



# ANNUAL STATEMENT

For the Year Ended December 31, 2019

of the Condition and Affairs of the

## Alliance Of Transylvanian Saxons

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

NAIC Company Code..... 56197

Employer's ID Number..... 34-0138510

Organized under the Laws of OH

State of Domicile or Port of Entry OH

Country of Domicile US

Licensed as Business Type:

Fraternal Benefit Society

Incorporated/Organized..... August 31, 1902

Commenced Business..... August 31, 1902

Statutory Home Office

5393 Pearl Road .. Cleveland .. OH .. US .. 44129-1597  
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office

5393 Pearl Road .. Cleveland .. OH .. US .. 44129-1597  
(Street and Number) (City or Town, State, Country and Zip Code)

440-842-8442

(Area Code) (Telephone Number)

Mail Address

5393 Pearl Road .. Cleveland .. OH .. US .. 44129-1597  
(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records

5393 Pearl Road .. Cleveland .. OH .. US .. 44129-1597  
(Street and Number) (City or Town, State, Country and Zip Code)

440-842-8442

(Area Code) (Telephone Number)

Internet Web Site Address

http://www.atsaxons.com

Statutory Statement Contact

Denise Aeling Crawford  
(Name)  
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(E-Mail Address)

440-842-8442

(Area Code) (Telephone Number) (Extension)

440-842-5442

(Fax Number)

### OFFICERS

**Name**  
1. Joan Annette Miller-Malue  
3. Denise Aeling Crawford

**Title**  
President  
Treasurer

**Name**  
2. Monica Frances Gilles  
4. Miller & Newberg

**Title**  
Secretary  
Consulting Actuary

Robert Burns Cunningham, III  
Randall B. Floyd

First Vice President  
Third Vice President

Monica Marie Weber

Second Vice President

### OTHER

Denise Aeling Crawford  
Joan Annette Miller-Malue  
Monica Marie Weber

Robert Burns Cunningham III  
Barbara A. Spack  
Ingrid E. Weihs-Ferguson

Randall B. Floyd  
Jacob F. Spor  
Margarete I. Ziegler

Monica Frances Gilles  
Michael Teutsch Jr.

### DIRECTORS OR TRUSTEES

State of..... Ohio  
County of.... Cuyahoga

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

(Signature)  
Joan Annette Miller-Malue  
1. (Printed Name)  
President  
(Title)

(Signature)  
Monica Frances Gilles  
2. (Printed Name)  
Secretary  
(Title)

(Signature)  
Denise Aeling Crawford  
3. (Printed Name)  
Treasurer  
(Title)

Subscribed and sworn to before me

This \_\_\_\_\_ day of \_\_\_\_\_ 2020

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

Annual Statement for the year 2019 of the **Alliance Of Transylvanian Saxons**  
**ASSETS**

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D).....	83,307,563		83,307,563	74,376,406
2. Stocks (Schedule D):				
2.1 Preferred stocks.....			0	
2.2 Common stocks.....	1,100,411		1,100,411	868,114
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens.....			0	
3.2 Other than first liens.....			0	
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....	7,950		7,950	7,950
4.2 Properties held for the production of income (less \$.....0 encumbrances).....			0	
4.3 Properties held for sale (less \$.....0 encumbrances).....			0	
5. Cash (\$....3,635,302, Schedule E-Part 1), cash equivalents (\$....3,201,595, Schedule E-Part 2) and short-term investments (\$.....0, Schedule DA).....	6,836,897		6,836,897	15,014,321
6. Contract loans (including \$.....0 premium notes).....	238,385		238,385	211,402
7. Derivatives (Schedule DB).....			0	
8. Other invested assets (Schedule BA).....	1,599,791		1,599,791	1,637,245
9. Receivables for securities.....			0	
10. Securities lending reinvested collateral assets (Schedule DL).....			0	
11. Aggregate write-ins for invested assets.....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	93,090,997	0	93,090,997	92,115,438
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	1,173,127		1,173,127	1,084,234
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....			0	
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....	5,171		5,171	6,212
15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0).....			0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....			0	
16.2 Funds held by or deposited with reinsured companies.....			0	
16.3 Other amounts receivable under reinsurance contracts.....			0	
17. Amounts receivable relating to uninsured plans.....			0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0	
18.2 Net deferred tax asset.....			0	
19. Guaranty funds receivable or on deposit.....			0	
20. Electronic data processing equipment and software.....	14,654		14,654	1,533
21. Furniture and equipment, including health care delivery assets (\$.....0).....			0	
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0	
23. Receivables from parent, subsidiaries and affiliates.....			0	
24. Health care (\$.....0) and other amounts receivable.....			0	
25. Aggregate write-ins for other-than-invested assets.....	629,840	629,840	0	3,167
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	94,913,789	629,840	94,283,949	93,210,584
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. TOTAL (Lines 26 and 27).....	94,913,789	629,840	94,283,949	93,210,584

**DETAILS OF WRITE-INS**

1101. ....			0	
1102. ....			0	
1103. ....			0	
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501. Retirement Funds.....	629,840	629,840	0	
2502. Deposit.....			0	3,167
2503. ....			0	
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	629,840	629,840	0	3,167

# Alliance Of Transylvanian Saxons

## LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Aggregate reserve for life contracts \$....70,050,007 (Exhibit 5, Line 9999999) less \$.....0 included in Line 6.3 (including \$.....0 Modco Reserve).....	70,050,007	....71,181,342
2. Aggregate reserve for accident and health contracts (including \$.....0 Modco Reserve).....	.....	.....
3. Liability for deposit-type contracts (Exhibit 7, Line 14, Col. 1) (including \$.....0 Modco Reserve).....	8,995,312	....8,189,011
4. Contract claims:		
4.1 Life (Exhibit 8, Part 1, Line 4.4, Col. 1 less sum of Cols. 9, 10 and 11).....	1,421,602	....1,184,003
4.2 Accident and health (Exhibit 8, Part 1, Line 4.4, sum of Cols. 9, 10 and 11).....	.....	.....
5. Policyholders' dividends/refunds to members \$.....0 and coupons \$.....0 due and unpaid (Exhibit 4, Line 10).....	.....	.....
6. Provision for policyholders' dividends, refunds to members and coupons payable in following calendar year - estimated amounts:		
6.1 Policyholders' dividends and refunds to members apportioned for payment (including \$.....0 Modco).....	.....	.....
6.2 Policyholders' dividends and refunds to members not yet apportioned (including \$.....0 Modco).....	55,000	....55,000
6.3 Coupons and similar benefits (including \$.....0 Modco).....	.....	.....
7. Amount provisionally held for deferred dividend policies not included in Line 6.....	.....	.....
8. Premiums and annuity considerations for life and accident and health contracts received in advance less \$.....0 discount; including \$.....0 accident and health premiums (Exhibit 1, Part 1, Col. 1, sum of Lines 4 and 14).....	1,491	....1,308
9. Contract liabilities not included elsewhere:		
9.1 Surrender values on canceled contracts.....	.....	.....
9.2 Provision for experience rating refunds, including the liability of \$.....0 accident and health experience rating refunds of which \$.....0 is for medical loss ratio rebate per the Public Health Service Act.....	.....	.....
9.3 Other amounts payable on reinsurance, including \$.....0 assumed and \$.....0 ceded.....	.....	.....
9.4 Interest Maintenance Reserve (IMR, Line 6).....	283,998	....375,878
10. Commissions to agents due or accrued - life and annuity contracts \$.....0, accident and health \$.....0 and deposit-type contract funds \$.....0.....	104	....(20)
11. Commissions and expense allowances payable on reinsurance assumed.....	.....	.....
12. General expenses due or accrued (Exhibit 2, Line 12, Col. 7).....	29,438	....21,915
13. Transfers to Separate Accounts due or accrued (net) (including \$.....0 accrued for expense allowances recognized in reserves, net of reinsured allowances).....	.....	.....
14. Taxes, licenses and fees due or accrued, excluding federal income taxes (Exhibit 3, Line 9, Col. 6).....	3,564	....3,581
15.1 Current federal and foreign income taxes, including \$.....0 on realized capital gains (losses).....	.....	.....
15.2 Net deferred tax liability.....	.....	.....
16. Unearned investment income.....	.....	.....
17. Amounts withheld or retained by reporting entity as agent or trustee.....	.....	.....
18. Amounts held for agents' account, including \$.....0 agents' credit balances.....	.....	.....
19. Remittances and items not allocated.....	.....	.....
20. Net adjustment in assets and liabilities due to foreign exchange rates.....	.....	.....
21. Liability for benefits for employees and agents if not included above.....	.....	.....
22. Borrowed money \$.....0 and interest thereon \$.....0.....	.....	.....
23. Dividends to stockholders declared and unpaid.....	.....	.....
24. Miscellaneous liabilities:		
24.01 Asset valuation reserve (AVR Line 16, Col. 7).....	479,526	....296,806
24.02 Reinsurance in unauthorized and certified (\$.....0) companies.....	.....	.....
24.03 Funds held under reinsurance treaties with unauthorized and certified (\$.....0) reinsurers.....	.....	.....
24.04 Payable to parent, subsidiaries and affiliates.....	.....	.....
24.05 Drafts outstanding.....	.....	.....
24.06 Liability for amounts held under uninsured plans.....	.....	.....
24.07 Funds held under coinsurance.....	.....	.....
24.08 Derivatives.....	.....	.....
24.09 Payable for securities.....	.....	.....
24.10 Payable for securities lending.....	.....	.....
24.11 Capital notes \$.....0 and interest thereon \$.....0.....	.....	.....
25. Aggregate write-ins for liabilities.....	519,640	....523,011
26. Total liabilities excluding Separate Accounts business (Lines 1 to 25).....	81,839,682	....81,831,835
27. From Separate Accounts Statement.....	.....	.....
28. Total liabilities (Line 26 and 27).....	81,839,682	....81,831,835
29. Common capital stock.....	.....	.....
30. Preferred capital stock.....	.....	.....
31. Aggregate write-ins for other-than-special surplus funds.....	0	0
32. Surplus notes.....	.....	.....
33. Gross paid in and contributed surplus (Page 3, Line 33, Col. 2 plus Page 4, Line 51.1, Col. 1).....	.....	.....
34. Aggregate write-ins for special surplus funds.....	0	0
35. Unassigned funds (surplus).....	12,444,267	....11,378,750
36. Less treasury stock, at cost:		
36.1 ....0.000 shares common (value included in Line 29 \$.....0).....	.....	.....
36.2 ....0.000 shares preferred (value included in Line 30 \$.....0).....	.....	.....
37. Surplus (Total Lines 31 + 32 + 33 + 34 + 35 - 36) (including \$.....0 in Separate Accounts Statement).....	12,444,267	....11,378,750
38. Totals of Lines 29, 30 and 37 (Page 4, Line 55).....	12,444,267	....11,378,750
39. Totals of Lines 28 and 38 (Page 2, Line 28, Col. 3).....	94,283,949	....93,210,585

