	1,778,990	0	0	0	0	0	0	11	1,778,990
17.	Incurred during current year	15	1,877,500	0	0	0	0	0	0	15	1,877,500
	Settled during current year:										
18.1	By payment in full	23	3,454,374	0	0	0	0	0	0	23	3,454,374
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	23	3,454,374	0	0	0	0	0	0	23	3,454,374
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	23	3,454,374	0	0	0	0	0	0	23	3,454,374
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	3	202,116	0	0	0	0	0	0	3	202,116
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,729	486,450,603	0	(a) 0	0	0	0	0	1,729	486,450,603
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(109)	(29,383,136)	0	0	0	0	0	0	(109)	(29,383,136)
23.	In force December 31 of current year	1,620	457,067,467	0	(a) 0	0	0	0	0	1,620	457,067,467

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

84530201843019100

DIRECT BUSINESS IN THE STATE OF LOUISIANA DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	1,245,619	0	0	0	1,245,619
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	1,245,619	0	0	0	1,245,619
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,202,305	0	0	0	2,202,305
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	130,254	0	0	0	130,254
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	2,332,559	0	0	0	2,332,559
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	89,556	0	0	0	0	0	0	1	89,556
17.	Incurred during current year	9	2,712,749	0	0	0	0	0	0	9	2,712,749
	Settled during current year:										
18.1	By payment in full	8	2,202,305	0	0	0	0	0	0	8	2,202,305
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	8	2,202,305	0	0	0	0	0	0	8	2,202,305
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	8	2,202,305	0	0	0	0	0	0	8	2,202,305
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	600,000	0	0	0	0	0	0	2	600,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	822	254,552,362	0	(a) 0	0	0	0	0	822	254,552,362
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(76)	(19,863,070)	0	0	0	0	0	0	(76)	(19,863,070)
23.	In force December 31 of current year	746	234,689,292	0	(a) 0	0	0	0	0	746	234,689,292

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

84530201843022100

DIRECT BUSINESS IN THE STATE OF MASSACHUSETTS DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	3,423,715	0	0	0	3,423,715
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	3,423,715	0	0	0	3,423,715
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	3,509,643	0	0	0	3,509,643
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	168,582	0	0	0	168,582
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	12,929	0	0	0	12,929
15.	Totals	3,691,154	0	0	0	3,691,154
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	75,000	0	0	0	0	0	0	1	75,000
17.	Incurred during current year	31	4,376,043	0	0	0	0	0	0	31	4,376,043
	Settled during current year:										
18.1	By payment in full	27	3,509,643	0	0	0	0	0	0	27	3,509,643
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	27	3,509,643	0	0	0	0	0	0	27	3,509,643
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	27	3,509,643	0	0	0	0	0	0	27	3,509,643
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	5	941,400	0	0	0	0	0	0	5	941,400
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	2,460	828,109,761	0	(a) 0	0	0	0	0	2,460	828,109,761
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(186)	(44,752,935)	0	0	0	0	0	0	(186)	(44,752,935)
23.	In force December 31 of current year	2,274	783,356,826	0	(a) 0	0	0	0	0	2,274	783,356,826

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

84530201843021100

DIRECT BUSINESS IN THE STATE OF MARYLAND DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	2,048,349	0	0	0	2,048,349
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	2,048,349	0	0	0	2,048,349
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,455,317	0	0	0	1,455,317
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	257,488	0	0	0	257,488
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	760	0	0	0	760
15.	Totals	1,713,564	0	0	0	1,713,564
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	25,000	0	0	0	0	0	0	1	25,000
17.	Incurred during current year	12	1,490,882	0	0	0	0	0	0	12	1,490,882
	Settled during current year:										
18.1	By payment in full	11	1,455,317	0	0	0	0	0	0	11	1,455,317
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	11	1,455,317	0	0	0	0	0	0	11	1,455,317
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	11	1,455,317	0	0	0	0	0	0	11	1,455,317
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	60,565	0	0	0	0	0	0	2	60,565
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,410	475,844,078	0	(a) 0	0	0	0	0	1,410	475,844,078
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(131)	(38,470,734)	0	0	0	0	0	0	(131)	(38,470,734)
23.	In force December 31 of current year	1,279	437,373,344	0	(a) 0	0	0	0	0	1,279	437,373,344

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF MAINE DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	469,393	0	0	0	469,393
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	469,393	0	0	0	469,393
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,330,000	0	0	0	1,330,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	56,000	0	0	0	56,000
12.	Surrender values and withdrawals for life contracts	26,445	0	0	0	26,445
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	1,412,445	0	0	0	1,412,445
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	3	2,050,000	0	0	0	0	0	0	3	2,050,000
17.	Incurred during current year	6	(620,000)	0	0	0	0	0	0	6	(620,000)
	Settled during current year:										
18.1	By payment in full	8	1,330,000	0	0	0	0	0	0	8	1,330,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	8	1,330,000	0	0	0	0	0	0	8	1,330,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	8	1,330,000	0	0	0	0	0	0	8	1,330,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	100,000	0	0	0	0	0	0	1	100,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	458	136,689,937	0	(a) 0	0	0	0	0	458	136,689,937
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(51)	(16,041,343)	0	0	0	0	0	0	(51)	(16,041,343)
23.	In force December 31 of current year	407	120,648,594	0	(a) 0	0	0	0	0	407	120,648,594

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	7,069,366	0	0	0	7,069,366
2.	Annuity considerations	1,660	0	0	0	1,660
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	7,071,026	0	0	0	7,071,026
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	6,896,715	0	0	0	6,896,715
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	218,076	0	0	0	218,076
12.	Surrender values and withdrawals for life contracts	1,140,960	0	0	0	1,140,960
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	30,649	0	0	0	30,649
15.	Totals	8,286,401	0	0	0	8,286,401
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	24	497,438	0	0	0	0	0	0	24	497,438
17.	Incurred during current year	63	7,876,727	0	0	0	0	0	0	63	7,876,727
	Settled during current year:										
18.1	By payment in full	67	6,896,715	0	0	0	0	0	0	67	6,896,715
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	67	6,896,715	0	0	0	0	0	0	67	6,896,715
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	67	6,896,715	0	0	0	0	0	0	67	6,896,715
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	20	1,477,450	0	0	0	0	0	0	20	1,477,450
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	5,189	1,432,355,122	0	(a) 0	0	0	0	0	5,189	1,432,355,122
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(416)	(86,862,095)	0	0	0	0	0	0	(416)	(86,862,095)
23.	In force December 31 of current year	4,773	1,345,493,027	0	(a) 0	0	0	0	0	4,773	1,345,493,027

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF MINNESOTA DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	5,347,409	0	0	0	5,347,409
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	5,347,409	0	0	0	5,347,409
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,959,283	0	0	0	2,959,283
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	11,497	0	0	0	11,497
12.	Surrender values and withdrawals for life contracts	203,986	0	0	0	203,986
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	3,174,766	0	0	0	3,174,766
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	5	4,200,283	0	0	0	0	0	0	5	4,200,283
17.	Incurred during current year	8	(641,000)	0	0	0	0	0	0	8	(641,000)
	Settled during current year:										
18.1	By payment in full	11	2,959,283	0	0	0	0	0	0	11	2,959,283
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	11	2,959,283	0	0	0	0	0	0	11	2,959,283
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	11	2,959,283	0	0	0	0	0	0	11	2,959,283
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	600,000	0	0	0	0	0	0	2	600,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,289	513,859,886	0	(a) 0	0	0	0	0	1,289	513,859,886
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(89)	(27,722,372)	0	0	0	0	0	0	(89)	(27,722,372)
23.	In force December 31 of current year	1,200	486,137,514	0	(a) 0	0	0	0	0	1,200	486,137,514

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

* 8 4 5 3 0 2 0 1 8 4 3 0 2 6 1 0 0 *

DIRECT BUSINESS IN THE STATE OF MISSOURI DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	2,509,170	0	0	0	2,509,170
2.	Annuity considerations	6,050	0	0	0	6,050
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	2,515,220	0	0	0	2,515,220
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	3,323,995	0	0	0	3,323,995
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	3,542	0	0	0	3,542
12.	Surrender values and withdrawals for life contracts	206,808	0	0	0	206,808
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	1,783	0	0	0	1,783
15.	Totals	3,536,127	0	0	0	3,536,127
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	2	625,078	0	0	0	0	0	0	2	625,078
17.	Incurred during current year	36	3,482,671	0	0	0	0	0	0	36	3,482,671
	Settled during current year:										
18.1	By payment in full	29	3,323,995	0	0	0	0	0	0	29	3,323,995
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	29	3,323,995	0	0	0	0	0	0	29	3,323,995
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	29	3,323,995	0	0	0	0	0	0	29	3,323,995
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	9	783,754	0	0	0	0	0	0	9	783,754
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,977	559,052,211	0	(a) 0	0	0	0	0	1,977	559,052,211
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(161)	(32,197,787)	0	0	0	0	0	0	(161)	(32,197,787)
23.	In force December 31 of current year	1,816	526,854,424	0	(a) 0	0	0	0	0	1,816	526,854,424

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

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

NONE

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

NONE

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF MISSISSIPPI DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	1,807,029	0	0	0	1,807,029
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	1,807,029	0	0	0	1,807,029
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,994,204	0	0	0	2,994,204
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	4,800	0	0	0	4,800
12.	Surrender values and withdrawals for life contracts	113,841	0	0	0	113,841
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	3,112,845	0	0	0	3,112,845
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	4	795,000	0	0	0	0	0	0	4	795,000
17.	Incurred during current year	11	3,256,041	0	0	0	0	0	0	11	3,256,041
	Settled during current year:										
18.1	By payment in full	13	2,994,204	0	0	0	0	0	0	13	2,994,204
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	13	2,994,204	0	0	0	0	0	0	13	2,994,204
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	13	2,994,204	0	0	0	0	0	0	13	2,994,204
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	1,056,837	0	0	0	0	0	0	2	1,056,837
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,338	384,573,421	0	(a) 0	0	0	0	0	1,338	384,573,421
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(104)	(28,029,520)	0	0	0	0	0	0	(104)	(28,029,520)
23.	In force December 31 of current year	1,234	356,543,901	0	(a) 0	0	0	0	0	1,234	356,543,901

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

DIRECT BUSINESS IN THE STATE OF MONTANA DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	444,829	0	0	0	444,829
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	444,829	0	0	0	444,829
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	330,000	0	0	0	330,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	18,878	0	0	0	18,878
12.	Surrender values and withdrawals for life contracts	25,178	0	0	0	25,178
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	374,056	0	0	0	374,056
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	4	410,000	0	0	0	0	0	0	4	410,000
	Settled during current year:										
18.1	By payment in full	3	330,000	0	0	0	0	0	0	3	330,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	3	330,000	0	0	0	0	0	0	3	330,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	3	330,000	0	0	0	0	0	0	3	330,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	80,000	0	0	0	0	0	0	1	80,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	320	69,496,193	0	(a) 0	0	0	0	0	320	69,496,193
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(23)	(3,014,177)	0	0	0	0	0	0	(23)	(3,014,177)
23.	In force December 31 of current year	297	66,482,016	0	(a) 0	0	0	0	0	297	66,482,016

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	5,466,499	0	0	0	5,466,499
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	5,466,499	0	0	0	5,466,499
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	10,255,872	0	0	0	10,255,872
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	3,850	0	0	0	3,850
12.	Surrender values and withdrawals for life contracts	559,565	0	0	0	559,565
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	5,775	0	0	0	5,775
15.	Totals	10,825,062	0	0	0	10,825,062
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	7	390,000	0	0	0	0	0	0	7	390,000
17.	Incurred during current year	100	16,028,194	0	0	0	0	0	0	100	16,028,194
	Settled during current year:										
18.1	By payment in full	79	10,255,872	0	0	0	0	0	0	79	10,255,872
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	79	10,255,872	0	0	0	0	0	0	79	10,255,872
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	79	10,255,872	0	0	0	0	0	0	79	10,255,872
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	28	6,162,322	0	0	0	0	0	0	28	6,162,322
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	3,595	883,859,360	0	(a) 0	0	0	0	0	3,595	883,859,360
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(317)	(71,958,116)	0	0	0	0	0	0	(317)	(71,958,116)
23.	In force December 31 of current year	3,278	811,901,244	0	(a) 0	0	0	0	0	3,278	811,901,244

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

84530201843035100

DIRECT BUSINESS IN THE STATE OF NORTH DAKOTA DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	711,156	0	0	0	711,156
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	711,156	0	0	0	711,156
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	642,433	0	0	0	642,433
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	216,652	0	0	0	216,652
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	859,085	0	0	0	859,085
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	5	110,433	0	0	0	0	0	0	5	110,433
17.	Incurred during current year	2	532,000	0	0	0	0	0	0	2	532,000
	Settled during current year:										
18.1	By payment in full	7	642,433	0	0	0	0	0	0	7	642,433
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	7	642,433	0	0	0	0	0	0	7	642,433
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	7	642,433	0	0	0	0	0	0	7	642,433
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	577	166,336,062	0	(a) 0	0	0	0	0	577	166,336,062
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(49)	(13,095,126)	0	0	0	0	0	0	(49)	(13,095,126)
23.	In force December 31 of current year	528	153,240,936	0	(a) 0	0	0	0	0	528	153,240,936

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

84530201843028100

DIRECT BUSINESS IN THE STATE OF NEBRASKA DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	889,645	0	0	0	889,645
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	889,645	0	0	0	889,645
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,250,000	0	0	0	1,250,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	142,740	0	0	0	142,740
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	1,392,740	0	0	0	1,392,740
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	3	230,000	0	0	0	0	0	0	3	230,000
17.	Incurred during current year	10	1,270,000	0	0	0	0	0	0	10	1,270,000
	Settled during current year:										
18.1	By payment in full	12	1,250,000	0	0	0	0	0	0	12	1,250,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	12	1,250,000	0	0	0	0	0	0	12	1,250,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	12	1,250,000	0	0	0	0	0	0	12	1,250,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	250,000	0	0	0	0	0	0	1	250,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	791	218,238,539	0	(a) 0	0	0	0	0	791	218,238,539
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(54)	(13,597,617)	0	0	0	0	0	0	(54)	(13,597,617)
23.	In force December 31 of current year	737	204,640,922	0	(a) 0	0	0	0	0	737	204,640,922

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

DIRECT BUSINESS IN THE STATE OF NEW HAMPSHIRE DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	487,341	0	0	0	487,341
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	487,341	0	0	0	487,341
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	655,000	0	0	0	655,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	22,688	0	0	0	22,688
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	677,688	0	0	0	677,688
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	4	405,000	0	0	0	0	0	0	4	405,000
17.	Incurred during current year	1	250,000	0	0	0	0	0	0	1	250,000
	Settled during current year:										
18.1	By payment in full	5	655,000	0	0	0	0	0	0	5	655,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	5	655,000	0	0	0	0	0	0	5	655,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	5	655,000	0	0	0	0	0	0	5	655,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	429	132,873,978	0	(a) 0	0	0	0	0	429	132,873,978
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(28)	(8,893,255)	0	0	0	0	0	0	(28)	(8,893,255)
23.	In force December 31 of current year	401	123,980,723	0	(a) 0	0	0	0	0	401	123,980,723

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

84530201843031100

DIRECT BUSINESS IN THE STATE OF NEW JERSEY DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	3,328,783	0	0	0	3,328,783
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	3,328,783	0	0	0	3,328,783
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	6,215,000	0	0	0	6,215,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	742,631	0	0	0	742,631
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	6,957,631	0	0	0	6,957,631
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	7	794,000	0	0	0	0	0	0	7	794,000
17.	Incurred during current year	17	5,765,000	0	0	0	0	0	0	17	5,765,000
	Settled during current year:										
18.1	By payment in full	17	6,215,000	0	0	0	0	0	0	17	6,215,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	17	6,215,000	0	0	0	0	0	0	17	6,215,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	17	6,215,000	0	0	0	0	0	0	17	6,215,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	7	344,000	0	0	0	0	0	0	7	344,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,826	827,909,091	0	(a) 0	0	0	0	0	1,826	827,909,091
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(134)	(59,365,069)	0	0	0	0	0	0	(134)	(59,365,069)
23.	In force December 31 of current year	1,692	768,544,022	0	(a) 0	0	0	0	0	1,692	768,544,022

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF NEW MEXICO DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	502,387	0	0	0	502,387
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	502,387	0	0	0	502,387
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	345,000	0	0	0	345,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	24,795	0	0	0	24,795
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	369,795	0	0	0	369,795
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	8	591,783	0	0	0	0	0	0	8	591,783
	Settled during current year:										
18.1	By payment in full	4	345,000	0	0	0	0	0	0	4	345,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	4	345,000	0	0	0	0	0	0	4	345,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	4	345,000	0	0	0	0	0	0	4	345,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	4	246,783	0	0	0	0	0	0	4	246,783
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	324	87,947,677	0	(a) 0	0	0	0	0	324	87,947,677
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(34)	(8,821,603)	0	0	0	0	0	0	(34)	(8,821,603)
23.	In force December 31 of current year	290	79,126,074	0	(a) 0	0	0	0	0	290	79,126,074