### DETAILS OF WRITE-INS

2501. Scholarship Fund.....	517,218	....511,461
2502. Payroll Withholdings.....	2,422	....11,550
2503. ....	.....	.....
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	519,640	....523,011
3101. ....	.....	.....
3102. ....	.....	.....
3103. ....	.....	.....
3198. Summary of remaining write-ins for Line 31 from overflow page.....	0	0
3199. Totals (Lines 3101 through 3103 plus 3198) (Line 31 above).....	0	0
3401. ....	.....	.....
3402. ....	.....	.....
3403. ....	.....	.....
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0

Annual Statement for the year 2019 of the **Alliance Of Transylvanian Saxons**  
**SUMMARY OF OPERATIONS**

		1 Current Year	2 Prior Year
1. Premiums and annuity considerations for life and accident and health contracts (Exhibit 1, Part 1, Line 20.4, Col. 1, less Col. 11)		1,973,635	3,714,007
2. Considerations for supplementary contracts with life contingencies			
3. Net investment income (Exhibit of Net Investment Income, Line 17)		4,631,536	4,471,804
4. Amortization of Interest Maintenance Reserve (IMR) (Line 5)		97,290	104,813
5. Separate Accounts net gain from operations excluding unrealized gains or losses			
6. Commissions and expense allowances on reinsurance ceded (Exhibit 1, Part 2, Line 26.1, Col. 1)			
7. Reserve adjustments on reinsurance ceded			
8. Miscellaneous Income:			
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts			
8.2 Charges and fees for deposit-type contracts			
8.3 Aggregate write-ins for miscellaneous income		68,709	3,201
9. Totals (Lines 1 to 8.3)		6,771,170	8,293,825
10. Death benefits		114,244	281,571
11. Matured endowments (excluding guaranteed annual pure endowments)		.487	1,000
12. Annuity benefits (Exhibit 8, Part 2, Line 6.4, Cols. 4 + 8)		5,478,451	3,051,763
13. Disability benefits and benefits under accident and health contracts			
14. Coupons, guaranteed annual pure endowments and similar benefits			
15. Surrender benefits and withdrawals for life contracts		39,327	45,340
16. Group conversions			
17. Interest and adjustments on contract or deposit-type contract funds		324,013	281,127
18. Payments on supplementary contracts with life contingencies			
19. Increase in aggregate reserves for life and accident and health contracts		(1,131,336)	2,718,262
20. Totals (Lines 10 to 19)		4,825,186	6,379,063
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) (Exhibit 1, Part 2, Line 31, Col. 1)		5,418	4,425
22. Commissions and expense allowances on reinsurance assumed (Exhibit 1, Part 2, Line 26.2, Col. 1)			
23. General insurance expenses and fraternal expenses (Exhibit 2, Line 10, Columns 1, 2, 3, 4 and 6)		852,445	838,769
24. Insurance taxes, licenses and fees, excluding federal income taxes (Exhibit 3, Line 7, Cols. 1 + 2 + 3 + 5)		22,046	21,273
25. Increase in loading on deferred and uncollected premiums		(481)	574
26. Net transfers to or (from) Separate Accounts net of reinsurance		0	0
27. Aggregate write-ins for deductions			
28. Totals (Lines 20 to 27)		5,704,614	7,244,104
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28)		1,066,556	1,049,721
30. Dividends to policyholders and refunds to members		51,821	51,774
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)		1,014,735	997,947
32. Federal and foreign income taxes incurred (excluding tax on capital gains)			
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32)		1,014,735	997,947
34. Net realized capital gains (losses) (excluding gains (losses) transferred to the IMR) less capital gains tax of \$.....0 (excluding taxes of \$.....0 transferred to the IMR)		(28,813)	55,051
35. Net income (Line 33 plus Line 34)		985,922	1,052,998
<b>CAPITAL AND SURPLUS ACCOUNT</b>			
36. Capital and surplus, December 31, prior year (Page 3, Line 38, Col. 2)		11,378,750	10,230,865
37. Net income (Line 35)		985,922	1,052,998
38. Change in net unrealized capital gains (losses) less capital gains tax of \$.....0		262,317	(118,625)
39. Change in net unrealized foreign exchange capital gain (loss)			
40. Change in net deferred income tax			
41. Change in nonadmitted assets		(25,219)	(17,513)
42. Change in liability for reinsurance in unauthorized and certified companies			
43. Change in reserve on account of change in valuation basis (increase) or decrease			
44. Change in asset valuation reserve		(182,720)	213,511
45. Change in treasury stock, (Page 3, Lines 36.1 and 36.2 Col. 2 minus Col. 1)			
46. Surplus (contributed to) withdrawn from Separate Accounts during period			
47. Other changes in surplus in Separate Accounts Statement			
48. Change in surplus notes			
49. Cumulative effect of changes in accounting principles			
50. Capital changes:			
50.1 Paid in			
50.2 Transferred from surplus (Stock Dividend)			
50.3 Transferred to surplus			
51. Surplus adjustment:			
51.1 Paid in			
51.2 Transferred to capital (Stock Dividend)			
51.3 Transferred from capital			
51.4 Change in surplus as a result of reinsurance			
52. Dividends to stockholders			
53. Aggregate write-ins for gains and losses in surplus		25,217	17,514
54. Net change in capital and surplus for the year (Lines 37 through 53)		1,065,517	1,147,885
55. Capital and surplus, December 31, current year (Lines 36 + 54) (Page 3, Line 38)		12,444,267	11,378,750

**DETAILS OF WRITE-INS**

08.301. Miscellaneous		68,709	3,201
08.302.			
08.303.			
08.398. Summary of remaining write-ins for Line 8.3 from overflow page		0	0
08.399. Totals (Lines 08.301 through 08.303 plus 08.398) (Line 8.3 above)		68,709	3,201
2701.			
2702.			
2703.			
2798. Summary of remaining write-ins for Line 27 from overflow page		0	0
2799. Totals (Lines 2701 through 2703 plus 2798) (Line 27 above)		0	0
5301. Retirement Funds Adjustment		25,217	17,514
5302.			
5303.			
5398. Summary of remaining write-ins for Line 53 from overflow page		0	0
5399. Totals (Lines 5301 through 5303 plus 5398) (Line 53 above)		25,217	17,514

**CASH FLOW**

	1 Current Year	2 Prior Year
<b>CASH FROM OPERATIONS</b>		
1. Premiums collected net of reinsurance.....	1,975,340	3,713,283
2. Net investment income.....	4,542,361	4,494,635
3. Miscellaneous income.....	68,709	3,201
4. Total (Lines 1 through 3).....	6,586,410	8,211,119
5. Benefit and loss related payments.....	5,337,715	3,442,809
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....		
7. Commissions, expenses paid and aggregate write-ins for deductions.....	871,814	864,467
8. Dividends paid to policyholders.....	51,821	51,774
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....		
10. Total (Lines 5 through 9).....	6,261,350	4,359,050
11. Net cash from operations (Line 4 minus Line 10).....	325,060	3,852,069
<b>CASH FROM INVESTMENTS</b>		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds.....	11,059,193	3,471,342
12.2 Stocks.....	1,604	181,944
12.3 Mortgage loans.....		
12.4 Real estate.....		
12.5 Other invested assets.....	42,106	1,182,788
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....		18,579
12.7 Miscellaneous proceeds.....		
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	11,102,903	4,854,653
13. Cost of investments acquired (long-term only):		
13.1 Bonds.....	20,169,768	5,719,681
13.2 Stocks.....	397	159,775
13.3 Mortgage loans.....		
13.4 Real estate.....		
13.5 Other invested assets.....		
13.6 Miscellaneous applications.....		
13.7 Total investments acquired (Lines 13.1 to 13.6).....	20,170,165	5,879,456
14. Net increase (decrease) in contract loans and premium notes.....	26,983	10,011
15. Net cash from investments (Line 12.8 minus Lines 13.7 minus Line 14).....	(9,094,245)	(1,034,814)
<b>CASH FROM FINANCING AND MISCELLANEOUS SOURCES</b>		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes.....		
16.2 Capital and paid in surplus, less treasury stock.....		
16.3 Borrowed funds.....		
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....		
16.5 Dividends to stockholders.....		
16.6 Other cash provided (applied).....	591,761	(186,736)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6).....	591,761	(186,736)
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17).....	(8,177,424)	2,630,519
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year.....	15,014,321	12,383,802
19.2 End of year (Line 18 plus Line 19.1).....	6,836,897	15,014,321

Note: Supplemental disclosures of cash flow information for non-cash transactions:

20.0001 .....		
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## ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - SUMMARY

	1 Total	2 Individual Life	3 Group Life	4 Individual Annuities	5 Group Annuities	6 Accident and Health	7 Fraternal	8 Other Lines of Business	9 YRT Mortality Risk Only
1. Premiums and annuity considerations for life and accident and health contracts	1,973,635	75,617		1,898,018					
2. Considerations for supplementary contracts with life contingencies	0	XXX	XXX			XXX	XXX		XXX
3. Net investment income	4,631,536	719,404		3,735,639					
4. Amortization of Interest Maintenance Reserve (IMR)	.97,290	11,670		85,620					
5. Separate Accounts net gain from operations excluding unrealized gains or losses	0						XXX		
6. Commissions and expense allowances on reinsurance ceded	0						XXX		
7. Reserve adjustments on reinsurance ceded	0						XXX		
8. Miscellaneous Income:									
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts	0						XXX		
8.2 Charges and fees for deposit-type contracts	0						XXX		
8.3 Aggregate write-ins for miscellaneous income	68,709	68,709	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3)	6,771,170	875,400	0	5,719,277	0	0	176,493	0	0
10. Death benefits	114,244	114,244					XXX	XXX	
11. Matured endowments (excluding guaranteed annual pure endowments)	487	487					XXX	XXX	
12. Annuity benefits	5,478,451	XXX	XXX	5,478,451			XXX	XXX	XXX
13. Disability benefits and benefits under accident and health contracts	0						XXX		
14. Coupons, guaranteed annual pure endowments and similar benefits	0						XXX		
15. Surrender benefits and withdrawals for life contracts	39,327	39,327					XXX	XXX	
16. Group conversions	0						XXX		
17. Interest and adjustments on contract or deposit-type contract funds	324,013	48,052		275,961			XXX		
18. Payments on supplementary contracts with life contingencies	0						XXX	XXX	
19. Increase in aggregate reserves for life and accident and health contracts	(1,131,336)	122,521		(1,253,857)			XXX		
20. Totals (Lines 10 to 19)	4,825,186	324,631	0	4,500,555	0	0	XXX	0	0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)	5,418	.841		.4,577					XXX
22. Commissions and expense allowances on reinsurance assumed	0						XXX		
23. General insurance expenses and fraternal expenses	.852,445	330,660		.345,292					
24. Insurance taxes, licenses and fees, excluding federal income taxes	.22,046	11,023		11,023					
25. Increase in loading on deferred and uncollected premiums	(481)	(481)					XXX		
26. Net transfers to or (from) Separate Accounts net of reinsurance	0						XXX		
27. Aggregate write-ins for deductions	0	0	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27)	5,704,614	666,674	0	4,861,447	0	0	176,493	0	0
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28)	1,066,556	208,726	0	.857,830	0	0	0	0	0
30. Dividends to policyholders and refunds to members	51,821	51,821					XXX		
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)	1,014,735	156,905	0	.857,830	0	0	0	0	0
32. Federal income taxes incurred (excluding tax on capital gains)	0								
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32)	1,014,735	156,905	0	.857,830	0	0	0	0	0
34. Policies/certificates in force end of year	7,857	5,458		2,399			XXX		

## DETAILS OF WRITE-INS

**ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - INDIVIDUAL LIFE INSURANCE (b)**

	1	2	3	4	5	6	7	8	9	10	11	12
	Total	Industrial Life	Whole Life	Term Life	Indexed Life	Universal Life	Universal Life with Secondary Guarantees	Variable Life	Variable Universal Life	Credit Life (c)	Other Individual Life	YRT Mortality Risk Only
1. Premiums for life contracts (a).	75,617		75,617									
2. Considerations for supplementary contracts with life contingencies.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Net investment income.	719,404		719,404									
4. Amortization of Interest Maintenance Reserve (IMR).	11,670		11,670									
5. Separate Accounts net gain from operations excluding unrealized gains or losses.	0											
6. Commissions and expense allowances on reinsurance ceded.	0											
7. Reserve adjustments on reinsurance ceded.	0											
8. Miscellaneous Income:												
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts.	0											
8.2 Charges and fees for deposit-type contracts.	0											
8.3 Aggregate write-ins for miscellaneous income.	68,709	0	68,709	0	0	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3).	875,400	0	875,400	0	0	0	0	0	0	0	0	0
10. Death benefits.	114,244		114,244									
11. Matured endowments (excluding guaranteed annual pure endowments).	487		487									
12. Annuity benefits.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Disability benefits and benefits under accident and health contracts.	0											
14. Coupons, guaranteed annual pure endowments and similar benefits.	0											
15. Surrender benefits and withdrawals for life contracts.	39,327		39,327									
16. Group conversions.	0											
17. Interest and adjustments on contract or deposit-type contract funds.	48,052		48,052									
18. Payments on supplementary contracts with life contingencies.	0											
19. Increase in aggregate reserves for life and accident and health contracts.	122,521		122,521									
20. Totals (Lines 10 to 19).	324,631	0	324,631	0	0	0	0	0	0	0	0	0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only).	841		841									XXX
22. Commissions and expense allowances on reinsurance assumed.	0											
23. General insurance expenses.	330,660		330,660									
24. Insurance taxes, licenses and fees, excluding federal income taxes.	11,023		11,023									
25. Increase in loading on deferred and uncollected premiums.	(481)		(481)									
26. Net transfers to or (from) Separate Accounts net of reinsurance.	0											
27. Aggregate write-ins for deductions.	0	0	0	0	0	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27).	666,674	0	666,674	0	0	0	0	0	0	0	0	0
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28).	208,726		208,726									
30. Dividends to policyholders and refunds to members.	51,821		51,821									
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30).	156,905	0	156,905	0	0	0	0	0	0	0	0	0
32. Federal income taxes incurred (excluding tax on capital gains).	0											
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32).	156,905	0	156,905	0	0	0	0	0	0	0	0	0
34. Policies/certificates in force end of year.	5,458		5,458									

**DETAILS OF WRITE-INS**

08.301. Miscellaneous.	68,709		68,709									
08.302.	0											
08.303.	0											
08.398. Summary of remaining write-ins for Line 8.3 from overflow page.	0	0	0	0	0	0	0	0	0	0	0	0
08.399. Total (Lines 08.301 through 08.303 plus 08.398) (Line 8.3 above).	68,709	0	68,709	0	0	0	0	0	0	0	0	0
2701.	0											
2702.	0											
2703.	0											
2798. Summary of remaining write-ins for Line 27 from overflow page.	0	0	0	0	0	0	0	0	0	0	0	0
2799. Total (Lines 2701 through 2703 plus 2798) (Line 27 above).	0	0	0	0	0	0	0	0	0	0	0	0

(a) Include premium amounts for preneed plans included in Line 1.