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF NEVADA DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	484,482	0	0	0	484,482
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	484,482	0	0	0	484,482
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	108,000	0	0	0	108,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	21,293	0	0	0	21,293
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	129,293	0	0	0	129,293
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	100,000	0	0	0	0	0	0	1	100,000
17.	Incurred during current year	2	708,000	0	0	0	0	0	0	2	708,000
	Settled during current year:										
18.1	By payment in full	1	108,000	0	0	0	0	0	0	1	108,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	1	108,000	0	0	0	0	0	0	1	108,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	1	108,000	0	0	0	0	0	0	1	108,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	700,000	0	0	0	0	0	0	2	700,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	171	65,804,430	0	(a) 0	0	0	0	0	171	65,804,430
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(11)	(3,507,726)	0	0	0	0	0	0	(11)	(3,507,726)
23.	In force December 31 of current year	160	62,296,704	0	(a) 0	0	0	0	0	160	62,296,704

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

84530201843033100

DIRECT BUSINESS IN THE STATE OF NEW YORK DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	674,133	0	0	0	674,133
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	674,133	0	0	0	674,133
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	0	0	0	0	0
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	6,150	0	0	0	6,150
12.	Surrender values and withdrawals for life contracts	0	0	0	0	0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	6,150	0	0	0	6,150
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

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

NONE

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

84530201843036100

DIRECT BUSINESS IN THE STATE OF OHIO DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	6,808,955	0	0	0	6,808,955
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	6,808,955	0	0	0	6,808,955
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	13,150,536	0	0	0	13,150,536
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	71,559	0	0	0	71,559
12.	Surrender values and withdrawals for life contracts	735,297	0	0	0	735,297
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	13,957,392	0	0	0	13,957,392
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	10	944,806	0	0	0	0	0	0	10	944,806
17.	Incurred during current year	107	13,562,400	0	0	0	0	0	0	107	13,562,400
	Settled during current year:										
18.1	By payment in full	99	13,150,536	0	0	0	0	0	0	99	13,150,536
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	99	13,150,536	0	0	0	0	0	0	99	13,150,536
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	99	13,150,536	0	0	0	0	0	0	99	13,150,536
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	18	1,356,670	0	0	0	0	0	0	18	1,356,670
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	5,781	1,610,096,717	0	(a) 0	0	0	0	0	5,781	1,610,096,717
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(510)	(128,206,890)	0	0	0	0	0	0	(510)	(128,206,890)
23.	In force December 31 of current year	5,271	1,481,889,827	0	(a) 0	0	0	0	0	5,271	1,481,889,827

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

84530201843037100

DIRECT BUSINESS IN THE STATE OF OKLAHOMA DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	1,204,618	0	0	0	1,204,618
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	1,204,618	0	0	0	1,204,618
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	3,876,975	0	0	0	3,876,975
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	21,046	0	0	0	21,046
12.	Surrender values and withdrawals for life contracts	19,476	0	0	0	19,476
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	3,917,497	0	0	0	3,917,497
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	2	168,500	0	0	0	0	0	0	2	168,500
17.	Incurred during current year	13	4,058,475	0	0	0	0	0	0	13	4,058,475
	Settled during current year:										
18.1	By payment in full	14	3,876,975	0	0	0	0	0	0	14	3,876,975
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	14	3,876,975	0	0	0	0	0	0	14	3,876,975
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	14	3,876,975	0	0	0	0	0	0	14	3,876,975
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	350,000	0	0	0	0	0	0	1	350,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	868	247,373,689	0	(a) 0	0	0	0	0	868	247,373,689
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(78)	(24,337,306)	0	0	0	0	0	0	(78)	(24,337,306)
23.	In force December 31 of current year	790	223,036,383	0	(a) 0	0	0	0	0	790	223,036,383

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF OREGON DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	1,027,557	0	0	0	1,027,557
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	1,027,557	0	0	0	1,027,557
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	695,750	0	0	0	695,750
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	14,400	0	0	0	14,400
12.	Surrender values and withdrawals for life contracts	166,977	0	0	0	166,977
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	877,127	0	0	0	877,127
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	10	27,500	0	0	0	0	0	0	10	27,500
17.	Incurred during current year	10	717,000	0	0	0	0	0	0	10	717,000
	Settled during current year:										
18.1	By payment in full	7	695,750	0	0	0	0	0	0	7	695,750
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	7	695,750	0	0	0	0	0	0	7	695,750
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	7	695,750	0	0	0	0	0	0	7	695,750
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	13	48,750	0	0	0	0	0	0	13	48,750
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	807	263,074,795	0	(a) 0	0	0	0	0	807	263,074,795
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(67)	(22,756,091)	0	0	0	0	0	0	(67)	(22,756,091)
23.	In force December 31 of current year	740	240,318,704	0	(a) 0	0	0	0	0	740	240,318,704

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN OTHER ALIEN GRAND TOTAL DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	48,581	0	0	0	48,581
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	48,581	0	0	0	48,581
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	0	0	0	0	0
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	0	0	0	0	0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	0	0	0	0	0
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

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

NONE

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	5,838,678	0	0	0	5,838,678
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	5,838,678	0	0	0	5,838,678
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	11,025,022	0	0	0	11,025,022
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	18,000	0	0	0	18,000
12.	Surrender values and withdrawals for life contracts	533,258	0	0	0	533,258
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	2,791	0	0	0	2,791
15.	Totals	11,579,070	0	0	0	11,579,070
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	19	925,355	0	0	0	0	0	0	19	925,355
17.	Incurred during current year	72	11,221,688	0	0	0	0	0	0	72	11,221,688
	Settled during current year:										
18.1	By payment in full	70	11,025,022	0	0	0	0	0	0	70	11,025,022
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	70	11,025,022	0	0	0	0	0	0	70	11,025,022
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	70	11,025,022	0	0	0	0	0	0	70	11,025,022
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	21	1,122,022	0	0	0	0	0	0	21	1,122,022
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	4,938	1,465,001,379	0	(a) 0	0	0	0	0	4,938	1,465,001,379
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(411)	(104,503,294)	0	0	0	0	0	0	(411)	(104,503,294)
23.	In force December 31 of current year	4,527	1,360,498,085	0	(a) 0	0	0	0	0	4,527	1,360,498,085

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN PUERTO RICO DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	3,865	0	0	0	3,865
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	3,865	0	0	0	3,865
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	0	0	0	0	0
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	0	0	0	0	0
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	0	0	0	0	0
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

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

NONE

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

84530201843040100

DIRECT BUSINESS IN THE STATE OF RHODE ISLAND DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	507,513	0	0	0	507,513
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	507,513	0	0	0	507,513
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,789,000	0	0	0	1,789,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	1,560	0	0	0	1,560
12.	Surrender values and withdrawals for life contracts	68,851	0	0	0	68,851
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	1,859,411	0	0	0	1,859,411
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	11	2,858,929	0	0	0	0	0	0	11	2,858,929
	Settled during current year:										
18.1	By payment in full	9	1,789,000	0	0	0	0	0	0	9	1,789,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	9	1,789,000	0	0	0	0	0	0	9	1,789,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	9	1,789,000	0	0	0	0	0	0	9	1,789,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	2	1,069,929	0	0	0	0	0	0	2	1,069,929
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	511	145,928,135	0	(a) 0	0	0	0	0	511	145,928,135
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(43)	(11,525,446)	0	0	0	0	0	0	(43)	(11,525,446)
23.	In force December 31 of current year	468	134,402,689	0	(a) 0	0	0	0	0	468	134,402,689

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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

DIRECT BUSINESS IN THE STATE OF SOUTH CAROLINA DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	2,269,555	0	0	0	2,269,555
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	2,269,555	0	0	0	2,269,555
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	4,279,397	0	0	0	4,279,397
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	49,957	0	0	0	49,957
12.	Surrender values and withdrawals for life contracts	283,257	0	0	0	283,257
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	2,885	0	0	0	2,885
15.	Totals	4,615,496	0	0	0	4,615,496
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	5	975,000	0	0	0	0	0	0	5	975,000
17.	Incurred during current year	28	4,130,019	0	0	0	0	0	0	28	4,130,019
	Settled during current year:										
18.1	By payment in full	24	4,279,397	0	0	0	0	0	0	24	4,279,397
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	24	4,279,397	0	0	0	0	0	0	24	4,279,397
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	24	4,279,397	0	0	0	0	0	0	24	4,279,397
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	9	825,622	0	0	0	0	0	0	9	825,622
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,524	405,489,776	0	(a) 0	0	0	0	0	1,524	405,489,776
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(147)	(30,912,179)	0	0	0	0	0	0	(147)	(30,912,179)
23.	In force December 31 of current year	1,377	374,577,597	0	(a) 0	0	0	0	0	1,377	374,577,597

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF SOUTH DAKOTA DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	951,609	0	0	0	951,609
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	951,609	0	0	0	951,609
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	715,000	0	0	0	715,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	32,816	0	0	0	32,816
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	747,816	0	0	0	747,816
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	2	200,000	0	0	0	0	0	0	2	200,000
17.	Incurred during current year	10	660,000	0	0	0	0	0	0	10	660,000
	Settled during current year:										
18.1	By payment in full	8	715,000	0	0	0	0	0	0	8	715,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	8	715,000	0	0	0	0	0	0	8	715,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	8	715,000	0	0	0	0	0	0	8	715,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	4	145,000	0	0	0	0	0	0	4	145,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	806	212,192,045	0	(a) 0	0	0	0	0	806	212,192,045
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(62)	(12,113,841)	0	0	0	0	0	0	(62)	(12,113,841)
23.	In force December 31 of current year	744	200,078,204	0	(a) 0	0	0	0	0	744	200,078,204

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF TENNESSEE DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	4,238,075	0	0	0	4,238,075
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	4,238,075	0	0	0	4,238,075
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	5,839,629	0	0	0	5,839,629
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	418,261	0	0	0	418,261
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	6,257,890	0	0	0	6,257,890
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	16	634,867	0	0	0	0	0	0	16	634,867
17.	Incurred during current year	37	6,763,477	0	0	0	0	0	0	37	6,763,477
	Settled during current year:										
18.1	By payment in full	35	5,839,629	0	0	0	0	0	0	35	5,839,629
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	35	5,839,629	0	0	0	0	0	0	35	5,839,629
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	35	5,839,629	0	0	0	0	0	0	35	5,839,629
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	18	1,558,715	0	0	0	0	0	0	18	1,558,715
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	3,225	1,097,889,729	0	(a) 0	0	0	0	0	3,225	1,097,889,729
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(242)	(65,298,367)	0	0	0	0	0	0	(242)	(65,298,367)
23.	In force December 31 of current year	2,983	1,032,591,362	0	(a) 0	0	0	0	0	2,983	1,032,591,362

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF TEXAS DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	10,427,669	0	0	0	10,427,669
2.	Annuity considerations	1,200	0	0	0	1,200
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	10,428,869	0	0	0	10,428,869
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	22,433,330	0	0	0	22,433,330
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	31,952	0	0	0	31,952
12.	Surrender values and withdrawals for life contracts	955,861	0	0	0	955,861
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	463	0	0	0	463
15.	Totals	23,421,607	0	0	0	23,421,607
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	17	10,255,000	0	0	0	0	0	0	17	10,255,000
17.	Incurred during current year	116	21,545,595	0	0	0	0	0	0	116	21,545,595
	Settled during current year:										
18.1	By payment in full	100	22,433,330	0	0	0	0	0	0	100	22,433,330
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	100	22,433,330	0	0	0	0	0	0	100	22,433,330
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	100	22,433,330	0	0	0	0	0	0	100	22,433,330
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	33	9,367,265	0	0	0	0	0	0	33	9,367,265
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	6,050	2,110,698,853	0	(a) 0	0	0	0	0	6,050	2,110,698,853
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(502)	(157,186,460)	0	0	0	0	0	0	(502)	(157,186,460)
23.	In force December 31 of current year	5,548	1,953,512,393	0	(a) 0	0	0	0	0	5,548	1,953,512,393

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF UTAH DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	893,836	0	0	0	893,836
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	893,836	0	0	0	893,836
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,250,000	0	0	0	1,250,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	9,213	0	0	0	9,213
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	1,259,213	0	0	0	1,259,213
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	125,000	0	0	0	0	0	0	1	125,000
17.	Incurred during current year	9	1,175,000	0	0	0	0	0	0	9	1,175,000
	Settled during current year:										
18.1	By payment in full	9	1,250,000	0	0	0	0	0	0	9	1,250,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	9	1,250,000	0	0	0	0	0	0	9	1,250,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	9	1,250,000	0	0	0	0	0	0	9	1,250,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	50,000	0	0	0	0	0	0	1	50,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	566	173,786,690	0	(a) 0	0	0	0	0	566	173,786,690
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(37)	(7,549,119)	0	0	0	0	0	0	(37)	(7,549,119)
23.	In force December 31 of current year	529	166,237,571	0	(a) 0	0	0	0	0	529	166,237,571

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF VIRGINIA DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	1,709,092	0	0	0	1,709,092
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	1,709,092	0	0	0	1,709,092
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,470,000	0	0	0	1,470,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	15,600	0	0	0	15,600
12.	Surrender values and withdrawals for life contracts	115,508	0	0	0	115,508
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	1,601,108	0	0	0	1,601,108
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	150,000	0	0	0	0	0	0	1	150,000
17.	Incurred during current year	17	1,380,000	0	0	0	0	0	0	17	1,380,000
	Settled during current year:										
18.1	By payment in full	15	1,470,000	0	0	0	0	0	0	15	1,470,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	15	1,470,000	0	0	0	0	0	0	15	1,470,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	15	1,470,000	0	0	0	0	0	0	15	1,470,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	3	60,000	0	0	0	0	0	0	3	60,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,174	388,386,570	0	(a) 0	0	0	0	0	1,174	388,386,570
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(102)	(27,341,180)	0	0	0	0	0	0	(102)	(27,341,180)
23.	In force December 31 of current year	1,072	361,045,390	0	(a) 0	0	0	0	0	1,072	361,045,390

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

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

NONE

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

NONE

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF VERMONT DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	197,326	0	0	0	197,326
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	197,326	0	0	0	197,326
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,000,000	0	0	0	1,000,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	874,564	0	0	0	874,564
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	1,874,564	0	0	0	1,874,564
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	2	1,000,000	0	0	0	0	0	0	2	1,000,000
	Settled during current year:										
18.1	By payment in full	2	1,000,000	0	0	0	0	0	0	2	1,000,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	2	1,000,000	0	0	0	0	0	0	2	1,000,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	2	1,000,000	0	0	0	0	0	0	2	1,000,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	86	36,112,233	0	(a) 0	0	0	0	0	86	36,112,233
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(4)	(4,249,880)	0	0	0	0	0	0	(4)	(4,249,880)
23.	In force December 31 of current year	82	31,862,353	0	(a) 0	0	0	0	0	82	31,862,353

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF WASHINGTON DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	2,136,387	0	0	0	2,136,387
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	2,136,387	0	0	0	2,136,387
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,856,248	0	0	0	1,856,248
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	95,745	0	0	0	95,745
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	1,951,993	0	0	0	1,951,993
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	4	650,000	0	0	0	0	0	0	4	650,000
17.	Incurred during current year	11	1,206,248	0	0	0	0	0	0	11	1,206,248
	Settled during current year:										
18.1	By payment in full	15	1,856,248	0	0	0	0	0	0	15	1,856,248
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	15	1,856,248	0	0	0	0	0	0	15	1,856,248
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	15	1,856,248	0	0	0	0	0	0	15	1,856,248
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,460	495,599,882	0	(a) 0	0	0	0	0	1,460	495,599,882
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(150)	(40,126,619)	0	0	0	0	0	0	(150)	(40,126,619)
23.	In force December 31 of current year	1,310	455,473,263	0	(a) 0	0	0	0	0	1,310	455,473,263

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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

DIRECT BUSINESS IN THE STATE OF WISCONSIN DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	2,118,225	0	0	0	2,118,225
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	2,118,225	0	0	0	2,118,225
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	6,048,243	0	0	0	6,048,243
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	9,000	0	0	0	9,000
12.	Surrender values and withdrawals for life contracts	211,563	0	0	0	211,563
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	6,268,807	0	0	0	6,268,807
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	6	255,619	0	0	0	0	0	0	6	255,619
17.	Incurred during current year	26	6,362,216	0	0	0	0	0	0	26	6,362,216
	Settled during current year:										
18.1	By payment in full	27	6,048,243	0	0	0	0	0	0	27	6,048,243
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	27	6,048,243	0	0	0	0	0	0	27	6,048,243
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	27	6,048,243	0	0	0	0	0	0	27	6,048,243
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	5	569,592	0	0	0	0	0	0	5	569,592
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	1,877	494,726,421	0	(a) 0	0	0	0	0	1,877	494,726,421
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(139)	(33,905,465)	0	0	0	0	0	0	(139)	(33,905,465)
23.	In force December 31 of current year	1,738	460,820,956	0	(a) 0	0	0	0	0	1,738	460,820,956

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

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DIRECT BUSINESS IN THE STATE OF WEST VIRGINIA DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	300,708	0	0	0	300,708
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	300,708	0	0	0	300,708
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	356,690	0	0	0	356,690
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	0	0	0	0	0
12.	Surrender values and withdrawals for life contracts	5,832	0	0	0	5,832
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	2,031	0	0	0	2,031
15.	Totals	364,552	0	0	0	364,552
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	1	25,000	0	0	0	0	0	0	1	25,000
17.	Incurred during current year	3	481,690	0	0	0	0	0	0	3	481,690
	Settled during current year:										
18.1	By payment in full	3	356,690	0	0	0	0	0	0	3	356,690
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	3	356,690	0	0	0	0	0	0	3	356,690
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	3	356,690	0	0	0	0	0	0	3	356,690
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	150,000	0	0	0	0	0	0	1	150,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	266	67,474,866	0	(a) 0	0	0	0	0	266	67,474,866
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(21)	(5,134,086)	0	0	0	0	0	0	(21)	(5,134,086)
23.	In force December 31 of current year	245	62,340,780	0	(a) 0	0	0	0	0	245	62,340,780