(b) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

(c) Individual and Group Credit Life are combined and included on page. (indicate whether included with Individual or Group).

**ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - GROUP INSURANCE (c)**

	1 Total	2 Whole Life	3 Term Life	4 Universal Life	5 Variable Life	6 Variable Universal Life	7 Credit Life (d)	8 Other Group Life (a)	9 YRT Mortality Risk Only
1. Premiums for life contracts (b).....	0								
2. Considerations for supplementary contracts with life contingencies.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....
3. Net investment income.....	0								
4. Amortization of Interest Maintenance Reserve (IMR).....	0								
5. Separate Accounts net gain from operations excluding unrealized gains or losses.....	0								
6. Commissions and expense allowances on reinsurance ceded.....	0								
7. Reserve adjustments on reinsurance ceded.....	0								
8. Miscellaneous Income:									
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts.....	0								
8.2 Charges and fees for deposit-type contracts.....	0								
8.3 Aggregate write-ins for miscellaneous income.....	0	0	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3).....	0	0	0	0	0	0	0	0	0
10. Death benefits.....	0								
11. Matured endowments (excluding guaranteed annual pure endowments).....	0								
12. Annuity benefits.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....
13. Disability benefits and benefits under accident and health contracts.....	0								
14. Coupons, guaranteed annual pure endowments and similar benefits.....	0								
15. Surrender benefits and withdrawals for life contracts.....	0								
16. Group conversions.....	0								
17. Interest and adjustments on contract or deposit-type contract funds.....	0								
18. Payments on supplementary contracts with life contingencies.....	0								
19. Increase in aggregate reserves for life and accident and health contracts.....	0								
20. Totals (Lines 10 to 19).....	0	0	0	0	0	0	0	0	0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only).....	0								XXX.....
22. Commissions and expense allowances on reinsurance assumed.....	0								
23. General insurance expenses.....									
24. Insurance taxes, licenses and fees, excluding federal income taxes.....	0								
25. Increase in loading on deferred and uncollected premiums.....	0								
26. Net transfers to or (from) Separate Accounts net of reinsurance.....	0								
27. Aggregate write-ins for deductions.....	0	0	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27).....	0	0	0	0	0	0	0	0	0
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28).....	0	0	0	0	0	0	0	0	0
30. Dividends to policyholders and refunds to members.....	0								
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30).....	0	0	0	0	0	0	0	0	0
32. Federal income taxes incurred (excluding tax on capital gains).....	0								
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32).....	0	0	0	0	0	0	0	0	0
34. Policies/certificates in force end of year.....	0								

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

08.301. ....	0								
08.302. ....	0								
08.303. ....	0								
08.398. Summary of remaining write-ins for Line 8.3 from overflow page.....	0	0	0	0	0	0	0	0	0
08.399. Total (Lines 08.301 through 08.303 plus 08.398) (Line 8.3 above).....	0	0	0	0	0	0	0	0	0
2701. ....	0								
2702. ....	0								
2703. ....	0								
2798. Summary of remaining write-ins for Line 27 from overflow page.....	0	0	0	0	0	0	0	0	0
2799. Total (Lines 2701 through 2703 plus 2798) (Line 27 above).....	0	0	0	0	0	0	0	0	0

(a) Includes the following amounts for FEGLI/SGLI: Line 1.....0 Line 10.....0 Line 16.....0 Line 23.....0 Line 24.....0.

(b) Include premium amounts for preneed plans included in Line 1.

(c) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

(d) Individual and Group Credit Life are combined and included on page. (Indicate whether included with Individual or Group)

**ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - INDIVIDUAL ANNUITIES (a)**

	1 Total	2 Fixed Annuities	3 Indexed Annuities	Deferred		6 Life Contingent Payout (Immediate and Annuitizations)	7 Other Annuities
				4 Variable Annuities with Guarantees	5 Variable Annuities without Guarantees		
1. Premiums for individual annuity contracts.....	1,898,018	1,898,018					
2. Considerations for supplementary contracts with life contingencies.....	0	XXX	XXX	XXX	XXX		XXX
3. Net investment income.....	3,735,639	3,735,639					
4. Amortization of Interest Maintenance Reserve (IMR).....	85,620	85,620					
5. Separate Accounts net gain from operations excluding unrealized gains or losses.....	0						
6. Commissions and expense allowances on reinsurance ceded.....	0						
7. Reserve adjustments on reinsurance ceded.....	0						
8. Miscellaneous Income:							
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts.....	0						
8.2 Charges and fees for deposit-type contracts.....	0						
8.3 Aggregate write-ins for miscellaneous income.....	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3).....	5,719,277	5,719,277	0	0	0	0	0
10. Death benefits.....	0						
11. Matured endowments (excluding guaranteed annual pure endowments).....	0						
12. Annuity benefits.....	5,478,451	5,478,451					
13. Disability benefits and benefits under accident and health contracts.....	0						
14. Coupons, guaranteed annual pure endowments and similar benefits.....	0						
15. Surrender benefits and withdrawals for life contracts.....	0						
16. Group conversions.....	0						
17. Interest and adjustments on contract or deposit-type contract funds.....	275,961	275,961					
18. Payments on supplementary contracts with life contingencies.....	0						
19. Increase in aggregate reserves for life and accident and health contracts.....	(1,253,857)	(1,253,857)					
20. Totals (Lines 10 to 19).....	4,500,555	4,500,555	0	0	0	0	0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only).....	4,577	4,577					
22. Commissions and expense allowances on reinsurance assumed.....	0						
23. General insurance expenses.....	345,292	345,292					
24. Insurance taxes, licenses and fees, excluding federal income taxes.....	11,023	11,023					
25. Increase in loading on deferred and uncollected premiums.....	0						
26. Net transfers to or (from) Separate Accounts net of reinsurance.....	0						
27. Aggregate write-ins for deductions.....	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27).....	4,861,447	4,861,447	0	0	0	0	0
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28).....	857,830	857,830	0	0	0	0	0
30. Dividends to policyholders and refunds to members.....	0						
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30).....	857,830	857,830	0	0	0	0	0
32. Federal income taxes incurred (excluding tax on capital gains).....	0						
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32).....	857,830	857,830	0	0	0	0	0
34. Policies/certificates in force end of year.....	2,399	2,399					

**DETAILS OF WRITE-INS**

08.301.	0						
08.302.	0						
08.303.	0						
08.398. Summary of remaining write-ins for Line 8.3 from overflow page.....	0	0	0	0	0	0	0
08.399. Total (Lines 08.301 through 08.303 plus 08.398) (Line 8.3 above).....	0	0	0	0	0	0	0
2701.	0						
2702.	0						
2703.	0						
2798. Summary of remaining write-ins for Line 27 from overflow page.....	0	0	0	0	0	0	0
2799. Total (Lines 2701 through 2703 plus 2798) (Line 27 above).....	0	0	0	0	0	0	0

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

**Analysis of Operations by Lines of Business-Group Annuities**  
**NONE**

**Analysis of Operations by Lines of Business-A&H**  
**NONE**

**ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - INDIVIDUAL LIFE INSURANCE (a)**

	1 Total	2 Industrial Life	3 Whole Life	4 Term Life	5 Indexed Life	6 Universal Life	7 Universal Life with Secondary Guarantees	8 Variable Life	9 Variable Universal Life	10 Credit Life (b) (N/A Fraternal)	11 Other Individual Life	12 YRT Mortality Risk Only
<b>Involving Life or Disability Contingencies (Reserves)</b> (Net of Reinsurance Ceded)												
1. Reserve December 31, prior year.....	7,923,226			7,923,226								
2. Tabular net premiums or considerations.....	71,752			71,752								
3. Present value of disability claims incurred.....	0											
4. Tabular interest.....	318,775			318,775								
5. Tabular less actual reserve released.....	0											
6. Increase in reserve on account of change in valuation basis.....	0											
6.1 Change in excess of VM-20 deterministic/stochastic reserve over net premium reserve.....	0	XXX								XXX		
7. Other increases (net).....	0											
8. Totals (Lines 1 to 7).....	8,313,753	0	8,313,753	0	0	0	0	0	0	0	0	0
9. Tabular cost.....	136,776		136,776									
10. Reserves released by death.....	89,845		89,845									
11. Reserves released by other terminations (net).....	41,386		41,386									
12. Annuity, supplementary contract, and disability payments involving life contingencies.....	0											
13. Net transfers to or (from) Separate Accounts.....	0											
14. Total deductions (Lines 9 to 13).....	268,007	0	268,007	0	0	0	0	0	0	0	0	0
15. Reserve December 31, current year.....	8,045,746	0	8,045,746	0	0	0	0	0	0	0	0	0
<b>Cash Surrender Value and Policy Loans</b>												
16. CSA ending balance December 31, current year.....	0											
17. Amount available for policy loans based upon Line 16 CSV.....	0											

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

(b) Individual and Group Credit Life are combined and included on page. (Indicate whether included with Individual or Group).

**ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - GROUP LIFE INSURANCE (a)**

(N/A Fraternal)

	1 Total	2 Whole Life	3 Term Life	4 Variable Life	5 Universal Life	6 Variable Universal Life	7 Credit Life (b)	8 Other Group Life	9 YRT Mortality Risk Only
<b>Involving Life or Disability Contingencies (Reserves)</b>									
(Net of Reinsurance Ceded)									
1. Reserve December 31, prior year.....	0								
2. Tabular net premiums or considerations.....	0								
3. Present value of disability claims incurred.....	0								
4. Tabular interest.....	0								
5. Tabular less actual reserve released.....	0								
6. Increase in reserve on account of change in valuation basis.....	0								
7. Other increases (net).....	0								
8. Totals (Lines 1 to 7).....	0	0	0	0	0	0	0	0	0
9. Tabular cost.....	0								
10. Reserves released by death.....	0								
11. Reserves released by other terminations (net).....	0								
12. Annuity, supplementary contract, and disability payments involving life contingencies.....	0								
13. Net transfers to or (from) Separate Accounts.....	0								
14. Total deductions (Lines 9 to 13).....	0	0	0	0	0	0	0	0	0
15. Reserve December 31, current year.....	0	0	0	0	0	0	0	0	0
<b>Cash Surrender Value and Policy Loans</b>									
16. CSA ending balance December 31, current year.....	0								
17. Amount available for policy loans based upon Line 16 CSV.....	0								

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

(b) Individual and Group Credit Life are combined and included on page. (Indicate whether included with Individual or Group).

**ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - INDIVIDUAL ANNUITIES (a)**

	1	Deferred				6	7
		2	3	4	5		
	Total	Fixed Annuities	Indexed Annuities	Variable Annuities with Guarantees	Variable Annuities without Guarantees	Life Contingent Payout (Immediate and Annuitizations)	Other Annuities
<b>Involving Life or Disability Contingencies (Reserves)</b> (Net of Reinsurance Ceded)							
1. Reserve December 31, prior year.....	63,258,117	63,258,117					
2. Tabular net premiums or considerations.....	1,898,017	1,898,017					
3. Present value of disability claims incurred.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4. Tabular interest.....	2,303,805	2,303,805					
5. Tabular less actual reserve released.....	714,869	714,869					
6. Increase in reserve on account of change in valuation basis.....	0						
7. Other increases (net).....	0						
8. Totals (Lines 1 to 7).....	68,174,808	68,174,808	0	0	0	0	0
9. Tabular cost.....	0						
10. Reserves released by death.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX
11. Reserves released by other terminations (net).....	6,170,548	6,170,548					
12. Annuity, supplementary contract, and disability payments involving life contingencies.....	0						
13. Net transfers to or (from) Separate Accounts.....	0						
14. Total deductions (Lines 9 to 13).....	6,170,548	6,170,548	0	0	0	0	0
15. Reserve December 31, current year.....	62,004,260	62,004,260	0	0	0	0	0
<b>Cash Surrender Value and Policy Loans</b>							
16. CSV ending balance, December 31, current year.....	59,727,881	59,727,881					
17. Amount available for policy loans based upon Line 16 CSV.....	0						

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

**ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - GROUP ANNUITIES (a)**

(N/A Fraternal)

	1 Total	Deferred				6 Life Contingent Payout (Immediate and Annuitizations)	7 Other Annuities			
		2 Fixed Annuities	3 Indexed Annuities	4 Variable Annuities with Guarantees	5 Variable Annuities without Guarantees					
<b>Involving Life or Disability Contingencies (Reserves)</b>										
(Net of Reinsurance Ceded)										
1. Reserve December 31, prior year.....	0									
2. Tabular net premiums or considerations.....	0									
3. Present value of disability claims incurred.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
4. Tabular interest.....	0									
5. Tabular less actual reserve released.....	0									
6. Increase in reserve on account of change in valuation basis.....	0									
7. Other increases (net).....	0									
8. Totals (Lines 1 to 7).....	0	0	0	0	0	0	0			
9. Tabular cost.....	0									
10. Reserves released by death.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. Reserves released by other terminations (net).....	0									
12. Annuity, supplementary contract, and disability payments involving life contingencies.....	0									
13. Net transfers to or (from) Separate Accounts.....	0									
14. Total deductions (Lines 9 to 13).....	0	0	0	0	0	0	0			
15. Reserve December 31, current year.....	0	0	0	0	0	0	0			
<b>Cash Surrender Value and Policy Loans</b>										
16. CSV ending balance, December 31, current year.....	0									
17. Amount available for policy loans based upon Line 16 CSV.....	0									

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

**7.4**  
**NONE**

**EXHIBIT OF NET INVESTMENT INCOME**

	1 Collected During Year	2 Earned During Year
1. U.S. government bonds.....	(a).....33,821	.....27,228
1.1 Bonds exempt from U.S. tax.....	(a).....4,180,752	.....4,250,918
1.2 Other bonds (unaffiliated).....	(a).....	.....
1.3 Bonds of affiliates.....	(a).....	.....
2.1 Preferred stocks (unaffiliated).....	(b).....	.....
2.11 Preferred stocks of affiliates.....	(b).....	.....
2.2 Common stocks (unaffiliated).....	.....26,240	.....26,240
2.21 Common stocks of affiliates.....	.....	.....
3. Mortgage loans.....	(c).....	.....
4. Real estate.....	(d).....6,000	.....6,000
5. Contract loans.....	.....12,199	.....13,257
6. Cash, cash equivalents and short-term investments.....	(e).....259,801	.....257,765
7. Derivative instruments.....	(f).....	.....
8. Other invested assets.....	.....109,245	.....135,543
9. Aggregate write-ins for investment income.....	.....0	.....0
10. Total gross investment income.....	.....4,628,058	.....4,716,951
11. Investment expenses.....	(g).....82,101	.....
12. Investment taxes, licenses and fees, excluding federal income taxes.....	(g).....3,314	.....
13. Interest expense.....	(h).....	.....
14. Depreciation on real estate and other invested assets.....	(i).....0	.....0
15. Aggregate write-ins for deductions from investment income.....	.....0	.....
16. Total deductions (Lines 11 through 15).....	.....	.....85,415
17. Net investment income (Line 10 minus Line 16).....	.....	.....4,631,536

**DETAILS OF WRITE-INS**

0901.....	.....	.....
0902.....	.....	.....
0903.....	.....	.....
0998. Summary of remaining write-ins for Line 9 from overflow page.....	.....0	.....0
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9 above).....	.....0	.....0
1501.....	.....	.....
1502.....	.....	.....
1503.....	.....	.....
1598. Summary of remaining write-ins for Line 15 from overflow page.....	.....0	.....0
1599. Totals (Lines 1501 through 1503 plus 1598) (Line 15 above).....	.....0	.....0

- (a) Includes \$....30,413 accrual of discount less \$....210,567 amortization of premium and less \$....49,143 paid for accrued interest on purchases.
- (b) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued dividends on purchases.
- (c) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.
- (d) Includes \$.....0 for company's occupancy of its own buildings; and excludes \$.....0 interest on encumbrances.
- (e) Includes \$....147,902 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.
- (f) Includes \$.....0 accrual of discount less \$.....0 amortization of premium.
- (g) Includes \$.....0 investment expenses and \$.....0 investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$.....0 interest on surplus notes and \$.....0 interest on capital notes.
- (i) Includes \$.....0 depreciation on real estate and \$.....0 depreciation on other invested assets.