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

DIRECT BUSINESS IN THE STATE OF WYOMING DURING THE YEAR

NAIC Group Code.....968 NAIC Company Code.....84530

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance	190,990	0	0	0	190,990
2.	Annuity considerations	0	0	0	0	0
3.	Deposit-type contract funds	0	XXX	0	XXX	0
4.	Other considerations	0	0	0	0	0
5.	Totals (Sum of Lines 1 to 4)	190,990	0	0	0	190,990
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
6.1	Paid in cash or left on deposit	0	0	0	0	0
6.2	Applied to pay renewal premiums	0	0	0	0	0
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0
6.4	Other	0	0	0	0	0
6.5	Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0
	Annuities:					
7.1	Paid in cash or left on deposit	0	0	0	0	0
7.2	Applied to provide paid-up annuities	0	0	0	0	0
7.3	Other	0	0	0	0	0
7.4	Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8.	Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	725,000	0	0	0	725,000
10.	Matured endowments	0	0	0	0	0
11.	Annuity benefits	6,900	0	0	0	6,900
12.	Surrender values and withdrawals for life contracts	75,283	0	0	0	75,283
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14.	All other benefits, except accident and health	0	0	0	0	0
15.	Totals	807,183	0	0	0	807,183
	DETAILS OF WRITE-INS					
1301.		0	0	0	0	0
1302.		0	0	0	0	0
1303.		0	0	0	0	0
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399.	Total (Lines 1301 through 1303 plus 1398)(Line 13 above)	0	0	0	0	0

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
		1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17.	Incurred during current year	4	825,000	0	0	0	0	0	0	4	825,000
	Settled during current year:										
18.1	By payment in full	3	725,000	0	0	0	0	0	0	3	725,000
18.2	By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3	Totals paid	3	725,000	0	0	0	0	0	0	3	725,000
18.4	Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5	Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6	Total settlements	3	725,000	0	0	0	0	0	0	3	725,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	1	100,000	0	0	0	0	0	0	1	100,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year	138	54,735,978	0	(a) 0	0	0	0	0	138	54,735,978
21.	Issued during year	0	0	0	0	0	0	0	0	0	0
22.	Other changes to in force (Net)	(13)	(4,724,796)	0	0	0	0	0	0	(13)	(4,724,796)
23.	In force December 31 of current year	125	50,011,182	0	(a) 0	0	0	0	0	125	50,011,182

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

ACCIDENT AND HEALTH INSURANCE

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

NONE

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

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

Interest Maintenance Reserve

	1 Amount
1. Reserve as of December 31, prior year	740,871
2. Current year's realized pre-tax capital gains/(losses) of $.....401,133 transferred into the reserve net of taxes of $.....84,238	316,895
3. Adjustment for current year's liability gains/(losses) released from the reserve	0
4. Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3)	1,057,766
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)	178,185
6. Reserve as of December 31, current year (Line 4 minus Line 5)	879,581

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. 2018	113,861	64,324	0	178,185
2. 2019	86,048	101,886	0	187,934
3. 2020	72,859	89,477	0	162,336
4. 2021	80,873	61,372	0	142,245
5. 2022	74,911	32,364	0	107,275
6. 2023	59,323	2,050	0	61,373
7. 2024	49,018	(12,097)	0	36,920
8. 2025	38,922	(9,678)	0	29,244
9. 2026	27,982	(7,057)	0	20,925
10. 2027	22,753	(4,335)	0	18,418
11. 2028	23,432	(1,411)	0	22,020
12. 2029	22,386	0	0	22,386
13. 2030	21,268	0	0	21,268
14. 2031	17,775	0	0	17,775
15. 2032	13,286	0	0	13,286
16. 2033	9,308	0	0	9,308
17. 2034	5,164	0	0	5,164
18. 2035	1,706	0	0	1,706
19. 2036	0	0	0	0
20. 2037	0	0	0	0
21. 2038	0	0	0	0
22. 2039	0	0	0	0
23. 2040	0	0	0	0
24. 2041	0	0	0	0
25. 2042	0	0	0	0
26. 2043	0	0	0	0
27. 2044	0	0	0	0
28. 2045	0	0	0	0
29. 2046	0	0	0	0
30. 2047	0	0	0	0
31. 2048 and Later	0	0	0	0
32. Total (Lines 1 to 31)	740,872	316,895	0	1,057,767

ASSET VALUATION RESERVE

	Default Component			Equity Component			7
	1 Other Than Mortgage Loans	2 Mortgage Loans	3 Total (Cols. 1 + 2)	4 Common Stock	5 Real Estate and Other Invested Assets	6 Total (Cols. 4 + 5)	Total Amount (Cols. 3 + 6)
1. Reserve as of December 31, prior year	2,441,719	0	2,441,719	0	0	0	2,441,719
2. Realized capital gains/(losses) net of taxes - General Account	(212,423)	0	(212,423)	0	0	0	(212,423)
3. Realized capital gains/(losses) net of taxes - Separate Accounts	0	0	0	0	0	0	0
4. Unrealized capital gains/(losses) - net of deferred taxes - General Account	(78,415)	0	(78,415)	0	0	0	(78,415)
5. Unrealized capital gains/(losses) - net of deferred taxes - Separate Accounts	0	0	0	0	0	0	0
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves	0	0	0	0	0	0	0
7. Basic contribution	447,420	0	447,420	0	0	0	447,420
8. Accumulated balances (Lines 1 through 5, minus 6 plus 7)	2,598,301	0	2,598,301	0	0	0	2,598,301
9. Maximum reserve	2,378,506	0	2,378,506	0	0	0	2,378,506
10. Reserve objective	1,619,153	0	1,619,153	0	0	0	1,619,153
11. 20% of (Line 10 minus Line 8)	(195,829)	0	(195,829)	0	0	0	(195,829)
12. Balance before transfers (Lines 8 + 11)	2,402,471	0	2,402,471	0	0	0	2,402,471
13. Transfers	0	0	0	0	0	0	0
14. Voluntary contribution	0	0	0	0	0	0	0
15. Adjustment down to maximum/up to zero	(23,965)	0	(23,965)	0	0	0	(23,965)
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	2,378,506	0	2,378,506	0	0	0	2,378,506

ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

Line Number	NAIC Desig-nation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
		LONG-TERM BONDS										
1		Exempt obligations	25,535,759	XXX	XXX	25,535,759	0.0000	0	0.0000	0	0.0000	0
2	1	Highest quality	220,534,581	XXX	XXX	220,534,581	0.0004	88,214	0.0023	507,230	0.0030	661,604
3	2	High quality	185,065,165	XXX	XXX	185,065,165	0.0019	351,624	0.0058	1,073,378	0.0090	1,665,586
4	3	Medium quality	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
5	4	Low quality	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
6	5	Lower quality	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
7	6	In or near default	77,000	XXX	XXX	77,000	0.0000	0	0.2000	15,400	0.2000	15,400
8		Total unrated multi-class securities acquired by conversion	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
9		Total long-term bonds (sum of Lines 1 through 8)	431,212,506	XXX	XXX	431,212,506	XXX	439,838	XXX	1,596,007	XXX	2,342,590
		PREFERRED STOCKS										
10	1	Highest quality	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
11	2	High quality	3,990,630	XXX	XXX	3,990,630	0.0019	7,582	0.0058	23,146	0.0090	35,916
12	3	Medium quality	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
13	4	Low quality	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
14	5	Lower quality	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
15	6	In or near default	0	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
16		Affiliated life with AVR	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
17		Total preferred stocks (sum of Lines 10 through 16)	3,990,630	XXX	XXX	3,990,630	XXX	7,582	XXX	23,146	XXX	35,916
		SHORT-TERM BONDS										
18		Exempt obligations	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
19	1	Highest quality	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
20	2	High quality	0	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
21	3	Medium quality	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
22	4	Low quality	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
23	5	Lower quality	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
24	6	In or near default	0	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
25		Total short-term bonds (sum of Lines 18 through 24)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
		DERIVATIVE INSTRUMENTS										
26		Exchange traded	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
27	1	Highest quality	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
28	2	High quality	0	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
29	3	Medium quality	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
30	4	Low quality	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
31	5	Lower quality	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
32	6	In or near default	0	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
33		Total derivative instruments	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
34		Total (Lines 9 + 17 + 25 + 33)	435,203,136	XXX	XXX	435,203,136	XXX	447,420	XXX	1,619,153	XXX	2,378,506

Asset Valuation Reserve - Default
NONE

Asset Valuation Reserve - Equity
NONE

Asset Valuation Reserve - Equity
NONE

Asset Valuation Reserve - Equity
NONE

Asset Valuation Reserve - Replications (Synthetic) Assets
NONE

Sch. F - Claims
NONE

Sch. H - Pt. 1
NONE

Sch. H - Pt. 2
NONE

Sch. H - Pt. 3
NONE

Sch. H - Pt. 4
NONE

Sch. H - Pt. 5
NONE

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

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

SCHEDULE S - PART 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 Unpaid Losses
Life and Annuity - Affiliates - U.S. - Captive						
16234	82-3971925	04/11/2018	EQ AZ LIFE RE CO	AZ	27,880,360	14,261,529
0199999.	Total - Life and Annuity Affiliates - U.S. - Captive				27,880,360	14,261,529
Life and Annuity - Affiliates - U.S. - Other						
62944	13-5570651	03/01/2005	AXA EQUITABLE LIFE INS CO	NY	100,000	3,017,179
0299999.	Total - Life and Annuity Affiliates - U.S. - Other				100,000	3,017,179
0399999.	Total - Life and Annuity Affiliates - U.S. - Total				27,980,360	17,278,708
0799999.	Total - Life and Annuity Affiliates				27,980,360	17,278,708
Life and Annuity - Non-Affiliates - U.S. Non-Affiliates						
88340	59-2859797	10/01/1996	HANNOVER LIFE REASSURANCE CO OF AMERICA	FL	4,485,143	1,044,360
86258	13-2572994	10/02/1972	GENERAL RE LIFE CORP	CT	0	0
65676	35-0472300	01/01/1996	LINCOLN NATIONAL LIFE INS CO	IN	180,854	0
88099	75-1608507	04/01/2003	OPTIMUM RE INS CO	TX	1,381,710	696,240
64688	75-6020048	01/01/1997	SCOR GLOBAL LIFE AMERICAS REINSURANCE CO	DE	1,985,143	839,200
80659	38-0397420	01/01/1996	US BUSINESS OF CANADA LIFE ASSUR CO	MI	597,105	1,053,713
66133	41-1760577	07/01/2006	WILTON REASSURANCE COMPANY	MN	0	26,760
0899999.	Total - Life and Annuity Non-Affiliates - U.S. Non-Affiliates				8,629,955	3,660,273
1099999.	Total - Life and Annuity Non-Affiliates				8,629,955	3,660,273
1199999.	Total - Life and Annuity				36,610,315	20,938,981
2399999.	Total U.S.				36,610,315	20,938,981
9999999.	Total				36,610,315	20,938,981

SCHEDULE S - PART 3 - SECTION 1

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

1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
General Account - Authorized - Affiliates - U.S. - Other														
62944	13-5570651	03/01/2005	AXA EQUITABLE LIFE INS CO	NY	YRT/I	OL	506,452,422	3,578,690	3,724,103	4,048,261	0	0	0	0
0299999.	Total - General Account - Authorized - Affiliates - U.S. - Other						506,452,422	3,578,690	3,724,103	4,048,261	0	0	0	0
0399999.	Total - General Account - Authorized - Affiliates - U.S. - Total						506,452,422	3,578,690	3,724,103	4,048,261	0	0	0	0
0799999.	Total - General Account - Authorized - Affiliates						506,452,422	3,578,690	3,724,103	4,048,261	0	0	0	0
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates														
10348	06-1430254	02/01/2012	ARCH REINSURANCE COMPANY	DE	CAT/I	OL	0	0	0	0	0	0	0	0
86258	13-2572994	11/01/1996	GENERAL RE LIFE CORP	CT	YRT/I	OL	31,326,798	107,195	112,112	293,433	0	0	0	0
88340	59-2859797	10/01/1996	HANNOVER LIFE REASSURANCE CO OF AMERICA	FL	CO/I	AXXX	801,039,190	20,283,013	23,666,867	2,391,923	0	0	0	0
88340	59-2859797	01/22/1997	HANNOVER LIFE REASSURANCE CO OF AMERICA	FL	CO/I	OL	2,322,651	36,030	36,320	6,935	0	0	0	0
88340	59-2859797	01/22/1997	HANNOVER LIFE REASSURANCE CO OF AMERICA	FL	YRT/I	OL	62,232,669	1,025,754	1,129,671	1,231,688	0	0	0	0
65676	35-0472300	01/01/1986	LINCOLN NATIONAL LIFE INS CO	IN	CO/I	OL	26,588,184	3,750,155	4,029,109	330,520	0	0	0	0
88099	75-1608507	04/01/2003	OPTIMUM RE INS CO	TX	YRT/I	OL	540,609,846	3,115,981	3,307,521	4,590,756	0	0	0	0
93572	43-1235868	10/01/1990	RGA REINSURANCE CO	MO	CO/I	AXXX	300,000	2,887	1,321	1,176	0	0	0	0
93572	43-1235868	10/01/1990	RGA REINSURANCE CO	MO	CO/I	OL	1,100,000	14,429	13,936	4,312	0	0	0	0
93572	43-1235868	05/01/1991	RGA REINSURANCE CO	MO	YRT/I	OL	1,738,476	13,661	21,813	30,439	0	0	0	0
64688	75-6020048	01/01/1997	SCOR GLOBAL LIFE AMERICAS REINSURANCE CO	DE	CO/I	AXXX	270,031,152	2,462,658	2,602,447	1,013,880	0	0	0	0
64688	75-6020048	01/01/1997	SCOR GLOBAL LIFE AMERICAS REINSURANCE CO	DE	CO/I	OL	2,300,000	35,154	26,530	8,636	0	0	0	0
64688	75-6020048	01/01/1997	SCOR GLOBAL LIFE AMERICAS REINSURANCE CO	DE	YRT/I	OL	50,266,655	679,591	891,719	815,955	0	0	0	0
87572	23-2038295	10/01/1990	SCOTTISH RE US INC	DE	CO/I	AXXX	475,000	19,201	11,482	7,000	0	0	0	0
87572	23-2038295	10/01/1990	SCOTTISH RE US INC	DE	CO/I	OL	2,340,000	46,802	24,696	34,483	0	0	0	0
87572	23-2038295	06/15/1991	SCOTTISH RE US INC	DE	YRT/I	OL	3,830,242	55,029	91,499	144,848	0	0	0	0
80659	38-0397420	01/01/2001	US BUSINESS OF CANADA LIFE ASSUR CO	MI	YRT/I	OL	752,761,056	5,184,787	5,557,329	7,201,851	0	0	0	0
66133	41-1760577	07/01/2006	WILTON REASSURANCE COMPANY	MN	YRT/I	OL	93,980,390	321,584	336,337	719,932	0	0	0	0
0899999.	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates						2,643,242,309	37,153,911	41,860,710	18,827,767	0	0	0	0
1099999.	Total - General Account - Authorized - Non-Affiliates						2,643,242,309	37,153,911	41,860,710	18,827,767	0	0	0	0
1199999.	Total - General Account - Authorized						3,149,694,731	40,732,601	45,584,813	22,876,028	0	0	0	0
General Account - Unauthorized - Affiliates - U.S. - Captive														
14355	14-1903564	12/31/2004	AXA RE ARIZONA COMPANY	AZ	CO/I	XXXL	0	0	741,736,085	15,071,958	0	0	0	0
16234	82-3971925	04/11/2018	EQ AZ LIFE RE CO	AZ	CO/I	XXXL	18,698,306,708	665,573,253	0	47,967,399	0	0	0	0
1288888,	Total - General Account - Unauthorized - Affiliates - U.S. - Captive						18,698,306,708	665,573,253	741,736,085	63,039,357	0	0	0	0
1499999.	Total - General Account - Unauthorized - Affiliates - U.S. - Total						18,698,306,708	665,573,253	741,736,085	63,039,357	0	0	0	0
1899999.	Total - General Account - Unauthorized - Affiliates						18,698,306,708	665,573,253	741,736,085	63,039,357	0	0	0	0
General Account - Unauthorized - Non-Affiliates - U.S. Non-Affiliates														
20370	51-0434766	02/01/2012	AXIS REINSURANCE COMPANY	NY	CAT/I	OL	0	0	0	0	0	0	0	0
16535	36-4233459	02/01/2012	ZURICH AMERICAN INSURANCE COMPANY	NY	CAT/I	OL	0	0	0	0	0	0	0	0
1999999.	Total - General Account - Unauthorized - Non-Affiliates - U.S. Non-Affiliates						0	0	0	0	0	0	0	0
General Account - Unauthorized - Non-Affiliates - Non-U.S. Non-Affiliates														