**EXHIBIT OF CAPITAL GAINS (LOSSES)**

	1 Realized Gain (Loss) on Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. government bonds.....	.....	.....	.....0	.....	.....
1.1 Bonds exempt from U.S. tax.....	.....	.....	.....0	.....	.....
1.2 Other bonds (unaffiliated).....	.....735	.....	.....735	.....	.....
1.3 Bonds of affiliates.....	.....	.....	.....0	.....	.....
2.1 Preferred stocks (unaffiliated).....	.....	.....	.....0	.....	.....
2.11 Preferred stocks of affiliates.....	.....	.....	.....0	.....	.....
2.2 Common stocks (unaffiliated).....	.....(28,813)	.....	.....(28,813)	.....262,317	.....
2.21 Common stocks of affiliates.....	.....	.....	.....0	.....	.....
3. Mortgage loans.....	.....	.....	.....0	.....	.....
4. Real estate.....	.....	.....	.....0	.....	.....
5. Contract loans.....	.....	.....	.....0	.....	.....
6. Cash, cash equivalents and short-term investments.....	.....	.....	.....0	.....	.....
7. Derivative instruments.....	.....	.....	.....0	.....	.....
8. Other invested assets.....	.....4,675	.....	.....4,675	.....	.....
9. Aggregate write-ins for capital gains (losses).....	.....0	.....0	.....0	.....0	.....0
10. Total capital gains (losses).....	.....(23,403)	.....0	.....(23,403)	.....262,317	.....0

**DETAILS OF WRITE-INS**

0901.....	.....	.....0	.....	.....
0902.....	.....	.....0	.....	.....
0903.....	.....	.....0	.....	.....
0998. Summary of remaining write-ins for Line 9 from overflow page.....	.....0	.....0	.....0	.....0
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9 above).....	.....0	.....0	.....0	.....0

**EXHIBIT 1 - PART 1 - PREMIUMS AND ANNUITY CONSIDERATIONS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS**

	1 Total	2 Industrial Life	Insurance									12 Fraternal (Fraternal Benefit Societies Only)	
			Ordinary		5 Credit Life (Group and Individual)	Group		Accident and Health			11 Aggregate of All Other Lines of Business		
			3 Life Insurance	4 Individual Annuities		6 Life Insurance	7 Annuities	8 Group	9 Credit (Group & Individual)	10 Other			
<b>FIRST YEAR (other than single)</b>													
1. Uncollected.....	0												
2. Deferred and accrued.....	0												
3. Deferred, accrued and uncollected:													
3.1 Direct.....	0												
3.2 Reinsurance assumed.....	0												
3.3 Reinsurance ceded.....	0												
3.4 Net (Line 1 + Line 2).....	0												
4. Advance.....	0												
5. Line 3.4 - Line 4.....	0												
6. Collected during year:													
6.1 Direct.....	88,266				2,871	85,395							
6.2 Reinsurance assumed.....	0												
6.3 Reinsurance ceded.....	0												
6.4 Net.....	88,266				2,871	85,395							
7. Line 5 + Line 6.4.....	88,266				2,871	85,395							
8. Prior year (uncollected + deferred and accrued - advance).....	2,925				2,925								
9. First year premiums and considerations:													
9.1 Direct.....	85,341				(54)	85,395							
9.2 Reinsurance assumed.....	0												
9.3 Reinsurance ceded.....	0												
9.4 Net (Line 7 - Line 8).....	85,341				(54)	85,395							
10. Single premiums and considerations:													
10.1 Direct.....	103,001				50,719	52,282							
10.2 Reinsurance assumed.....	0												
10.3 Reinsurance ceded.....	0				50,719	52,282							
10.4 Net.....	103,001				0	0							
11. RENEWAL													
12. Uncollected.....	0												
13. Deferred and accrued.....	6,318				6,318								
13. Deferred, accrued and uncollected:													
13.1 Direct.....	6,318				6,318								
13.2 Reinsurance assumed.....	0												
13.3 Reinsurance ceded.....	0												
13.4 Net (Line 11 + Line 12).....	6,318				0	6,318							
14. Advance.....	1,491				1,491								
15. Line 13.4 - Line 14.....	4,827				0	4,827							
16. Collected during year:													
16.1 Direct.....	1,786,671				26,330	1,760,341							
16.2 Reinsurance assumed.....	0												
16.3 Reinsurance ceded.....	2,596				2,596								
16.4 Net.....	1,784,075				0	23,734	1,760,341						
17. Line 15 + Line 16.4.....	1,788,902				0	28,561	1,760,341						
18. Prior year (uncollected + deferred and accrued - advance).....	3,609				3,609								
19. Renewal premiums and considerations:													
19.1 Direct.....	1,787,889				27,548	1,760,341							
19.2 Reinsurance assumed.....	0												
19.3 Reinsurance ceded.....	2,596				2,596								
19.4 Net (Line 17 - Line 18).....	1,785,293				0	24,952	1,760,341						
20. <b>TOTAL</b>													
20.1 Total premiums and annuity considerations:													
20.1 Direct.....	1,976,231				0	78,213	1,898,018						
20.2 Reinsurance assumed.....	0				0	0	0						
20.3 Reinsurance ceded.....	2,596				2,596	0	0						
20.4 Net (Lines 9.4 + 10.4 + 19.4).....	1,973,635				0	75,617	1,898,018						

**EXHIBIT 1 - PART 2 - POLICYHOLDERS' DIVIDENDS, REFUNDS TO MEMBERS AND COUPONS APPLIED, REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES AND COMMISSIONS INCURRED (Direct Business Only)**

	1 Total	2 Industrial Life	Insurance									12 Fraternal (Fraternal Benefit Societies Only)	
			Ordinary		5 Credit Life (Group and Individual)	Group		Accident and Health			11 Aggregate of All Other Lines of Business		
			3 Life Insurance	4 Individual Annuities		6 Life Insurance	7 Annuities	8 Group	9 Credit (Group & Individual)	10 Other			
<b>POLICYHOLDERS' DIVIDENDS, REFUNDS TO MEMBERS AND COUPONS APPLIED (included in Part 1)</b>													
21. To pay renewal premiums	0												
22. All other	39,518		39,518										
<b>REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES INCURRED</b>													
23. First year (other than single):													
23.1 Reinsurance ceded	0												
23.2 Reinsurance assumed	0												
23.3 Net ceded less assumed	0	0	0	0	0	0	0	0	0	0	0	0	
24. Single:													
24.1 Reinsurance ceded	0												
24.2 Reinsurance assumed	0												
24.3 Net ceded less assumed	0	0	0	0	0	0	0	0	0	0	0	0	
25. Renewal:													
25.1 Reinsurance ceded	0												
25.2 Reinsurance assumed	0												
25.3 Net ceded less assumed	0	0	0	0	0	0	0	0	0	0	0	0	
26. Totals:													
26.1 Reinsurance ceded (Page 6, Line 6)	0	0	0	0	0	0	0	0	0	0	0	0	
26.2 Reinsurance assumed (Page 6, Line 22)	0	0	0	0	0	0	0	0	0	0	0	0	
26.3 Net ceded less assumed	0	0	0	0	0	0	0	0	0	0	0	0	
<b>COMMISSIONS INCURRED (direct business only)</b>													
27. First year (other than single)	4,972		396	4,576									
28. Single	380		380										
29. Renewal	.66		.66										
30. Deposit-type contract funds	0												
31. Totals (to agree with Page 6, Line 21)	5,418	0	841	4,576	0	0	0	0	0	0	0	0	

Annual Statement for the year 2019 of the **Alliance Of Transylvanian Saxons**  
**EXHIBIT 2 - GENERAL EXPENSES**

	Insurance			5	6	7		
	1	Accident and Health			4			
	Life	2 Cost Containment	3 All Other					
1. Rent.....	6,000					6,000		
2. Salaries and wages.....	252,165					252,165		
3.11 Contributions for benefit plans for employees.....	75,755					75,755		
3.12 Contributions for benefit plans for agents.....						0		
3.21 Payments to employees under non-funded benefit plans.....						0		
3.22 Payments to agents under non-funded benefit plans.....						0		
3.31 Other employee welfare.....						0		
3.32 Other agent welfare.....						0		
4.1 Legal fees and expenses.....						0		
4.2 Medical examination fees.....	375					375		
4.3 Inspection report fees.....						0		
4.4 Fees of public accountants and consulting actuaries.....	165,788					165,788		
4.5 Expense of investigation and settlement of policy claims.....						0		
5.1 Traveling expenses.....						0		
5.2 Advertising.....	32,572					32,572		
5.3 Postage, express, telegraph and telephone.....	20,192					20,192		
5.4 Printing and stationery.....	1,666					1,666		
5.5 Cost or depreciation of furniture and equipment.....						0		
5.6 Rental of equipment.....						0		
5.7 Cost or depreciation of EDP equipment and software.....	3,033					3,033		
6.1 Books and periodicals.....	5,672					5,672		
6.2 Bureau and association fees.....	3,530					3,530		
6.3 Insurance, except on real estate.....	20,199					20,199		
6.4 Miscellaneous losses.....						0		
6.5 Collection and bank service charges.....	1,712					1,712		
6.6 Sundry general expenses.....	64,052					64,052		
6.7 Group service and administration fees.....						0		
6.8 Reimbursements by uninsured plans.....						0		
7.1 Agency expense allowance.....						0		
7.2 Agents' balances charged off (less \$.....0 recovered).....						0		
7.3 Agency conferences other than local meetings.....						0		
8.1 Official publication (Fraternal Benefit Societies Only).....	XXX	XXX	XXX	XXX	XXX	81,370		
8.2 Expenses of supreme lodge meetings (Fraternal Benefit Soc. Only).....	XXX	XXX	XXX	XXX	XXX	0		
9.1 Real estate expenses.....					13,607	13,607		
9.2 Investment expenses not included elsewhere.....					68,494	68,494		
9.3 Aggregate write-ins for expenses.....	25,558	0	0	0	0	88,475		
10. General expenses incurred.....	678,269	0	0	0	82,101	(b) 174,176		
11. General expenses unpaid December 31, prior year.....	19,333					2,317		
12. General expenses unpaid December 31, current year.....	29,438							
13. Amounts receivable relating to uninsured plans, prior year.....						0		
14. Amounts receivable relating to uninsured plans, current year.....						0		
15. General expenses paid during year (Lines 10+11-12-13+14).....	668,164	0	0	0	82,366	176,493		

**DETAILS OF WRITE-INS**

09.301. Cultural Funds and Scholarships - net.....						88,475	88,475
09.302. Branch sharing.....	13,033						13,033
09.303. Per diem.....	12,525						12,525
09.398. Summary of remaining write-ins for Line 9.3 from overflow page.....	0	0	0	0	0	0	0
09.399. Totals (Lines 09.301 through 09.303 plus 09.398)(Line 9.3 above).....	25,558	0	0	0	0	88,475	114,033

(a) Includes management fees of \$.....0 to affiliates and \$.....0 to non-affiliates.

(b) Show the distribution of this amount in the following categories (Fraternal Benefit Societies Only):

1. Charitable \$....88,475; 2. Institutional \$.....0; 3. Recreational and Health \$.....0; 4. Educational \$.....0  
 5. Religious \$.....0; 6. Membership \$....81,370; 7. Other \$....4,331; 8. Total \$....174,176

**EXHIBIT 3 - TAXES, LICENSES AND FEES (EXCLUDING FEDERAL INCOME TAXES)**

	Insurance			4	5	6
	1	2	3			
	Life	Accident and Health	All Other Lines of Business	Investment	Fraternal	Total
1. Real estate taxes.....				3,314		3,314
2. State insurance department licenses and fees.....	2,125					2,125
3. State taxes on premiums.....						0
4. Other state taxes, including \$.....0 for employee benefits.....	488					488
5. U.S. Social Security taxes.....	19,290					19,290
6. All other taxes.....	143					143
7. Taxes, licenses and fees incurred.....	22,046	0	0	3,314	0	25,360
8. Taxes, licenses and fees unpaid December 31, prior year.....	250			3,331		3,581
9. Taxes, licenses and fees unpaid December 31, current year.....	250			3,314		3,564
10. Taxes, licenses and fees paid during year (Lines 7 + 8 - 9).....	22,046	0	0	3,331	0	25,377

**EXHIBIT 4 - DIVIDENDS OR REFUNDS**

	1	2	3	4	5	6
	Life	Accident and Health				
1. Applied to pay renewal premiums.....						
2. Applied to shorten the endowment or premium-paying period.....						
3. Applied to provide paid-up additions.....				39,518		
4. Applied to provide paid-up annuities.....						
5. Total Lines 1 through 4.....				39,518		0
6. Paid-in cash.....				3,020		
7. Left on deposit.....				9,283		
8. Aggregate write-ins for dividend or refund options.....				0		0
9. Total Lines 5 through 8.....				51,821		0
10. Amount due and unpaid.....				55,000		
11. Provision for dividends or refunds payable in the following calendar year.....						
12. Terminal dividends.....						
13. Provision for deferred dividend contracts.....						
14. Amount provisionally held for deferred dividend contracts not included in Line 13.....						
15. Total Lines 10 through 14.....				55,000		0
16. Total from prior year.....				55,000		
17. Total dividends or refunds (Lines 9 + 15 - 16).....				51,821		0

**DETAILS OF WRITE-INS**

0801.....						
0802.....						
0803.....						
0898. Summary of remaining write-ins for Line 8 from overflow page.....				0		0
0899. Totals (Line 0801 through 0803 plus 0898) (Line 8 above).....				0		0

**EXHIBIT 5 - AGGREGATE RESERVE FOR LIFE CONTRACTS**

1	2	3	4	5 Credit (Group and Individual)	6 Group
Valuation Standard	Total	Industrial	Ordinary		
<b>Life Insurance:</b>					
0100001. 1902-1947 AE 3.5% & 4% AE 2.5% & 3%.....	..67,076			..67,076	
0100002. 1948-1966 AM 2.5%.....	702,995			702,995	
0100003. 1958-1965 41 CS1 3%.....	12,157			12,157	
0100004. 1966-1988 58 CSO 3%.....	1,643,348			1,643,348	
0100005. 2006-2008 80 CSO 4.00%.....	233,543			233,543	
0100006. 1995-2005 80 CSO 4.50%.....	2,527,991			2,527,991	
0100007. 1987-1994 80 CSO 4.75%.....	2,199,019			2,199,019	
0100008. 1993-1994 80 CSO 5%.....	20,739			20,739	
0100009. 1987-1992 80 CSO 5.5%.....	290,773			290,773	
0100010. 2009-2012 01 CSO 4.0%.....	138,638			138,638	
0100011. 2012- 01 CSO 3.5%.....	123,498			123,498	
0100012. 1966-1988 58 CET 3%.....	52,995			52,995	
0100013. 1995-2005 80 CET 4.5%.....	4,461			4,461	
0100014. 1993-1994 80 CET 5%.....	434			434	
0100015. 1987-1992 80 CET 5.5%.....	14,226			14,226	
0199997. Totals (Gross).....	8,031,893	0	8,031,893	0	0
0199998. Reinsurance ceded.....	1,191		1,191		
0199999. Totals (Net).....	8,030,702	0	8,030,702	0	0
<b>Annuities (excluding supplementary contracts with life contingencies):</b>					
0200001. FPDA (accumulation) (4.5% Guar).....	34,219,674	XXX	34,219,674	XXX	
0200002. FPDA (accumulation) (3.0% Guar).....	22,390,597	XXX	22,390,597	XXX	
0200003. FPDA (accumulation) (1.75% Guar).....	633,043	XXX	633,043	XXX	
0200004. FPDA (accumulation) (1.5% Guar).....	2,228,204	XXX	2,228,204	XXX	
0200005. FPDA Rider (accumulation) (4.5% Guar).....	256,363	XXX	256,363	XXX	
0200006. SPIA '83a (setback 1 yr) M/F 6.50%.....	28,469	XXX	28,469	XXX	
0200007. SPIA '83a (setback 1 yr) M/F 6.25%.....	7,084	XXX	7,084	XXX	
0200008. SPIA '83a (setback 1 yr) M/F 4.50%.....	1,650,951	XXX	1,650,951	XXX	
0200009. SPIA '83a (setback 1 yr) M/F 3.00%.....	179,522	XXX	179,522	XXX	
0200010. SPIA '83a (setback 1 yr) M/F 2.50%.....	96,707	XXX	96,707	XXX	
0200011. SPIA '83a (setback 1 yr) M/F 2.25%.....	313,646	XXX	313,646	XXX	
0299997. Totals (Gross).....	62,004,260	XXX	62,004,260	XXX	0
0299999. Totals (Net).....	62,004,260	XXX	62,004,260	XXX	0
<b>Accidental Death Benefits:</b>					
0400001. Interco DI with 41CSO 2.5%.....	759		759		
0400002. 59 ADB & 58 CSO 3%.....	783		783		
0400003. Dismemberment Benefits.....	5,190		5,190		
0499997. Totals (Gross).....	6,732	0	6,732	0	0
0499999. Totals (Net).....	6,732	0	6,732	0	0
<b>Disability - Active Lives:</b>					
0500001. 52 Disability Study, per 4, Ben 5 w/ 58 CSO 3%.....	1,324		1,324		
0599997. Totals (Gross).....	1,324	0	1,324	0	0
0599998. Reinsurance ceded.....	50		50		
0599999. Totals (Net).....	1,274	0	1,274	0	0
<b>Miscellaneous Reserves:</b>					
0700001. Non-Deduction.....	2,780		2,780		
0700002. Rated Premiums - 1/2 Annual.....	4,259		4,259		
0799997. Totals (Gross).....	7,039	0	7,039	0	0
0799999. Totals (Net).....	7,039	0	7,039	0	0
9999999. Totals (Net) - Page 3, Line 1.....	70,050,007	0	70,050,007	0	0

**EXHIBIT 5 - INTERROGATORIES**

1.1 Has the reporting entity ever issued both participating and non-participating contracts?

Yes [ ] No [ X ]

1.2 If not, state which kind is issued

Participating

2.1 Does the reporting entity at present issue both participating and non-participating contracts?

Yes [ ] No [ X ]

2.2 If not, state which kind is issued

Participating

3. Does the reporting entity at present issue or have in force contracts that contain non-guaranteed elements?

Yes [ X ] No [ ]

If so, attach a statement that contains the determination procedures, answers to the interrogatories and an actuarial opinion as described in the instructions.