SCHEDULE S - PART 3 - SECTION 1

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

1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
00000	AA-3194128	02/01/2012	ALLIED WORLD ASSURANCE COMPANY LIMITED	BMU	CAT/I	OL	0	0	0	0	0	0	0	0
00000	AA-1340028	02/01/2012	DEVK RUCKVERSICHERUNGS-UND BETEILIGUNGS-AG	DEU	CAT/I	OL	0	0	0	0	0	0	0	0
00000	AA-5340310	02/01/2012	GENERAL INSURANCE CORPORATION OF INDIA	IND	CAT/I	OL	0	0	0	0	0	0	0	0
00000	AA-3190060	02/01/2012	HANNOVER RE (BERMUDA) LIMITED	BMU	CAT/I	OL	0	0	0	0	0	0	0	0
00000	AA-1126033	04/01/2016	LLOYD'S UNDERWRITER SYNDICATE NO. 033HIS	GBR	CAT/I	OL	0	0	0	0	0	0	0	0
00000	AA-1127200	02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 1200AMA	GBR	CAT/I	OL	0	0	0	0	0	0	0	0
00000	AA-1127206	02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 1206ATL	GBR	CAT/I	OL	0	0	0	0	0	0	0	0
00000	AA-1127301	04/01/2016	LLOYD'S UNDERWRITER SYNDICATE NO. 1301SCC	GBR	CAT/I	OL	0	0	0	0	0	0	0	0
00000	AA-1127861	02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 1861ATL	GBR	CAT/I	OL	0	0	0	0	0	0	0	0
00000	AA-1120064	04/01/2014	LLOYD'S UNDERWRITER SYNDICATE NO. 1919 CVS	GBR	CAT/I	OL	0	0	0	0	0	0	0	0
00000	AA-1120124	02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 1945SII	GBR	CAT/I	OL	0	0	0	0	0	0	0	0
00000	AA-1120084	04/01/2018	LLOYD'S UNDERWRITER SYNDICATE NO. 1955 BAR	GBR	CAT/I	OL	0	0	0	0	0	0	0	0
00000	AA-1128001	04/01/2018	LLOYD'S UNDERWRITER SYNDICATE NO. 2001 AML	GBR	CAT/I	OL	0	0	0	0	0	0	0	0
00000	AA-1128987	04/01/2016	LLOYD'S UNDERWRITER SYNDICATE NO. 2987BRT	GBR	CAT/I	OL	0	0	0	0	0	0	0	0
00000	AA-1129000	04/01/2014	LLOYD'S UNDERWRITER SYNDICATE NO. 3000 MKL	GBR	CAT/I	OL	0	0	0	0	0	0	0	0
00000	AA-1120055	02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 3623AFB	GBR	CAT/I	OL	0	0	0	0	0	0	0	0
00000	AA-1120080	04/01/2018	LLOYD'S UNDERWRITER SYNDICATE NO. 3902 NOA	GBR	CAT/I	OL	0	0	0	0	0	0	0	0
00000	AA-1126005	02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 4000PEM	GBR	CAT/I	OL	0	0	0	0	0	0	0	0
00000	AA-1120075	02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 4020ARK	GBR	CAT/I	OL	0	0	0	0	0	0	0	0
00000	AA-1126006	04/01/2013	LLOYD'S UNDERWRITER SYNDICATE NO. 4472 LIB	GBR	CAT/I	OL	0	0	0	0	0	0	0	0
00000	AA-1120090	04/01/2016	LLOYD'S UNDERWRITER SYNDICATE NO. 4711ASP	GBR	CAT/I	OL	0	0	0	0	0	0	0	0
00000	AA-1120116	04/01/2018	LLOYD'S UNDERWRITER SYNDICATE NO. 5151 ENH	GBR	CAT/I	OL	0	0	0	0	0	0	0	0
00000	AA-1120163	04/01/2016	LLOYD'S UNDERWRITER SYNDICATE NO. 5678VSM	GBR	CAT/I	OL	0	0	0	0	0	0	0	0
00000	AA-1120048	04/01/2016	LLOYD'S UNDERWRITER SYNDICATE NO. 5820ATL	GBR	CAT/I	OL	0	0	0	0	0	0	0	0
00000	AA-1840000	02/01/2012	MAPFRE RE COMPANIADE REASERGUROS S A	ESP	CAT/I	OL	0	0	0	0	0	0	0	0
00000	AA-1840680	02/01/2012	NACIONAL DE REASERGUROS SA	ESP	CAT/I	OL	0	0	0	0	0	0	0	0
00000	AA-1120159	04/01/2016	TRANSRE LONDON LIMITED	GBR	CAT/I	OL	0	0	0	0	0	0	0	0
2099999.	Total - General Account - Unauthorized - Non-Affiliates - Non-U.S. Non-Affiliates						0	0	0	0	0	0	0	0
2199999.	Total - General Account - Unauthorized - Non-Affiliates						0	0	0	0	0	0	0	0
2299999.	Total - General Account - Unauthorized						18,698,306,708	665,573,253	741,736,085	63,039,357	0	0	0	0
3499999.	Total - General Account - Authorized, Unauthorized and Certified						21,848,001,439	706,305,855	787,320,898	85,915,384	0	0	0	0
6999999.	Total U.S.						21,848,001,439	706,305,855	787,320,898	85,915,384	0	0	0	0
7099999.	Total Non-U.S.						0	0	0	0	0	0	0	0
9999999.	Total						21,848,001,439	706,305,855	787,320,898	85,915,384	0	0	0	0

SCHEDULE S - PART 3 - SECTION 2

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

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

NONE

SCHEDULE S - PART 4

Reinsurance Ceded To Unauthorized Companies

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Reserve Credit Taken	6 Paid and Unpaid Losses Recoverable (Debit)	7 Other Debits	8 Total (Cols. 5 + 6 + 7)	9 Letters of Credit	10 Issuing or Confirming Bank Reference Number (a)	11 Trust Agreements	12 Funds Deposited by and Withheld from Reinsurers	13 Other	14 Miscellaneous Balances (Credit)	15 Sum of Cols. 9 + 11 + 12 + 13 + 14 But Not in Excess of Col. 8
General Account - Life and Annuity - Affiliates - U.S. - Captive														
16234	82-3971925	.04/11/2018	EQ AZ LIFE RE CO	665,573,253	42,141,889	3,435,413	711,150,555	185,000,000	0001	502,503,747	0	0	76,317,356	711,150,555
0199999	Total - General Account - Life and Annuity - Affiliates - U.S. - Captive			665,573,253	42,141,889	3,435,413	711,150,555	185,000,000	XXX	502,503,747	0	0	76,317,356	711,150,555
0399999	Total - General Account - Life and Annuity - Affiliates - U.S. - Total			665,573,253	42,141,889	3,435,413	711,150,555	185,000,000	XXX	502,503,747	0	0	76,317,356	711,150,555
General Account - Life and Annuity - Affiliates - Non-U.S. - Other														
20370	51-0434766	.02/01/2012	AXIS REINSURANCE COMPANY	0	0	0	0	0	0	0	0	0	0	0
16535	36-4233459	.02/01/2012	ZURICH AMERICAN INSURANCE COMPANY	0	0	0	0	0	0	0	0	0	0	0
0599999	Total - General Account - Life and Annuity - Affiliates - Non-U.S. - Other			0	0	0	0	0	XXX	0	0	0	0	0
0699999	Total - General Account - Life and Annuity - Affiliates - Non-U.S. - Total			0	0	0	0	0	XXX	0	0	0	0	0
0799999	Total - General Account - Life and Annuity - Affiliates			665,573,253	42,141,889	3,435,413	711,150,555	185,000,000	XXX	502,503,747	0	0	76,317,356	711,150,555
General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates														
00000	AA-1120841	.02/01/2012	AIG EUROPE LTD	0	0	0	0	0	0	0	0	0	0	0
00000	AA-3194128	.02/01/2012	ALLIED WORLD ASSURANCE COMPANY LIMITIED	0	0	0	0	0	0	0	0	0	0	0
00000	AA-1340028	.02/01/2012	DEVK RUCKVERSICHERUNGS-UND BETELLIGUNGS-AG	0	0	0	0	0	0	0	0	0	0	0
00000	AA-5340310	.02/01/2012	GENERAL INSURANCE CORPORATION OF INDIA	0	0	0	0	0	0	0	0	0	0	0
00000	AA-3190060	.02/01/2012	HANNOVER RE (BERMUDA) LIMITED	0	0	0	0	0	0	0	0	0	0	0
00000	AA-1126033	.04/01/2016	LLOYD'S UNDERWRITER SYNDICATE NO. 033HIS	0	0	0	0	0	0	0	0	0	0	0
00000	AA-1127200	.02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 1200AMA	0	0	0	0	0	0	0	0	0	0	0
00000	AA-1127206	.02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 1206ATL	0	0	0	0	0	0	0	0	0	0	0
00000	AA-1127301	.02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 1301SCC	0	0	0	0	0	0	0	0	0	0	0
00000	AA-1127861	.02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 1861ATL	0	0	0	0	0	0	0	0	0	0	0
00000	AA-1120064	.04/01/2014	LLOYD'S UNDERWRITER SYNDICATE NO. 1919 CVS	0	0	0	0	0	0	0	0	0	0	0
00000	AA-1120124	.02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 1945SII	0	0	0	0	0	0	0	0	0	0	0
00000	AA-1120084	.04/01/2018	LLOYD'S UNDERWRITER SYNDICATE NO. 1955 BAR	0	0	0	0	0	0	0	0	0	0	0
00000	AA-1120103	.02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 1967WRB	0	0	0	0	0	0	0	0	0	0	0
00000	AA-1128001	.04/01/2018	LLOYD'S UNDERWRITER SYNDICATE NO. 2001 AML	0	0	0	0	0	0	0	0	0	0	0
00000	AA-1128987	.04/01/2016	LLOYD'S UNDERWRITER SYNDICATE NO. 2987BRT	0	0	0	0	0	0	0	0	0	0	0
00000	AA-1129000	.04/01/2014	LLOYD'S UNDERWRITER SYNDICATE NO. 3000 MKL	0	0	0	0	0	0	0	0	0	0	0
00000	AA-1120055	.02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 3623AFB	0	0	0	0	0	0	0	0	0	0	0
00000	AA-1120080	.04/01/2018	LLOYD'S UNDERWRITER SYNDICATE NO. 3902 NOA	0	0	0	0	0	0	0	0	0	0	0
00000	AA-1126005	.02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 4000PEM	0	0	0	0	0	0	0	0	0	0	0
00000	AA-1120075	.02/01/2012	LLOYD'S UNDERWRITER SYNDICATE NO. 4020ARK	0	0	0	0	0	0	0	0	0	0	0
00000	AA-1126006	.04/01/2013	LLOYD'S UNDERWRITER SYNDICATE NO. 4472 LIB	0	0	0	0	0	0	0	0	0	0	0
00000	AA-1120090	.04/01/2016	LLOYD'S UNDERWRITER SYNDICATE NO. 4711ASP	0	0	0	0	0	0	0	0	0	0	0
00000	AA-1120116	.04/01/2018	LLOYD'S UNDERWRITER SYNDICATE NO. 5151 ENH	0	0	0	0	0	0	0	0	0	0	0
00000	AA-1120163	.04/01/2016	LLOYD'S UNDERWRITER SYNDICATE NO. 5678VSM	0	0	0	0	0	0	0	0	0	0	0
00000	AA-1120048	.04/01/2016	LLOYD'S UNDERWRITER SYNDICATE NO. 5820ATL	0	0	0	0	0	0	0	0	0	0	0
00000	AA-1840000	.02/01/2012	MAPFRE RE COMPANIADE REASERGUROS S A	0	0	0	0	0	0	0	0	0	0	0

SCHEDULE S - PART 4

Reinsurance Ceded To Unauthorized Companies

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Reserve Credit Taken	6 Paid and Unpaid Losses Recoverable (Debit)	7 Other Debits	8 Total (Cols. 5 + 6 + 7)	9 Letters of Credit	10 Issuing or Confirming Bank Reference Number (a)	11 Trust Agreements	12 Funds Deposited by and Withheld from Reinsurers	13 Other	14 Miscellaneous Balances (Credit)	15 Sum of Cols. 9 + 11 + 12 + 13 + 14 But Not in Excess of Col. 8
00000.....	AA-1840680	.02/01/2012	NACIONAL DE REASERGUROS SA.....	0	0	0	0	0	0.....	0	0	0	0	0
00000.....	AA-1120159	.04/01/2016	TRANSRE LONDON LIMITED.....	0	0	0	0	0	0.....	0	0	0	0	0
0999999.	Total - General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates.....			0	0	0	0	0	.....XXX.....	0	0	0	0	0
1099999.	Total - General Account - Life and Annuity - Non-Affiliates.....			0	0	0	0	0	.....XXX.....	0	0	0	0	0
1199999.	Total - General Account - Life and Annuity.....			665,573,253	42,141,889	3,435,413	711,150,555	185,000,000	.....XXX.....	502,503,747	0	0	76,317,356	711,150,555
2399999.	Total - General Account.....			665,573,253	42,141,889	3,435,413	711,150,555	185,000,000	.....XXX.....	502,503,747	0	0	76,317,356	711,150,555
3599999.	Total - U.S.....			665,573,253	42,141,889	3,435,413	711,150,555	185,000,000	.....XXX.....	502,503,747	0	0	76,317,356	711,150,555
3699999.	Total - Non-U.S.....			0	0	0	0	0	.....XXX.....	0	0	0	0	0
9999999.	Total.....			665,573,253	42,141,889	3,435,413	711,150,555	185,000,000	.....XXX.....	502,503,747	0	0	76,317,356	711,150,555

(a)

Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
001.....	1.....	026009593.....	Bank of America, N.A.....	0
001.....	1.....	026002574.....	Barclays Bank PLC.....	0
001.....	1.....	026007689.....	BNP Paribas, New York Branch.....	0
001.....	1.....	021000089.....	Citibank, N.A.....	0
001.....	1.....	026008044.....	Commerzbank Aktiengesellschaft, New York Branch.....	0
001.....	1.....	026008073.....	Credit Aghcole Corporate and Investment Bank, New York Branch.....	0
001.....	1.....	026003780.....	Deutsche Bank AG, New York Branch.....	0
001.....	1.....	021000021.....	JPMorgan Chase Bank, N.A., Paris Branch.....	0
001.....	1.....	026002545.....	Landesbank Hessen- Thuringen Girozentrale, New York Branch.....	185,000,000
001.....	1.....	026004307.....	Mizuho Corporate Bank, Ltd. acting through its New York Branch.....	0
001.....	1.....	011001438.....	State Street Bank and Trust Company, Boston MA.....	0
001.....	1.....	021000018.....	The Bank of New York Mellon.....	0

SCHEDULE S - PART 5

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

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

NONE

SCHEDULE S - PART 6

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

		1 2018	2 2017	3 2016	4 2015	5 2014
A.	**OPERATIONS ITEMS**					
1.	Premiums and annuity considerations for life and accident and health contracts	85,915	88,698	98,976	111,700	133,015
2.	Commissions and reinsurance expense allowances	15,868	17,059	19,289	21,814	24,178
3.	Contract claims	148,967	167,175	168,530	165,578	170,641
4.	Surrender benefits and withdrawals for life contracts	103	63	204	621	273
5.	Dividends to policyholders	0	0	0	0	0
6.	Reserve adjustments on reinsurance ceded	0	0	0	0	0
7.	Increase in aggregate reserves for life and accident and health contracts	(81,015)	(75,759)	(68,208)	(77,883)	(54,356)
B.	**BALANCE SHEET ITEMS**					
8.	Premiums and annuity considerations for life and accident and health contracts deferred and uncollected	46,927	51,493	56,335	66,707	74,913
9.	Aggregate reserves for life and accident and health contracts	706,306	787,321	863,080	931,289	1,009,172
10.	Liability for deposit-type contracts	0	0	0	0	0
11.	Contract claims unpaid	20,939	34,389	21,562	21,404	32,078
12.	Amounts recoverable on reinsurance	36,610	36,269	43,441	42,121	34,649
13.	Experience rating refunds due or unpaid	0	0	0	0	0
14.	Policyholders' dividends (not included in Line 10)	0	0	0	0	0
15.	Commissions and reinsurance expense allowances due	4,616	4,251	4,265	4,819	5,589
16.	Unauthorized reinsurance offset	0	0	0	0	0
17.	Offset for reinsurance with certified reinsurers	0	0	0	0	0
C.	**UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)**					
18.	Funds deposited by and withheld from (F)	0	0	0	0	0
19.	Letters of credit (L)	185,000	225,000	225,000	335,000	340,000
20.	Trust agreements (T)	502,504	512,984	620,026	602,495	593,611
21.	Other (O)	0	0	0	0	0
D.	**REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)**					
22.	Multiple beneficiary trust	0	0	0	0	0
23.	Funds deposited by and withheld from (F)	0	0	0	0	0
24.	Letters of credit (L)	0	0	0	0	0
25.	Trust agreements (T)	0	0	0	0	0
26.	Other (O)	0	0	0	0	0

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

		1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
	ASSETS (Page 2, Col. 3)			
1.	Cash and invested assets (Line 12)	481,525,732	0	481,525,732
2.	Reinsurance (Line 16)	41,226,336	(41,226,336)	0
3.	Premiums and considerations (Line 15)	957,867	46,927,333	47,885,200
4.	Net credit for ceded reinsurance	XXX	703,785,582	703,785,582
5.	All other admitted assets (balance)	14,485,216	0	14,485,216
6.	Total assets excluding Separate Accounts (Line 26)	538,195,151	709,486,579	1,247,681,730
7.	Separate Account assets (Line 27)	0	0	0
8.	Total assets (Line 28)	538,195,151	709,486,579	1,247,681,730
	LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9.	Contract reserves (Lines 1 and 2)	412,377,480	706,305,855	1,118,683,335
10.	Liability for deposit-type contracts (Line 3)	368,120	0	368,120
11.	Claim reserves (Line 4)	33,265,634	20,938,981	54,204,615
12.	Policyholder dividends/reserves (Lines 5 through 7)	0	0	0
13.	Premium & annuity considerations received in advance (Line 8)	381,969	0	381,969
14.	Other contract liabilities (Line 9)	18,637,838	(17,758,257)	879,581
15.	Reinsurance in unauthorized companies (Line 24.02 minus inset amount)	0	0	0
16.	Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount)	0	0	0
17.	Reinsurance with certified reinsurers (Line 24.02 inset amount)	0	0	0
18.	Funds held under reinsurance treaties with certified reinsurers (Line 24.03 inset amount)	0	0	0
19.	All other liabilities (balance)	7,433,313	0	7,433,313
20.	Total liabilities excluding Separate Accounts (Line 26)	472,464,354	709,486,579	1,181,950,933
21.	Separate Account liabilities (Line 27)	0	0	0
22.	Total liabilities (Line 28)	472,464,354	709,486,579	1,181,950,933
23.	Capital & surplus (Line 38)	65,730,797	XXX	65,730,797
24.	Total liabilities, capital & surplus (Line 39)	538,195,151	709,486,579	1,247,681,730
	NET CREDIT FOR CEDED REINSURANCE			
25.	Contract reserves	706,305,855		
26.	Claim reserves	20,938,981		
27.	Policyholder dividends/reserves	0		
28.	Premium & annuity considerations received in advance	0		
29.	Liability for deposit-type contracts	0		
30.	Other contract liabilities	(17,758,257)		
31.	Reinsurance ceded assets	41,226,336		
32.	Other ceded reinsurance recoverables	0		
33.	Total ceded reinsurance recoverables	750,712,915		
34.	Premiums and considerations	46,927,333		
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	46,927,333		
41.	Total net credit for ceded reinsurance	703,785,582		

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.	Direct Business Only					
	1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1. Alabama AL	2,491,987	0	0	0	0	2,491,987
2. Alaska AK	129,729	0	0	0	0	129,729
3. Arizona AZ	1,438,341	0	0	0	0	1,438,341
4. Arkansas AR	1,005,999	0	0	0	0	1,005,999
5. California CA	8,411,631	0	0	0	0	8,411,631
6. Colorado CO	1,941,342	0	0	0	0	1,941,342
7. Connecticut CT	2,005,107	0	0	0	0	2,005,107
8. Delaware DE	1,501,575	0	0	0	0	1,501,575
9. District of Columbia DC	67,141	0	0	0	0	67,141
10. Florida FL	7,388,557	0	0	0	0	7,388,557
11. Georgia GA	3,908,232	0	0	0	0	3,908,232
12. Hawaii HI	309,549	0	0	0	0	309,549
13. Idaho ID	346,192	0	0	0	0	346,192
14. Illinois IL	4,882,938	18,443	0	0	0	4,901,381
15. Indiana IN	2,085,973	2,200	0	0	0	2,088,173
16. Iowa IA	1,369,580	0	0	0	0	1,369,580
17. Kansas KS	1,521,981	0	0	0	0	1,521,981
18. Kentucky KY	2,081,582	0	0	0	0	2,081,582
19. Louisiana LA	1,245,619	0	0	0	0	1,245,619
20. Maine ME	469,393	0	0	0	0	469,393
21. Maryland MD	2,048,349	0	0	0	0	2,048,349
22. Massachusetts MA	3,423,715	0	0	0	0	3,423,715
23. Michigan MI	7,069,366	1,660	0	0	0	7,071,026
24. Minnesota MN	5,347,409	0	0	0	0	5,347,409
25. Mississippi MS	1,807,029	0	0	0	0	1,807,029
26. Missouri MO	2,509,170	6,050	0	0	0	2,515,220
27. Montana MT	444,829	0	0	0	0	444,829
28. Nebraska NE	889,645	0	0	0	0	889,645
29. Nevada NV	484,482	0	0	0	0	484,482
30. New Hampshire NH	487,341	0	0	0	0	487,341
31. New Jersey NJ	3,328,783	0	0	0	0	3,328,783
32. New Mexico NM	502,387	0	0	0	0	502,387
33. New York NY	674,133	0	0	0	0	674,133
34. North Carolina NC	5,466,499	0	0	0	0	5,466,499
35. North Dakota ND	711,156	0	0	0	0	711,156
36. Ohio OH	6,808,955	0	0	0	0	6,808,955
37. Oklahoma OK	1,204,618	0	0	0	0	1,204,618
38. Oregon OR	1,027,557	0	0	0	0	1,027,557
39. Pennsylvania PA	5,838,678	0	0	0	0	5,838,678
40. Rhode Island RI	507,513	0	0	0	0	507,513
41. South Carolina SC	2,269,555	0	0	0	0	2,269,555
42. South Dakota SD	951,609	0	0	0	0	951,609
43. Tennessee TN	4,238,075	0	0	0	0	4,238,075
44. Texas TX	10,427,669	1,200	0	0	0	10,428,869
45. Utah UT	893,836	0	0	0	0	893,836
46. Vermont VT	197,326	0	0	0	0	197,326
47. Virginia VA	1,709,092	0	0	0	0	1,709,092
48. Washington WA	2,136,387	0	0	0	0	2,136,387
49. West Virginia WV	300,708	0	0	0	0	300,708
50. Wisconsin WI	2,118,225	0	0	0	0	2,118,225
51. Wyoming WY	190,990	0	0	0	0	190,990
52. American Samoa AS	0	0	0	0	0	0
53. Guam GU	1,063	0	0	0	0	1,063
54. Puerto Rico PR	3,865	0	0	0	0	3,865
55. US Virgin Islands VI	0	0	0	0	0	0
56. Northern Mariana Islands MP	0	0	0	0	0	0
57. Canada CAN	11,121	0	0	0	0	11,121
58. Aggregate Other Alien OT	48,581	0	0	0	0	48,581
59. Totals	120,682,164	29,553	0	0	0	120,711,717

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Y/N)	16 *
Members															
0968	AXA	00000...	00-0000000..	898427	898427	Paris Stock Exchange	AXA SA	FRA	UIP	AXA Assurance IARD Mutuelle	OWNERSHIP	.....11.260		N	0
0968		00000...		0	0		AXA SA	FRA	UIP	AXA Assurance Vie Mutuelle	OWNERSHIP	.....2.880		N	0
0000		00000...		0	0		AXA Assistance SA	FRA	NIA	AXA	OWNERSHIP	....100.000	AXA SA	N	0
0000		00000...		0	0		AXA Inter Partner Assistance - Belgium	BEL	NIA	AXA	OWNERSHIP	....100.000	AXA SA	N	0
0000		00000...		0	0		AXA France Assurance SAS	FRA	NIA	AXA	OWNERSHIP	....100.000	AXA SA	N	0
0000		00000...		0	0		AXA Corporate Solutions Assurance - France	FRA	NIA	AXA	OWNERSHIP	.....98.750	AXA SA	N	0
0000		00000...		0	0		AXA Matrix Risk Consultants SA (France)	FRA	NIA	AXA Corporate Solutions Assurance - Fr	OWNERSHIP	....100.000	AXA SA	N	0
0000		00000...		0	0		AXA Matrix Risk Consultants Shanghai Co.Ltd.	CHN	NIA	AXA Matrix Risk Consultants SA (France)	OWNERSHIP	....100.000	AXA SA	N	0
0000		00000...		0	0		AXA Matrix Risk Consultants India Prt Ltd	IND	NIA	AXA Matrix Risk Consultants SA (France)	OWNERSHIP	....100.000	AXA SA	N	0
0000		00000...		0	0		AXA Matrix Risk Consultants US Inc	USA	NIA	AXA Matrix Risk Consultants SA (France)	OWNERSHIP	....100.000	AXA SA	N	0
0000		00000...		0	0		AXA Matrix Risk Consultants Brazil Ltd	BRA	NIA	AXA Matrix Risk Consultants SA (France)	OWNERSHIP	....100.000	AXA SA	N	0
0000		00000...		0	0		AXA Group Solutions - France	FRA	NIA	AXA	OWNERSHIP	....100.000	AXA SA	N	0
0000		00000...		0	0		AXA Assistance Inc. USA	USA	NIA	AXA	OWNERSHIP	....100.000	AXA SA	N	0
0000		00000...		0	0		AXA Investment Managers	FRA	NIA	AXA	OWNERSHIP	.....73.770	AXA SA	N	0
0000		00000...		0	0		AXA Investment Managers - France	FRA	NIA	AXA	OWNERSHIP	....100.000	AXA SA	N	0
0000		00000...		0	0		AXA Investment Managers Holdings US	USA	NIA	AXA Investment Managers - France	OWNERSHIP	....100.000	AXA SA	N	0
0000		00000...		0	0		AXA Rosenberg Group LLC	USA	NIA	AXA Investment Managers	OWNERSHIP	....100.000	AXA SA	N	0
0000		00000...	22-3624513..	1459848	1459848		AXA IM Rose Inc	USA	NIA	AXA Investment Managers	OWNERSHIP	....100.000	AXA SA	N	0
0000		00000...		0	0		AXA Mediterranean Holdings, S.A.U	ESP	NIA	AXA	OWNERSHIP	....100.000	AXA SA	N	0
0000		00000...		0	0		AXA Millésimes	PRT	NIA	AXA	OWNERSHIP	.....42.340	AXA SA	N	0
0000		00000...		0	0		AXA Real Estate Investment Managers	FRA	NIA	AXA	OWNERSHIP	....100.000	AXA SA	N	0
0000		00000...		0	0		AXA Technology Services	FRA	IA	AXA	OWNERSHIP	....100.000	AXA SA	N	0
0000		00000...		0	0		AXA Belgium	BEL	IA	AXA	OWNERSHIP	....100.000	AXA SA	N	0
0000		00000...		0	0		AXA Life Insurance Company Ltd. - Hong Kong	CHN	IA	AXA	OWNERSHIP	....100.000	AXA SA	N	0
0000		00000...		0	0		AXA General Ins. Hong Kong Ltd.- Hong Kong.	CHN	IA	AXA	OWNERSHIP	....100.000	AXA SA	N	0
0000		00000...		0	0		AXA General Insurance China Ltd	CHN	IA	AXA	OWNERSHIP	....100.000	AXA SA	N	0
0000		00000...		0	0		AXA China - France	FRA	NIA	AXA	OWNERSHIP	.....51.000	AXA SA	N	0
0000		00000...		0	0		AXA-Mimentals Assurance Company Limited	CHN	IA	AXA China - France	OWNERSHIP	.....51.000	AXA SA	N	0
0000		00000...		0	0		AXA Societe Beaujon	FRA	NIA	AXA	OWNERSHIP	....100.000	AXA SA	N	0
0000		00000...		0	0		AXA Pojistovna a.s	CZE	IA	AXA Societe Beaujon	OWNERSHIP	....100.000	AXA SA	N	0
0000		00000...		0	0		AXA Zivtni Pojistonva a.s	CZE	IA	AXA Societe Beaujon	OWNERSHIP	....100.000	AXA SA	N	0
0000		00000...		0	0		AXA Penzijni Fond a.s	CZE	IA	AXA Societe Beaujon	OWNERSHIP	.....99.980	AXA SA	N	0
0000		00000...		0	0		AXA Biztosito Zrt	HUN	IA	AXA Societe Beaujon	OWNERSHIP	....100.000	AXA SA	N	0
0000		00000...		0	0		AXA Zycie Towarzystwo Ubezieczen S.A	POL	IA	AXA Societe Beaujon	OWNERSHIP	.....90.240	AXA SA	N	0

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

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0000		00000...		0	0		AXA Powszechne Towarzstwo Emerytalne S.A.	POL	IA	AXA Societe Beaujon	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Towarzystwo Ubezpieczen i Reasekuracji S.A.	POL	IA	AXA Societe Beaujon	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Life Insurance SA	ROU	IA	AXA Societe Beaujon	OWNERSHIP	99.900	AXA SA	N	0
0000		00000...		0	0		AXA Business Services Private Limited	IND	NIA	AXA Societe Beaujon	OWNERSHIP	99.990	AXA SA	N	0
0000		00000...		0	0		Compagnie Financiere de Paris	FRA	IA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA France Assurance	FRA	IA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	AA-1320012.	0	0		AXA Corporate Solutions Assurance	FRA	IA	AXA France Assurance	OWNERSHIP	98.750	AXA SA	N	0
0000		00000...		0	0		AXA Global Life	FRA	IA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Global P&C	FRA	IA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Liabilities Managers- France	FRA	IA	AXA	OWNERSHIP	99.900	AXA SA	N	0
0000		00000...	27-0069788..	0	0		AXA Liabilities Managers-US	USA	IA	AXA Liabilities Managers- France	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA DBIO GP S.à.r.l.	LUX	IA	AXA Liabilities Managers- France	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA DBIO S.C.A.	LUX	IA	AXA DBIO GP S.à.r.l.	OWNERSHIP	9.740	AXA SA	N	0
0000		00000...		0	0		GLOBALE Ruckversicherungs-AG	CHE	IA	AXA DBIO S.C.A.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	13-3907460..	0	0		GLOBAL U.S. Holdings, Inc.	USA	NIA	AXA DBIO S.C.A.	OWNERSHIP	100.000	AXA SA	N	0
0968		21032...	13-5009848..	0	0		GLOBAL Reinsurance Corporation of America	USA	IA	GLOBAL U.S. Holdings, Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		GLOBAL Reinsurance Canada Holdings Inc.	CAN	NIA	AXA DBIO S.C.A.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		GLOBAL Reinsurance Company	CAN	IA	GLOBAL Reinsurance Canada Holdings Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	AA-1320035.	0	0		Colisee Re - France	FRA	IA	AXA	OWNERSHIP	99.900	AXA SA	N	0
0000		00000...		0	0		AXA DBIO S.C.A.	LUX	NIA	Colisee Re - France	OWNERSHIP	21.670	AXA SA	N	0
0000		00000...		0	0		AXA Konzern AG	DEU	NIA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Investment Managers	FRA	NIA	AXA Konzern AG	OWNERSHIP	5.200	AXA SA	N	0
0000		00000...		0	0		WinCom Versicherungs-Holding AG	DEU	NIA	AXA Konzern AG	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		DBV Deutsche Beamtenversicherung Leben AG	DEU	IA	WinCom Versicherungs-Holding AG	OWNERSHIP	94.900	AXA SA	N	0
0000		00000...		0	0		DBV Deutsche Beamtenversicherung AG	DEU	IA	WinCom Versicherungs-Holding AG	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		DBV Deutsche Lebensversicherung AG	DEU	IA	WinCom Versicherungs-Holding AG	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	AA-1340055.	0	0		AXA Versicherung AG	DEU	IA	AXA Konzern AG	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA ART Versicherung AG - Clologne	DEU	IA	AXA Konzern AG	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Art Holdings Inc.	USA	NIA	AXA ART Versicherung AG - Clologne	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Fine Art Service International Inc.	USA	NIA	AXA Art Holdings Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Art Americas Corporation	USA	NIA	AXA Art Holdings Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Szolgaltato Kft.	HUN	IA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA India Holdings	IND	NIA	AXA	OWNERSHIP	100.000	AXA SA	N	0

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

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0000		00000...		0	0		Bharti AXA Life Insurance Company	IND	IA	AXA India Holdings	OWNERSHIP	22.220	AXA SA	N	0
0000		00000...		0	0		Bharti AXA General Insurance	IND	IA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		National Mutual International Pty Limited	AUS	IA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA-AFFIN Life Insurance Berhad	MYS	IA	National Mutual International Pty Limited	OWNERSHIP	49.000	AXA SA	N	0
0000		00000...		0	0		AXA Financial Services (Singapore) Pte Ltd	SGP	NIA	National Mutual International Pty Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		ipac financial planning Taiwan Limited	TWN	NIA	National Mutual International Pty Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Insurance Singapore Pte Ltd	SGP	IA	National Mutual International Pty Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Asia Regional Centre Pte Ltd	SGP	IA	National Mutual International Pty Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		P.T. Asuransi AXA Indonesia	IDN	IA	AXA	OWNERSHIP	80.000	AXA SA	N	0
0000		00000...		0	0		P.T. Life Indonesia	IDN	IA	AXA	OWNERSHIP	80.000	AXA SA	N	0
0000		00000...		0	0		AXA Financial Services (Singapore) Pte Ltd	SGP	IA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Life Europe	IRL	IA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Global Distributors (Ireland) Limited	IRL	NIA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Ireland Limited	IRL	IA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA mps Financial Ltd	IRL	IA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Italia S.p.A.	ITA	NIA	AXA	OWNERSHIP	98.240	AXA SA	N	0
0000		00000...		0	0		AXA Assicurazioni S.p.A.	ITA	IA	AXA Italia S.p.A.	OWNERSHIP	98.110	AXA SA	N	0
0000		00000...		0	0		AXA Japan Holding Co., Ltd	JPN	NIA	AXA	OWNERSHIP	78.670	AXA SA	N	0
0000		00000...		0	0		AXA Life Insurance Co.,	JPN	IA	AXA Japan Holding Co., Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA General Insurance Co., Ltd	JPN	IA	AXA Japan Holding Co., Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Collection Services Co. Ltd	JPN	IA	AXA Japan Holding Co., Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Nextia Life Insurance Co., Ltd	JPN	IA	AXA Japan Holding Co., Ltd	OWNERSHIP	97.250	AXA SA	N	0
0000		00000...	AA-2730011.	0	0		AXA Seguros, S.A. de CV	MEX	IA	AXA	OWNERSHIP	99.940	AXA SA	N	0
0000		00000...		0	0		Voltaire Participacoes	BRA	IA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Luxembourg SA	LUX	IA	AXA	OWNERSHIP	99.990	AXA SA	N	0
0000		00000...		0	0		Finance Solutions S.ar.l. (Finso)	LUX	NIA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Matignon Finance S.A.	LUX	NIA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA-AFFIN General Insurance Berhad	MYS	IA	AXA	OWNERSHIP	42.400	AXA SA	N	0
0000		00000...		0	0		Philippine AXA Life Insurance Corporation	MYS	IA	AXA	OWNERSHIP	45.000	AXA SA	N	0
0000		00000...		0	0		AXA Middle East SAL Lebanon	LBN	NIA	AXA	OWNERSHIP	49.000	AXA SA	N	0
0000		00000...		0	0		AXA Holding SAL	LBN	NIA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Gulf Holding W.L.L.	BHR	NIA	AXA	OWNERSHIP	95.000	AXA SA	N	0
0000		00000...		0	0		AXA Holding Maroc	MAR	NIA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Assurance Maroc	MAR	IA	AXA Holding Maroc	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Seguro Directo Gere Compania de Seguros SA	PRT	IA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Portugal Companhia de Seguros SA	PRT	IA	AXA	OWNERSHIP	83.020	AXA SA	N	0

SCHEDULE Y

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0000		00000...		0	0		AXA Portugal Companhia de Seguros Vida SA	PRT	IA	AXA	OWNERSHIP	87.630	AXA SA	N	0
0000		00000...		0	0		AXA Services s.r.o	SVK	NIA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		EX-SR a.s. v likvdacii	SVK	IA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA d.s.s., a.s	SVK	IA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA d.d.s., a.s	SVK	IA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA General Insurance	KOR	IA	AXA	OWNERSHIP	94.130	AXA SA	N	0
0000		00000...		0	0		AXA Mediterraenan Holding, S.A.U.	ESP	NIA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Hilo Direct, Seguros y Reaseguros S.A.	ESP	IA	AXA Mediterraenan Holding, S.A.U.	OWNERSHIP	99.990	AXA SA	N	0
0000		00000...		0	0		AXA MEDLA IT & Local Support Services, S.A.	ESP	NIA	AXA Mediterraenan Holding, S.A.U.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Regional Services, S.A.	ESP	NIA	AXA Mediterraenan Holding, S.A.U.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Seguros Generales, S.A. de Seguros y Reaseguros	ESP	IA	AXA Mediterraenan Holding, S.A.U.	OWNERSHIP	99.890	AXA SA	N	0
0000		00000...		0	0		AXA Pensiones, S.A. E.G.F.P.	ESP	IA	AXA Mediterraenan Holding, S.A.U.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Tigris, S.A.	ESP	IA	AXA Mediterraenan Holding, S.A.U.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Vida, S.A.de Seguros y Reaseguros	ESP	IA	AXA Mediterraenan Holding, S.A.U.	OWNERSHIP	99.800	AXA SA	N	0
0000		00000...		0	0		AXA Senegal	SEN	IA	AXA	OWNERSHIP	51.530	AXA SA	N	0
0000		00000...		0	0		AXA Cote d'Ivoire	CIV	IA	AXA	OWNERSHIP	78.640	AXA SA	N	0
0000		00000...		0	0		AXA Cameroun ©	CMR	IA	AXA	OWNERSHIP	99.900	AXA SA	N	0
0000		00000...		0	0		AXA Gabon	GAB	IA	AXA	OWNERSHIP	86.490	AXA SA	N	0
0000		00000...		0	0		AXA Versicherungen AG	CHE	IA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Leben AG	CHE	IA	AXA Versicherungen AG	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Rechtsschutz AG	CHE	IA	AXA Versicherungen AG	OWNERSHIP	66.670	AXA SA	N	0
0000		00000...		0	0		AXA Insurance Public Co. Ltd	THA	IA	AXA	OWNERSHIP	24.990	AXA SA	N	0
0000		00000...		0	0		ASM Holdings Limited	THA	NIA	AXA	OWNERSHIP	48.800	AXA SA	N	0
0000		00000...		0	0		Krungthai-AXA Life Insurance Company Limited	THA	IA	AXA	OWNERSHIP	25.000	AXA SA	N	0
0000		00000...		0	0		AXA Hayat ve Emeklilik A.S.	TUR	IA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Sigorta A.S.	TUR	IA	AXA	OWNERSHIP	72.550	AXA SA	N	0
0000		00000...		0	0		AXA Insurance	UKR	IA	AXA	OWNERSHIP	50.290	AXA SA	N	0
0000		00000...		0	0		AXA Ukraine	UKR	IA	AXA	OWNERSHIP	50.000	AXA SA	N	0
0000		00000...		0	0		AXA Global Risks (Uk) Limited	GBR	IA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Hordel FV	GBR	NIA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Equity & Law Plc	GBR	IA	AXA	OWNERSHIP	99.900	AXA SA	N	0
0000		00000...		0	0		AXA UK PLC	GBR	IA	AXA Equity & Law Plc	OWNERSHIP	46.900	AXA SA	N	0
0000		00000...		0	0		AXA UK PLC	GBR	IA	AXA	OWNERSHIP	53.100	AXA SA	N	0
0000		00000...		0	0		Bluefin Group Limited	GBR	IA	AXA UK PLC	OWNERSHIP	100.000	AXA SA	N	0

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0000		00000...		0	0		GBI Holdings Limited	GBR	IA	AXA UK PLC	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Guardian Royal Exchange PLC	GBR	NIA	AXA UK PLC	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Architas Advisory Services Limited	GBR	NIA	AXA UK PLC	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Architas Multi-Manager Limited	GBR	NIA	AXA UK PLC	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		AXA Sun Direct Limited	GBR	IA	AXA UK PLC	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	81-3019204..	0	0		Broad Vista Partners, LLC	USA	IA	AXA	OWNERSHIP	30.000	AXA SA	N	0
0000		00000...	82-2532068..	0	0		Montgomery Tower Member LLC	USA	NIA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	82-1763412..	0	0		UCC Chicago Acquisition Partner LLC	USA	NIA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	82-3179759..	0	0		AXA US Holdings, Inc.	USA	NIA	AXA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	36-3044045..	0	1456276		AXA America Corporate Solutions, Inc.	USA	NIA	AXA US Holdings, Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Maestro Heath Inc.	USA	NIA	AXA US Holdings, Inc.	OWNERSHIP	100.000	AXA SA	N	0
0968		36552...	36-2994662..	0	1456280		Coliseum Reinsurance Company	USA	IA	AXA America Corporate Solutions, Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	13-4177328..	0	0		AXA Delaware LLC	USA	NIA	Coliseum Reinsurance Company	OWNERSHIP	100.000	AXA SA	N	0
0968		33022...	13-3594502..	0	0		AXA Insurance Company	USA	IA	AXA Delaware LLC	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	90-0226248..	0	1333986	New York Stock Exchange	AXA Equitable Holdings, Inc.	USA	UIP	AXA	OWNERSHIP	59.210	AXA SA	N	0
0000		00000...	83-2796390..	0	0		Alpha Units Holdings, Inc.	USA	NIA	AXA Equitable Holdings, Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	13-4064930..	0	1109448		AllianceBernstein LP	USA	NIA	Alpha Units Holdings, Inc.	OWNERSHIP	28.970	AXA SA	Y	0
0000		00000...	13-3633538..	0	0		AllianceBernstein Corporation	USA	NIA	Alpha Units Holdings, Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	68-0461436..	0	0		AXA-IM Holding U.S. Inc.	USA	NIA	AXA Equitable Holdings, Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	13-4064930..	0	1109448		AllianceBernstein LP	USA	NIA	AXA-IM Holding U.S. Inc.	OWNERSHIP	15.440	AXA SA	Y	0
0000		00000...	30-0011728..	0	0		AXA Technology Services America Inc.	USA	NIA	AXA Equitable Holdings, Inc.	OWNERSHIP	100.000	AXA SA	N	0
0968		68365...	04-2729166..	0	0		AXA Corporate Solutions Life Reinsurance Company	USA	IA	AXA Equitable Holdings, Inc.	OWNERSHIP	100.000	AXA SA	N	0
0968		15502...	46-5697182..	0	0		CS Life Re Company	USA	IA	AXA Corporate Solutions Life Reinsurance Company	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	27-0294443..	0	0		787 Holdings, LLC	USA	NIA	AXA Equitable Holdings, Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	46-1106388..	0	0		1285 Holdings, LLC	USA	NIA	AXA Equitable Holdings, Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	13-4064930..	0	1109448		AllianceBernstein LP	USA	NIA	AXA Equitable Holdings, Inc.	OWNERSHIP	19.800	AXA SA	Y	0
0000		00000...	47-2605009..	0	0		AXA Strategic Ventures US, LLC	USA	NIA	AXA Equitable Holdings, Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	52-2197822..	0	1257148		AXA Equitable Financial Services, LLC	USA	UDP	AXA Equitable Holdings, Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	13-4078005..	0	0		AXA Distribution Holding Corporation	USA	NIA	AXA Equitable Financial Services, LLC	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	13-4071393..	0	33179		AXA Advisors, LLC	USA	NIA	AXA Distribution Holding Corporation	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	06-1555494..	0	1292309		AXA Network, LLC	USA	NIA	AXA Distribution Holding Corporation	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	27-1540220..	0	0		PlanConnect, LLC	USA	NIA	AXA Distribution Holding Corporation	OWNERSHIP	100.000	AXA SA	N	0

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0968		14355...	14-1903564..	0	1450152		AXA RE Arizona Company	USA	IA	AXA Equitable Financial Services, LLC	OWNERSHIP	100.000	AXA SA	N	0
0968		16234...	82-3971925..	0	0		EQ AZ Life Re	USA	IA	AXA RE Arizona Company	OWNERSHIP	100.000	AXA SA	N	0
0968		62944...	13-5570651..	0	727920		AXA Equitable Life Insurance Company	USA	RE	AXA Equitable Financial Services, LLC	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	27-5373651..	0	0		AXA Equitable Funds Management Group, LLC	USA	DS	AXA Equitable Life Insurance Company	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	23-2671508..	0	0		EVSA, Inc.	USA	DS	AXA Equitable Life Insurance Company	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	81-3019204..	0	0		Broad Vista Partners, LLC	USA	DS	AXA Equitable Life Insurance Company	OWNERSHIP	70.000	AXA SA	N	0
0000		00000...	81-4093983..	0	0		Long Creek Club Partners, LLC	USA	DS	AXA Equitable Life Insurance Company	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	22-2766036..	0	1257149		Equitable Holdings, LLC	USA	DS	AXA Equitable Life Insurance Company	OWNERSHIP	100.000	AXA SA	N	0
0968		10589...	06-1166226..	0	0		Equitable Casualty Insurance Company	USA	DS	Equitable Holdings, LLC	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	52-2233674..	0	858875		AXA Distributors, LLC	USA	DS	Equitable Holdings, LLC	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	13-3813232..	0	0		JMR Reality services, Inc.	USA	DS	Equitable Holdings, LLC	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	22-3492811..	0	0		Equitable Structured Settlement Corp.	USA	DS	Equitable Holdings, LLC	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	13-2677213..	0	3798		ACMC, LLC.	USA	DS	AXA Equitable Life Insurance Company	OWNERSHIP	100.000	AXA SA	N	0
0968		62880...	13-3198083..	0	1342913		AXA Equitable Life and Annuity Company	USA	IA	AXA Equitable Financial Services, LLC	OWNERSHIP	100.000	AXA SA	N	0
0968		78077...	86-0222062..	0	835357		MONY Life Insurance Company of America	USA	IA	AXA Equitable Financial Services, LLC	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	13-4064930..	0	1109448		AllianceBernstein LP	USA	NIA	MONY Life Insurance Company of America	OWNERSHIP	0.950	AXA SA	Y	0
0968		84530...	38-2046096..	0	0		U.S. Financial Life Insurance Company	USA	IA	AXA Equitable Financial Services, LLC	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	13-3790446..	0	0		MONY International Holdings, LLC	USA	NIA	AXA Equitable Financial Services, LLC	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	98-0152046..	0	0		MONY Life Insurance Company of the Americas, Ltd.	USA	IA	MONY International Holdings, LLC	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	11-3722370..	0	0		MONY Financial Services, Inc.	USA	NIA	AXA Equitable Financial Services, LLC	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	31-1465146..	0	0		Financial Marketing Agency, Inc.	USA	NIA	MONY Financial Services, Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	13-2645490..	0	0		1740 Advisors, Inc.	USA	NIA	MONY Financial Services, Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	98-1304974..	0	0		XL Group Ltd	BMU	UIP	AXA SA	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	98-0191089..	0	0		XLIT Ltd.	CYM	UIP	XL Group Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		EXEL Holdings Limited	CYM	UIP	XLIT Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		X.L. Property Holdings Limited	BMU	NIA	EXEL Holdings Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	98-0351953..	0	0		XL Bermuda Ltd.	BMU	UIP	EXEL Holdings Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Mid Ocean Holdings Limited	BMU	NIA	XL Bermuda Ltd.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		XL London Market Group Ltd.	GBR	NIA	Mid Ocean Holdings Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Dornoch Limited	GBR	NIA	XL London Market Group Ltd.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		XL London Market Ltd- Syndicate 1209	GBR	IA	XL London Market Group Ltd.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		ECS Reinsurance Company Inc.	BRB	IA	XL Bermuda Ltd.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Blitz 17-762 SE	IRL	NIA	XL Bermuda Ltd.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Blitz 17-763 SE	IRL	NIA	XL Bermuda Ltd.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	98-0674455..	0	0		Fundamental Insurance Investments Ltd.	BMU	NIA	XL Bermuda Ltd.	OWNERSHIP	100.000	AXA SA	N	0

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0000		00000...		0	0		Citystate Capital Asia Pte. Ltd	SGP	NIA	Fundamental Insurance Investments Ltd	OWNERSHIP	16.100	AXA SA	N	0
0000		00000...		0	0		XL Underwriting Managers Ltd	BMU	NIA	Fundamental Insurance Investments Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		New Ocean Capital Management Limited	BMU	NIA	Fundamental Insurance Investments Ltd	OWNERSHIP	57.500	AXA SA	N	0
0000		00000...		0	0		NOCM Services LLC	DE	NIA	New Ocean Capital Management Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		New Ocean Market Value Cat Fund Ltd	BMU	NIA	Fundamental Insurance Investments Ltd	OWNERSHIP	92.000	AXA SA	N	3
0000		00000...		0	0		New Ocean Focus Cat Fund Ltd	BMU	NIA	Fundamental Insurance Investments Ltd	MANAGEMENT	40.000	AXA SA	N	1
0000		00000...		0	0		Vector Reinsurance Ltd	BMU	IA	New Ocean Focus Cat Fund Ltd	INFLUENCE	70.000	AXA SA	N	2
0000		00000...		0	0		Inclusion Resources, Private Ltd	SGP	NIA	Fundamental Insurance Investments Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Mahindra Insurance brokers Ltd	IND	NIA	Inclusion Resources, Private Ltd	OWNERSHIP	20.000	AXA SA	N	0
0000		00000...		0	0		Salamanca Risk Management Limited	GBR	NIA	Fundamental Insurance Investments Ltd	OWNERSHIP	48.600	AXA SA	N	0
0000		00000...		0	0		START SP. Z O.O.	POL	NIA	Fundamental Insurance Investments Ltd	OWNERSHIP	38.300	AXA SA	N	0
0000		00000...	30-0479679..	0	0		XL Re Europe SE	IRL	IA	XL Bermuda Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		XL (Brazil) Holdings Ltda	BRA	NIA	XL Bermuda Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		XL Services (Bermuda) Ltd	BMU	NIA	XL Bermuda Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	98-0228561..	0	0		XL Life Ltd	BMU	IA	XL Bermuda Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Reeve Court General Partner Limited	BMU	NIA	XL Life Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Reeve Court 4 Limited Partnership	BMU	NIA	Reeve Court General Partner Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Reeve Court 6 Limited Partnership	BMU	NIA	Reeve Court General Partner Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		XL Gracechurch Limited	GBR	NIA	XL Bermuda Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		XL Insurance (UK) Holdings Limited	GBR	NIA	XL Gracechurch Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		XL Insurance Argentina S.A. Compania de Seguros	ARG	IA	XL Insurance (UK) Holdings Limited	OWNERSHIP	90.000	AXA SA	N	0
0000		00000...	30-0479685..	0	0		XL Insurance Company SE	GBR	IA	XL Insurance (UK) Holdings Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		XL Insurance (China) Company Ltd	CHN	IA	XL Insurance Company SE	OWNERSHIP	49.000	AXA SA	N	0
0000		00000...		0	0		XL Insurance Argentina S.A. Compañia de Seguros	ARG	IA	XL Insurance Company SE	OWNERSHIP	10.000	AXA SA	N	0
0000		00000...		0	0		XL Seguros Brasil S.A.	BRA	IA	XL Insurance Company SE	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		XL Catlin Services SE	GBR	NIA	XL Insurance (UK) Holdings Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	98-1339816..	0	0		XL Value Offshore LLC	BMU	NIA	XL Bermuda Ltd	OWNERSHIP	35.000	AXA SA	N	8
0000		00000...		0	0		XL Financial Holdings (Ireland) Limited	IRL	UIP	XL Bermuda Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		XL Finance (Ireland) Limited	IRL	NIA	XL Financial Holdings (Ireland) Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		XL Services Canada Ltd	CAN	NIA	XL Financial Holdings (Ireland) Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	06-1516268..	0	0		X.L. America, Inc	DE	UDP	XL Financial Holdings (Ireland) Limited	OWNERSHIP	100.000	AXA SA	N	5
0000		00000...	26-0076011..	0	0		XL Financial Solutions, Inc	DE	NIA	X.L. America, Inc	OWNERSHIP	100.000	AXA SA	N	10
0000		00000...	32-0463280..	0	0		XL Innovate Partners, LP	DE	NIA	XL Financial Solutions Inc	OWNERSHIP	93.390	AXA SA	N	11
0000		00000...	47-3653857..	0	0		XL Innovate Fund, LP	DE	NIA	XL Financial Solutions Inc	OWNERSHIP	94.800	AXA SA	N	4

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0000		00000	81-3915739	0	0		Climassure, Inc.	DE	NIA	XL Innovate Fund, LP	OWNERSHIP	100.000	AXA SA	N	0
0000		00000	27-3169978	0	0		New Energy Risk, Inc.	DE	NIA	XL Innovate Fund, LP	OWNERSHIP	85.000	AXA SA	N	0
0000		00000	47-1070591	0	0		Complex Risk and Insurance Associates, LLC.	DE	NIA	XL Innovate Fund, LP	OWNERSHIP	100.000	AXA SA	N	0
0000		00000		0	0		Slice Labs, Inc.	CAN	NIA	XL Innovate Fund, LP	OWNERSHIP	11.350	AXA SA	N	0
0000		00000		0	0		Loop Labs, Inc.	DE	NIA	XL Innovate Fund, LP	OWNERSHIP	15.130	AXA SA	N	0
0000		00000		0	0		Cape Analytics, Inc.	DE	NIA	XL Innovate Fund, LP	OWNERSHIP	13.460	AXA SA	N	0
0000		00000		0	0		Stonestep AG	CHE	NIA	XL Innovate Fund, LP	OWNERSHIP	25.000	AXA SA	N	0
0000		00000		0	0		GeoQuant, Inc.	DE	NIA	XL Innovate Fund, LP	OWNERSHIP	10.530	AXA SA	N	0
0000		00000		0	0		Pillar Technologies, Inc.	DE	NIA	XL Innovate Fund, LP	OWNERSHIP	21.620	AXA SA	N	0
0000		00000		0	0		Zendrive, Inc.	FL	NIA	XL Innovate Fund, LP	OWNERSHIP	10.290	AXA SA	N	0
0000		00000		0	0		Friday Harbor, LLC	DE	NIA	XL Innovate Fund, LP	OWNERSHIP	48.000	AXA SA	N	0
0000		00000		0	0		Centauri Specialty Insurance Holdings, Inc.	DE	NIA	XL Financial Solutions Inc.	OWNERSHIP	42.200	AXA SA	N	0
0000		00000		0	0		International Reinsurance Managers, LLC.	FL	NIA	XL Financial Solutions Inc.	OWNERSHIP	25.000	AXA SA	N	0
0000		00000		0	0		GPC-INS Partners, LP	DE	NIA	XL Financial Solutions Inc.	OWNERSHIP	99.900	AXA SA	N	12
0000		00000	72-1458300	0	0		Catlin, LLC	DE	NIA	X.L. America, Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000	72-1312068	0	0		Catlin Insurance Services, Inc.	LA	NIA	Catlin, LLC	OWNERSHIP	100.000	AXA SA	N	0
0000		15989	71-6053839	0	0		Catlin Specialty Insurance Company	DE	IA	Catlin, LLC	OWNERSHIP	100.000	AXA SA	N	0
0000		24503	52-0249520	0	0		Catlin Indemnity Company	DE	IA	Catlin Specialty Insurance Company	OWNERSHIP	100.000	AXA SA	N	0
0000		19518	20-4929941	0	0		Catlin Insurance Company Inc.	TX	IA	Catlin Indemnity Company	OWNERSHIP	100.000	AXA SA	N	0
0000		00000	94-3094358	0	0		Catlin Underwriting Inc.	DE	NIA	Catlin, LLC	OWNERSHIP	100.000	AXA SA	N	0
0000		00000	43-1956637	0	0		XLA Garrison L.P.	DE	NIA	X.L. America, Inc.	OTHER	0.000	AXA SA	N	0
0000		00000		0	0		Highfield Associates LLC	DE	NIA	XLA Garrison L.P.	OWNERSHIP	20.000	AXA SA	N	0
0000		00000		0	0		Ada Fund GP, LLC	DE	NIA	XLA Garrison L.P.	OWNERSHIP	15.000	AXA SA	N	0
0000		20583	13-1290712	0	0		XL Reinsurance America Inc.	NY	RE	X.L. America, Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000		0	0		XL Insurance (China) Company Ltd.	CHN	DS	XL Reinsurance America Inc.	OWNERSHIP	51.000	AXA SA	N	0
0000		00000	06-1609624	0	0		XL Value Onshore LLC	DE	DS	XL Reinsurance America Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000	47-2299432	0	0		Catlin CCC Holdings LLC	DE	DS	XL Value Onshore LLC	OWNERSHIP	100.000	AXA SA	N	0
0000		00000		0	0		SMTC Guarantor LLC	DE	DS	XL Value Onshore LLC	OWNERSHIP	100.000	AXA SA	N	0
0000		00000		0	0		SMTC Acquisition LLC	DE	DS	SMTC Guarantor LLC	OWNERSHIP	92.670	AXA SA	N	14
0000		22322	95-1479095	0	0		Greenwich Insurance Company	DE	DS	XL Reinsurance America Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000	01-0575742	0	0		Global Asset Protection Services, LLC	CT	DS	Greenwich Insurance Company	OWNERSHIP	100.000	AXA SA	N	0
0000		00000		0	0		Global Asset Protection Services Company Limited	JPN	DS	Global Asset Protection Services, LLC	OWNERSHIP	100.000	AXA SA	N	0
0000		00000		0	0		Boiler & Property Consulting, LLC	DE	DS	Global Asset Protection Services, LLC	OWNERSHIP	25.000	AXA SA	N	0
0000		00000		0	0		Global Asset Protection Services Consultancy (Beijing) Company Limited	CHN	DS	Global Asset Protection Services, LLC	OWNERSHIP	100.000	AXA SA	N	0

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PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Y/N)	16 *
0000		24554...	75-6017952..	0	0		XL Insurance America, Inc.	DE	DS	Greenwich Insurance Company	OWNERSHIP	100.000	AXA SA	N	0
0000		19607...	75-1221488..	0	0		XL Select Insurance Company	DE	DS	XL Insurance America Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		40193...	13-3787296..	0	0		XL Insurance Company of New York, Inc.	NY	DS	XL Insurance America Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	22-3834549..	0	0		XL Group Investments LLC	DE	DS	XL Reinsurance America Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	98-0685604..	0	0		XL Group Investments Ltd	BMU	NIA	XL Group Investments LLC	OWNERSHIP	100.000	AXA SA	N	0
0000		37885...	85-0277191..	0	0		XL Specialty Insurance Company	DE	DS	XL Reinsurance America Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		36940...	06-1346380..	0	0		Indian Harbor Insurance Company	DE	DS	XL Specialty Insurance Company	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		CS&B Parent Holdings, LLC	DE	NIA	XL Reinsurance America Inc.	OWNERSHIP	11.290	AXA SA	N	0
0000		00000...	45-2729407..	0	0		Global Ag Insurance Services, LLC	CA	NIA	XL Reinsurance America Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	59-2492808..	0	0		Allied International Holdings, Inc.	FL	NIA	XL Reinsurance America Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	59-3107831..	0	0		Short Term Special Events, Inc.	FL	NIA	Allied International Holdings, Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		12866...	04-2451053..	0	0		T.H.E. Insurance Company	LA	IA	Allied International Holdings, Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	59-2301981..	0	0		Allied Specialty Insurance, Inc.	FL	NIA	Allied International Holdings, Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Allied Specialty Insurance Agency of Canada Ltd.	CAN	NIA	Allied International Holdings, Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	06-1609624..	0	0		XL Global, Inc.	DE	NIA	X.L. America, Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	47-3521363..	0	0		XL Innovate, LLC	DE	NIA	XL Global, Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Oak Circle Capital Partners LLC	DE	NIA	XL Global, Inc.	OWNERSHIP	34.580	AXA SA	N	0
0000		00000...		0	0		HighVista Strategies LLC	DE	NIA	XL Global, Inc.	OWNERSHIP	0.000	AXA SA	N	9
0000		00000...		0	0		Highfields Capital Management LP	DE	NIA	XL Global, Inc.	OWNERSHIP	20.000	AXA SA	N	0
0000		00000...		0	0		Vidrio Financial Ltd	BMU	NIA	XL Global, Inc.	OWNERSHIP	36.100	AXA SA	N	0
0000		00000...	06-1527321..	0	0		X.L. Global Services, Inc.	DE	NIA	X.L. America, Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	20-1208461..	0	0		Eagleview Insurance Brokerage Services, LLC.	DE	NIA	X.L. Global Services, Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	22-3844763..	0	0		XL Life and Annuity Holding Company	DE	NIA	X.L. America, Inc.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	98-0424162..	0	0		XL Investments Ltd	BMU	NIA	XL Bermuda Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		XL Capital Products Ltd	BMU	NIA	XL Investments Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Angel Risk Management Limited	GBR	NIA	XL Capital Products Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		XL Insurance Guernsey Limited	GGY	IA	XL Investments Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	98-0405202..	0	0		Garrison Investments Inc.	BRB	NIA	XL Investments Ltd	OWNERSHIP	100.000	AXA SA	N	13
0000		00000...		0	0		XL (WESTERN EUROPE) S.a.r.l.	LUX	NIA	XL Bermuda Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		XL Swiss Holdings Ltd	CHE	NIA	XL (WESTERN EUROPE) S.a.r.l.	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		XL Re Latin America (Argentina SA)	ARG	IA	XL Swiss Holdings Ltd	OWNERSHIP	20.000	AXA SA	N	0
0000		00000...	30-0479676..	0	0		XL Insurance Switzerland Ltd.	CHE	IA	XL Swiss Holdings Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		XL Services Switzerland Ltd.	CHE	NIA	XL Swiss Holdings Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		XL India Business Services Private Limited	IND	NIA	XL Swiss Holdings Ltd	OWNERSHIP	100.000	AXA SA	N	0

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0000		00000...		0	0		XL Seguros Mexico SA de CV	MEX	IA	XL Swiss Holdings Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	98-1218274..	0	0		Green Holdings Limited	BMU	NIA	XL Bermuda Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Catlin Managers Ltd	BMU	NIA	Green Holdings Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		New Ocean Opportunities Fund Ltd	BMU	NIA	Catlin Managers Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Hubble Re Ltd	BMU	IA	Catlin Managers Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	98-0407572..	0	0		Catlin Insurance Company Ltd	BMU	IA	Green Holdings Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		XL Catlin Middle East	ARE	NIA	Catlin Insurance Company Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Catlin Treasury Guernsey Limited	GGY	NIA	Catlin Insurance Company Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Catlin Labuan Limited	MYS	NIA	Catlin Insurance Company Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Catlin Singapore Pte Ltd	SGP	NIA	Catlin Insurance Company Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Catlin Finance (UK) Ltd	GBR	NIA	Catlin Insurance Company Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	98-1093811..	0	0		Catlin USD Holdings Ltd	BMU	NIA	Catlin Insurance Company Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Catlin Insurance Company (UK) Holdings Ltd	GBR	NIA	Catlin Insurance Company Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Blue Marble Micro Limited	GBR	NIA	Catlin Insurance Company (UK) Holdings Ltd	OWNERSHIP	11.100	AXA SA	N	0
0000		00000...	98-0455349..	0	0		XL Catlin Insurance Company (UK) Ltd	GBR	IA	Catlin Insurance Company (UK) Holdings Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Catlin Treasury Luxembourg S.a.r.l	LUX	NIA	XL Catlin Insurance Company (UK) Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Catlin Insurance Company (UK) Ltd - Escritorio de Representacao no Brazil Ltda	BRA	NIA	XL Catlin Insurance Company (UK) Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	46-3791467..	0	0		Catlin US Investment Holdings LLC	DE	NIA	Catlin Insurance Company Ltd	OWNERSHIP	45.000	AXA SA	N	7
0000		00000...		0	0		Worley Claims Services, LLC	LA	NIA	Catlin US Investment Holdings LLC	OWNERSHIP	13.680	AXA SA	N	0
0000		00000...		0	0		Hampden & Co plc	GBR	NIA	Catlin Insurance Company Ltd	OWNERSHIP	15.600	AXA SA	N	0
0000		00000...		0	0		Catlin Luxembourg S.a.r.l	LUX	NIA	Catlin Insurance Company Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	98-0683316..	0	0		Catlin Re Switzerland Ltd./Catlin Re Schweiz AG	CHE	IA	Catlin Luxembourg S.a.r.l	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	83-3007374..	0	0		Seaview Re Holdings Inc	BMU	NIA	Catlin Re Switzerland Ltd./Catlin Re Schweiz AG	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	98-1464607..	0	0		Seaview Re Ltd	BMU	IA	Seaview Re Holdings Inc	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		XL Latin America Investments Ltd	BMU	NIA	Catlin Re Switzerland Ltd./Catlin Re Schweiz AG	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		XL Resseguros Brasil S.A	BRA	IA	Catlin Re Switzerland Ltd./Catlin Re Schweiz AG	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		XL Re Latin America (Argentina SA)	ARG	IA	Catlin Re Switzerland Ltd./Catlin Re Schweiz AG	OWNERSHIP	80.000	AXA SA	N	0
0000		00000...		0	0		Catlin Re Switzerland Ltd Escritório de Representação no Brasil Ltda	BRA	IA	Catlin Re Switzerland Ltd./Catlin Re Schweiz AG	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Westaim HIIG Limited Partnership, Ontario (Canada)	CAN	NIA	Catlin Re Switzerland Ltd./Catlin Re Schweiz AG	OWNERSHIP	13.110	AXA SA	N	0

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0000		00000...	46-3791467..	0	0		Catlin US Investment Holdings LLC	DE	NIA	Catlin Re Swizterland Ltd./Catlin Re Schweiz AG	OWNERSHIP	40.000	AXA SA	N	7
0000		00000...		0	0		Worley Claims Services, LLC	LA	NIA	Catlin US Investment Holdings LLC	OWNERSHIP	13.680	AXA SA	N	0
0000		00000...	98-1339816..	0	0		XL Value Offshore LLC	BMU	NIA	Catlin Re Swizterland Ltd./Catlin Re Schweiz AG	OWNERSHIP	25.000	AXA SA	N	0
0000		00000...		0	0		Catlin (WUPLC) Holdings Limited	BMU	NIA	Catlin Insurance Company Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Catlin Underwriting	GBR	NIA	Catlin (WUPLC) Holdings Limited	OWNERSHIP	99.900	AXA SA	N	6
0000		00000...		0	0		Catlin (CHUKL) Holdings Limited	BMU	NIA	Catlin Insurance Company Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Catlin Underwriting	GBR	NIA	Catlin (CHUKL) Holdings Limited	OWNERSHIP	0.100	AXA SA	N	6
0000		00000...		0	0		Catlin (North American) Holdings Ltd	GBR	NIA	Catlin Insurance Company Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Catlin Investment Holdings (Jersey) Limited	JEY	NIA	Catlin (North American) Holdings Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Catlin Investment (UK) Limited	GBR	NIA	Catlin Investment Holdings (Jersey) Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Catlin (PUL) Limited	GBR	NIA	Catlin (North American) Holdings Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Catlin (One) Limited	GBR	NIA	Catlin (North American) Holdings Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Catlin Underwriting (UK) Limited DORMANT	GBR	NIA	Catlin (North American) Holdings Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Catlin Risk Solutions Limited	GBR	NIA	Catlin Underwriting (UK) Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Catlin Underwriting Services Limited	GBR	NIA	Catlin Underwriting (UK) Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Catlin (Wellington) Underwriting Agencies Limited	GBR	NIA	Catlin Underwriting (UK) Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Catlin Syndicate Limited	GBR	IA	Catlin (North American) Holdings Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Catlin Holdings (UK) Limited	GBR	NIA	Catlin (North American) Holdings Ltd	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Catlin Holdings Limited	GBR	NIA	Catlin Holdings (UK) Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Catlin Canada Inc	CAN	NIA	Catlin Holdings Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		XL Catlin Japan KK	JPN	NIA	Catlin Holdings Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	98-0242114..	0	0		Catlin Underwriting Agencies Limited	GBR	NIA	Catlin Holdings Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	46-3791467..	0	0		Catlin US Investment Holdings LLC	DE	NIA	Catlin Underwriting Agencies Limited	OWNERSHIP	15.000	AXA SA	N	7
0000		00000...		0	0		Worley Claims Services, LLC	LA	NIA	Catlin US Investment Holdings LLC	OWNERSHIP	13.680	AXA SA	N	0
0000		00000...		0	0		Z Capital N-2L, L.L.C	DE	NIA	Catlin Underwriting Agencies Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Russian Reinsurance Company OJSC	RUS	IA	Catlin Underwriting Agencies Limited	OWNERSHIP	22.500	AXA SA	N	0
0000		00000...		0	0		Z Capital CUAL CO INVEST., L.L.C	DE	NIA	Catlin Underwriting Agencies Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		Z Capital HG-C, L.L.C	DE	NIA	Catlin Underwriting Agencies Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...	90-1032236..	0	0		CUA-CVIII Holdings LLC	DE	NIA	Catlin Underwriting Agencies Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		C-1001 State Co-Investor, LLC	DE	NIA	CUA-CVIII Holdings LLC	OWNERSHIP	100.000	AXA SA	N	0
0000		00000...		0	0		1001 South State Street Holdings Ventures, LLC	DE	NIA	C-1001 State Co-Investor, LLC	OWNERSHIP	28.420	AXA SA	N	0
0000		00000...		0	0		C-140W Co-Investor LLC	DE	NIA	CUA-CVIII Holdings LLC	OWNERSHIP	100.000	AXA SA	N	0

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0000		00000	98-1339816	0	0		XL Value Offshore LLC	BMU	NIA	Catlin Underwriting Agencies Limited	OWNERSHIP	40.000	AXA SA	N	8
0000		00000		0	0		Catlin Guernsey Limited	GGY	NIA	Catlin Holdings Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000		0	0		Catlin Australia Pty Limited	AUS	NIA	Catlin Holdings Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000		0	0		Catlin (BB) Limited	GBR	NIA	Catlin Holdings Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000		0	0		Catlin Hong Kong Ltd Limited	HKG	NIA	Catlin Holdings Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000		0	0		Catlin Angel Strategic Holdings Limited	GBR	NIA	Catlin Holdings Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000		0	0		Catlin Syndicate 6112 Limited (UK)	GBR	NIA	Catlin Holdings Limited	OWNERSHIP	100.000	AXA SA	N	0
0000		00000		0	0		Catlin Syndicate 6121 Limited	GBR	NIA	Catlin Holdings Limited	OWNERSHIP	100.000	AXA SA	N	0

Asterisk	Explanation
1	40% preferred share ownership
2	70% preferred share ownership
3	92% preferred share ownership
4	94.8% preferred share ownership
5	XL America Inc is the general partner of XLA Garrison LP
6	99.9% ownership by Catlin (WUPLC) Holdings Limited, .1% ownership by Catlin (CHUKL) Holdings Limited.
7	Owned 45% Catlin Insurance Company Limited, 40% Catlin Reinsurance Switzerland Limited, 15% Loyd's Syndicate 2003.
8	Owned 40% Catlin Underwriting Agencies Limited ,35% XL Bermuda Ltd , 25% Catlin Re Switzerland Ltd.
9	XL Global, Inc. owns a minority share in HighVista Strategies LLC.
10	General Partner of XL Innovate Partners, LP and Limited Partner of XL Innovate Fund, LP
11	General Partner of XL Innovate Fund, LP
12	XL Financial Solutions, Inc. is the Sole Limited Partner of GPC-INS Partners, LP
13	Limited Partner of XLA Garrison L.P.
14	SMTC Guarantor LLC owns 92.67% of SMTC Acquisiton LLC (the remaining 7.33% is NOT owned by XL Catlin

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
Affiliated Transactions												
00000	00-0000000	AXA SA	0	0	0	0	0	0		(718,909,342)	(718,909,342)	0
00000	00-0000000	AXA Business Services Private Limited	0	0	0	0	14,886,562	0		0	14,886,562	0
00000	90-0226248	AXA Equitable Holdings, Inc	3,341,150,790	(656,309,204)	0	0	(3,842,243)	0		920,925,870	3,601,925,213	0
00000	AA-1580027	AXA Life Insurance Co LTD (Japan)	0	0	0	0	0	0		0	0	19,673,241
00000	30-0011728	AXA Technology Services America Inc	0	0	0	0	58,981,438	0		0	58,981,438	0
00000	52-2197822	AXA Equitable Financial Services, LLC	0	(649,886)	0	0	0	0		0	(649,886)	0
00000	06-1555494	AXA Network, LLC	0	0	0	0	728,984,826	0		0	728,984,826	0
62944	13-5570651	AXA Equitable LIfe Insurance Company	(1,611,964,513)	81,191,949	949,829,324	0	(1,023,877,616)	6,479,981		(194,726,528)	(1,793,067,403)	3,406,275,452
00000	27-5373651	AXA Equitable Funds Management Group, LLC	(450,000,000)	0	0	0	(127,653,804)	0		(7,290,000)	(584,943,804)	0
62880	13-3198083	AXA Equitable Life and Annuity Company	0	14,000,000	0	0	(2,602,579)	(3,284,546)		0	8,112,875	8,042
00000	22-2766036	EHLLC	(31,758,386)	0	0	0	4,320,389	0		0	(27,437,997)	0
00000	13-3434400	AllianceBernstein L.P.	(15,602,012)	0	0	0	63,329,284	0		0	47,727,272	0
00000	13-2677213	ACMC, LLC	(1,247,427,891)	0	(949,829,324)	0	(66,500,000)	0		0	(2,263,757,215)	0
00000	13-3633538	Alliance Bernstein Corporation	0	0	0	0	(2,286,897)	0		0	(2,286,897)	0
00000	13-3350365	AXA Distributors, LLC	0	0	0	0	521,714,196	0		0	521,714,196	0
16234	82-3971925	EQ AZ Life Re Company	0	491,767,141	0	0	(507,134)	(76,983,507)		0	414,276,500	(4,191,581,604)
78077	86-0222062	MONY Life Insurance Company of America	8,176,412	70,000,000	0	0	(162,454,587)	(4,178,126)		0	(88,456,301)	45,545,725
84530	38-2046096	U.S. Financial Life Insurance Company	0	0	0	0	953,733	77,720,509		0	78,674,242	717,846,424
68365	04-2729166	AXA Corporate Solutions Life Re Co	0	0	0	0	(1,886,244)	(218,967)		0	(2,105,211)	402,925,694
36552	36-2994662	Coliseum Reinsurance Company	7,425,600	0	0	0	(143,117)	0		0	7,282,483	0
00000	AA-1320097	AXA Global Life	0	0	0	0	0	210,547		0	210,547	3,397,609
00000	13-3813232	JMR Reality	0	0	0	0	(370,859)	0		0	(370,859)	0
33022	13-3594502	AXA Insurance Company	0	0	0	0	(710,562)	0		0	(710,562)	339,315,400
00000	27-0069788	AXA Liabilities Managers Inc	0	0	0	0	710,562	0		0	710,562	0
15502	46-5697182	CS Life Re Company	0	0	0	0	(1,045,348)	254,109		0	(791,239)	(404,090,583)
21032	13-5009848	GLOBAL Reinsurance Corporation of America	0	0	0	0	(375,499)	0		0	(375,499)	0
00000	00-0000000	AXA DBIO S.C.A.	0	25,000,000	0	0	0	0		0	25,000,000	0
00000	00-0000000	AXA Investment Managers	0	0	0	0	375,499	0		0	375,499	0
00000	13-3907460	Global US Holdings Inc	0	(25,000,000)	0	0	0	0		0	(25,000,000)	0
00000	AA-1340055	AXA Versicherung AG	0	0	0	0	0	0		0	0	(17,526,400)
00000	AA-2730011	AXA Seguros, S.A. de CV	0	0	0	0	0	0		0	0	136,000
00000	AA-1320012	AXA Corporate Solutions Assurance	0	0	0	0	0	0		0	0	(321,925,000)
00000	00-0000000	Global Asset Protection Services, LLC	0	7,000,000	0	0	0	0		0	7,000,000	0
00000	59-2492808	Allied International Holdings, Inc.	0	5,000,000	0	0	0	0		0	5,000,000	0
00000	04-2451053	T.H.E. Insurance Company	0	5,000,000	0	0	0	0		0	5,000,000	0
00000	00-0000000	XL Group Investments Ltd	0	0	0	0	16,730,379	0		0	16,730,379	0
40193	13-3787296	XL Insurance of New York, Inc.	0	0	0	0	396,069	0	*	0	396,069	0
00000	22-3834549	XL Group Investments LLC	(16,000,000)	0	0	0	0	0		0	(16,000,000)	0
24554	75-6017952	XL Insurance America, Inc.	0	50,000,000	0	0	(799,156)	0	*	0	49,200,844	0
19607	75-1221488	XL Select Insurance Company	0	10,000,000	0	0	281,488	0	*	0	10,281,488	0
20583	13-1290712	XL Reinsurance America Inc.	64,900,000	(12,543,338)	0	0	39,425,376	(69,207,945)	*	0	22,574,093	3,443,051,670

SCHEDULE Y

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
22322	95-1479095	Greenwich Insurance Company	0	63,000,000	0	0	564,701,306	0	*	0	627,701,306	0
36940	06-1346380	Indian Harbor Insurance Company	0	8,000,000	0	0	(601,888)	0	*	0	7,398,112	0
37885	85-0277191	XL Specialty Insurance Company	0	20,000,000	0	0	(253,603,973)	0	*	0	(233,603,973)	0
00000	06-1527321	X.L. Global Services, Inc	0	0	0	0	(360,139,603)	0		0	(360,139,603)	0
00000	06-1516268	X.L. America, Inc	0	(150,000,000)	0	0	(4,019,270)	0		0	(154,019,270)	0
00000	AA-3190577	XL Bermuda Ltd	0	0	0	0	0	92,144,756		0	92,144,756	(1,870,365,130)
00000	30-0479676	XL Insurance Switzerland Ltd	0	0	0	0	0	(2,289,796)		0	(2,289,796)	0
00000	00-0000000	XL London Market Ltd- Syndicate 1209	0	0	0	0	0	(76,229)		0	(76,229)	(1,280)
00000	AA-3194161	Catlin Insurance Company Ltd	0	0	0	0	0	(1,861,322)		0	(1,861,322)	(36,359,120)
00000	00-0000000	Catlin Re Switzerland Ltd	0	0	0	0	0	(52,592,504)		0	(52,592,504)	(2,056,868,310)
00000	30-0479685	XL Insurance Company SE	0	0	0	0	0	(1,364,918)		0	(1,364,918)	(17,749,000)
00000	AA-1128003	Catlin Syndicate Limited	0	0	0	0	0	(1,210,155)		0	(1,210,155)	(5,796,410)
19518	20-4929941	Catlin Insurance Company Inc	0	0	0	0	(1,228,856)	0	**	0	(1,228,856)	0
15989	71-6053839	Catlin Specialty Insurance Company	0	0	0	0	(742,110)	36,516,980	**	0	35,774,870	552,317,900
24503	52-0249520	Catlin Indemnity Company	0	0	0	0	(399,762)	0	**	0	(399,762)	0
00000	AA-1780072	XL Re Europe SE	0	0	0	0	0	0		0	0	(11,660)
00000	AA-0000000	Vector Reinsurance Ltd	0	0	0	0	0	(58,867)		0	(58,867)	(136,420)
00000	06-1609624	XL Value Onshore LLC	(48,900,000)	(5,456,662)	0	0	0	0		0	(54,356,662)	0
00000	AA-1340055	AXA Versicherung AG	0	0	0	0	0	0		0	0	(111,900)
00000	AA-1244102	AXA Belgium SA	0	0	0	0	0	0		0	0	(190)
00000	AA-1320012	AXA Corporate Solutions Assurance SA	0	0	0	0	0	0		0	0	(7,897,800)
00000	AA-1320229	AXA France I.A.R.D	0	0	0	0	0	0		0	0	(11,140)
00000	AA-1841040	AXA Seguros Generales, S.A. de Seguros y Reaseguros	0	0	0	0	0	0		0	0	(1,320)
33022	13-3594502	AXA Insurance Company	0	0	0	0	0	0		0	0	(59,890)
9999999.	Control Totals		0	0	0	0	0	0	XXX	0	0	0

Detailed Explanation

1. Footnote - XL entities (*) participate in a pooling agreement. Catlin entities (**) have a seperate pooling agreement. Please refer to note 26 of their respective annual statements.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

		Responses
	MARCH FILING	
1.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2.	Will the confidential Risk-Based Capital Report be filed with the NAIC by March 1?	YES
3.	Will the confidential Risk-Based Capital Report be filed with the state of domicile, if required, by March 1?	YES
4.	Will an actuarial opinion be filed by March 1?	YES
	APRIL FILING	
5.	Will Management's Discussion and Analysis be filed by April 1?	YES
6.	Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
7.	Will the Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit (if required) be filed with state of domicile and the NAIC by April 1?	YES
8.	Will the Supplemental Investment Risk Interrogatories be filed by April 1?	YES
	JUNE FILING	
9.	Will an audited financial report be filed by June 1?	YES
10.	Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES
	AUGUST FILING	
11.	Will regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1?	YES

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

	MARCH FILING	
12.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
13.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
14.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
15.	Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	NO
16.	Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	YES
17.	Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?	YES
18.	Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1?	NO
19.	Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1?	NO
20.	Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
21.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
22.	Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1?	NO
23.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
24.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
25.	Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?	NO
26.	Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?	NO
27.	Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1?	NO
28.	Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1?	NO
29.	Will the Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	NO
30.	Will the Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	NO
31.	Will the Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	NO
32.	Will the Actuarial Certification Related to the Reserves required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	NO
33.	Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1?	NO
34.	Will the Workers' Compensation Carve-Out Supplement be filed by March 1?	NO
35.	Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1?	YES
36.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
37.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO
38.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
39.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
40.	Will the VM-20 Reserves Supplement be filed with the state of domicile and the NAIC by March 1?	NO
	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?	YES
42.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
43.	Will the Interest-Sensitive Life Insurance Products Report Forms be filed with the state of domicile and the NAIC by April 1?	YES
44.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
45.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
46.	Will the Analysis of Annuity Operations by Lines of Business be filed with the state of domicile and the NAIC by April 1?	YES
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?	YES
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?	NO
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?	NO
50.	Will the confidential Actuarial Memorandum required by Actuarial Guideline XXXVIII 8D be filed with the state of domicile by April 30?	NO
51.	Will the Supplemental Term and Universal Life Insurance Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
52.	Will the Variable Annuities Supplement be filed with the state of domicile and the NAIC by April 1?	NO

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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AUGUST FILING

53. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? NO

EXPLANATIONS:

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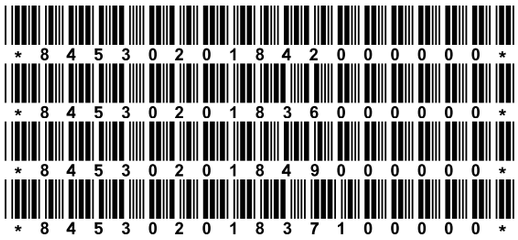

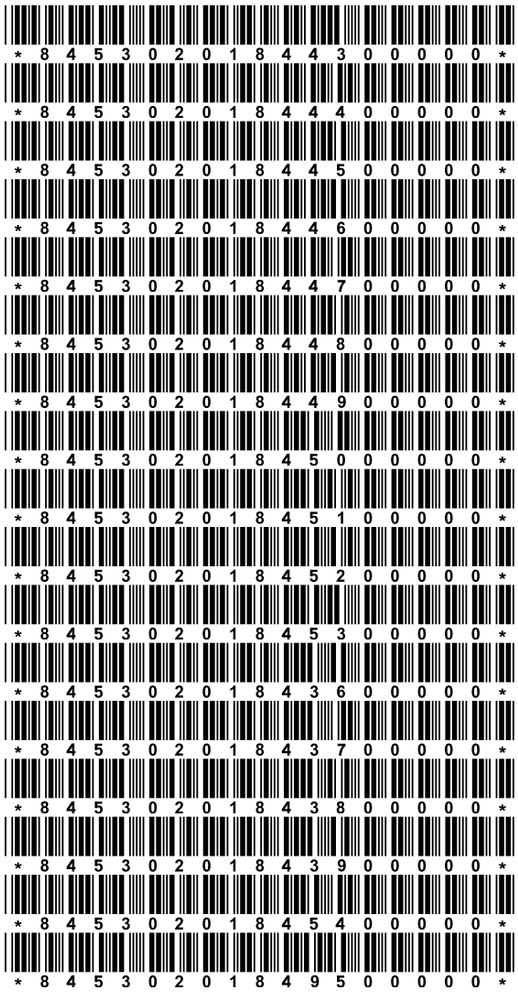

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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.

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Overflow Page
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Sch. O-Heading and Barcode
NONE

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

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

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

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

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

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

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

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

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

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 2014	2 2015	3 2016	4 2017	5 2018
1. 2014	0	0	0	0	0
2. 2015	XXX	0	0	0	0
3. 2016	XXX	XXX	0	0	0
4. 2017	XXX	XXX	XXX	0	0
5. 2018	XXX	XXX	XXX	XXX	0

NONE

Section B - Other Accident and Health

1. 2014	0	0	0	0	0
2. 2015	XXX	0	0	0	0
3. 2016	XXX	XXX	0	0	0
4. 2017	XXX	XXX	XXX	0	0
5. 2018	XXX	XXX	XXX	XXX	0

NONE

Section C - Credit Accident and Health

1. 2014	0	0	0	0	0
2. 2015	XXX	0	0	0	0
3. 2016	XXX	XXX	0	0	0
4. 2017	XXX	XXX	XXX	0	0
5. 2018	XXX	XXX	XXX	XXX	0

NONE

SUPPLEMENTAL SCHEDULE O - PART 5

($000 OMITTED)

Reserve and Liability Methodology - Exhibits 6 and 8

Line of Business	1 Methodology	2 Amount
1. Industrial life		0
2. Ordinary life	Standard Factor	33,266
3. Individual annuity		0
4. Supplementary contracts		0
5. Credit life		0
6. Group life		0
7. Group annuities		0
8. Group accident and health		0
9. Credit accident and health		0
10. Other accident and health		0
11. Total		33,266

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

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

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

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

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

Sch. O - Pt. 2 - Sn. G
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Sch. O - Pt. 3 - Sn. D
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Sch. O - Pt. 3 - Sn. E
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Sch. O - Pt. 3 - Sn. F
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Sch. O - Pt. 3 - Sn. G
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Sch. O - Pt. 4 - Sn. E
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2018 ALPHABETICAL INDEX
LIFE ANNUAL STATEMENT BLANK