4. Has the reporting entity any assessment or stipulated premium contracts in force? If so, state:

Yes [ ] No [ X ]

4.1 Amount of insurance:

\$.....

4.2 Amount of reserve:

\$.....

4.3 Basis of reserve:

4.4 Basis of regular assessments:

4.5 Basis of special assessments:

4.6 Assessments collected during year:

\$.....

5. If the contract loan interest rate guaranteed in any one or more of its currently issued contracts is less than 5%, not in advance, state the contract loan rate guarantees on any such contracts.

6. Does the reporting entity hold reserves for any annuity contracts that are less than the reserves that would be held on a standard basis?

Yes [ ] No [ X ]

6.1 If so, state the amount of reserve on such contracts on the basis actually held:

\$.....

6.2 That would have been held (on an exact or approximate basis) using the actual ages of the annuitants; the interest rate(s) used in 6.1; and the same mortality basis used by the reporting entity for the valuation of comparable annuity benefits issued to standard lives. If the reporting entity has no comparable annuity benefits for standard lives to be valued, the mortality basis shall be the table most recently approved by the state of domicile for valuing individual annuity benefits:

\$.....

Attach statement of methods employed in their valuation.

7. Does the reporting entity have any Synthetic GIC contracts or agreements in effect as of December 31 of the current year?

Yes [ ] No [ X ]

7.1 If yes, state the total dollar amount of assets covered by these contracts or agreements:

\$.....

7.2 Specify the basis (fair value, amortized cost, etc.) for determining the amount:

7.3 State the amount of reserves established for this business:

\$.....

7.4 Identify where the reserves are reported in the blank.

8. Does the reporting entity have any Contingent Deferred Annuity contracts or agreements in effect as of December of the current year?

Yes [ ] No [ X ]

8.1 If yes, state the total dollar amount of account value covered by these contracts or agreements:

\$.....

8.2 State the amount of reserves established for this business:

\$.....

8.3 Identify where the reserves are reported in the blank:

9. Does the reporting entity have any Guaranteed Lifetime Income Benefit contracts, agreements or riders in effect as of December 31 of the current year?

Yes [ ] No [ X ]

9.1 If yes, state the total dollar amount of any account value associated with these contracts, agreements or riders:

\$.....

9.2 State the amount of reserves established for this business:

\$.....

9.3 Identify where the reserves are reported in the blank:

**EXHIBIT 5A - CHANGES IN BASES OF VALUATION DURING THE YEAR**

1 Description of Valuation Class	Valuation Basis		4 Increase in Actuarial Reserve Due To Change
	2 Changed From	3 Changed To	

**NONE**

**EXHIBIT 6 - AGGREGATE RESERVES FOR ACCIDENT AND HEALTH CONTRACTS - ACCIDENT AND HEALTH (a)**

	1	Comprehensive		4	5	6	7	8	9	10	11	12	13
		2	3										
	Total	Individual	Group										
<b>ACTIVE LIFE RESERVE</b>													
1. Unearned premium reserves.....	0												
2. Additional contract reserves (b).....	0												
3. Additional actuarial reserves - Asset/Liability analysis.....	0												
4. Reserve for future contingent benefits.....	0												
5. Reserve for rate credits.....	0												
6. Aggregate write-ins for reserves.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. Totals (Gross).....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Reinsurance ceded.....	0												
9. Totals (Net).....	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CLAIM RESERVE</b>													
10. Present value of amounts not yet due on claims.....	0												
11. Additional actuarial reserves - Asset/Liability analysis.....	0												
12. Reserve for future contingent benefits.....	0												
13. Aggregate write-ins for reserves.....	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Totals (Gross).....	0	0	0	0	0	0	0	0	0	0	0	0	0
15. Reinsurance ceded.....	0												
16. Totals (Net).....	0	0	0	0	0	0	0	0	0	0	0	0	0
17. TOTALS (Net).....	0	0	0	0	0	0	0	0	0	0	0	0	0
18. TABULAR FUND INTEREST.....	0												

**DETAILS OF WRITE-INS**

0601.....	0												
0602.....	0												
0603.....	0												
0698. Summary of remaining write-ins for Line 6 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0	0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above).....	0	0	0	0	0	0	0	0	0	0	0	0	0
1301.....	0												
1302.....	0												
1303.....	0												
1398. Summary of remaining write-ins for Line 13 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0	0
1399. Totals (Lines 1301 through 1303 + 1398) (Line 13 above).....	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Indicate if blocks of business in run-off that comprise less than 5% of premiums and less than 5% of reserve and loans liability are aggregated with material blocks of business and which columns are affected.

(b) Attach statement as to valuation standard used in calculating this reserve, specifying reserve bases, interest rates and methods.

**EXHIBIT 7 - DEPOSIT-TYPE CONTRACTS**

	1 Total	2 Guaranteed Interest Contracts	3 Annuities Certain	4 Supplemental Contracts	5 Dividend Accumulations or Refunds	6 Premium and Other Deposit Funds
1. Balance at the beginning of the year before reinsurance.....	8,189,009	3,315,059	1,723,317	1,973,641	860,715	316,277
2. Deposits received during the year.....	1,012,700	250,522	575,637	168,000	9,283	9,258
3. Investment earnings credited to the account.....	321,859	97,747	62,592	115,622	37,346	8,552
4. Other net change in reserves.....	0					
5. Fees and other charges assessed.....	0					
6. Surrender charges.....	0					
7. Net surrender or withdrawal payments.....	528,256	353,866	660,699	(570,899)	41,615	42,975
8. Other net transfers to or (from) Separate Accounts.....	0					
9. Balance at the end of current year before reinsurance (Lines 1 + 2 + 3 + 4 - 5 - 6 - 7 - 8).....	8,995,312	3,309,462	1,700,847	2,828,162	865,729	291,112
10. Reinsurance balance at the beginning of the year.....	0					
11. Net change in reinsurance assumed.....	0					
12. Net change in reinsurance ceded.....	0					
13. Reinsurance balance at the end of the year (Lines 10 + 11 - 12).....	0	0	0	0	0	0
14. Net balance at the end of the current year after reinsurance (Lines 9 + 13).....	8,995,312	3,309,462	1,700,847	2,828,162	865,729	291,112

**EXHIBIT 8 - CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS**

## PART 1 - Liability End of Current Year

	1 Total	2 Industrial Life	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health		
			3 Life Insurance	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other
1. Due and unpaid:											
1.1 Direct.....	0										
1.2 Reinsurance assumed.....	0										
1.3 Reinsurance ceded.....	0										
1.4 Net.....	0	0	0	0	0	0	0	0	0	0	0
2. In course of settlement:											
2.1 Resisted:											
2.11 Direct.....	0										
2.12 Reinsurance assumed.....	0										
2.13 Reinsurance ceded.....	0										
2.14 Net.....	0	0	(b).....0	(b).....0	0	(b).....0	(b).....0	0	0	0	0
2.2 Other:											
2.21 Direct.....	1,409,602		45,357		1,364,245						
2.22 Reinsurance assumed.....	0										
2.23 Reinsurance ceded.....	0										
2.24 Net.....	1,409,602	0	(b).....45,357	(b).....1,364,245	0	(b).....0	(b).....0	0	(b).....0	(b).....0	(b).....0
3. Incurred but unreported:											
3.1 Direct.....	12,000		12,000								
3.2 Reinsurance assumed.....	0										
3.3 Reinsurance ceded.....	0										
3.4 Net.....	12,000	0	(b).....12,000	(b).....0	0	(b).....0	(b).....0	0	(b).....0	(b).....0	(b).....0
4. Totals:											
4.1 Direct.....	1,421,602	0	57,357		1,364,245	0	0	0	0	0	0
4.2 Reinsurance assumed.....	0	0	0		0	0	0	0	0	0	0
4.3 Reinsurance ceded.....	0	0	0		0	0	0	0	0	0	0
4.4 Net.....	1,421,602	(a).....0	(a).....57,357		1,364,245	0	0	(a).....0	0	0	0

(a) Including matured endowments (but not guaranteed annual pure endowments) unpaid amounting to \$.....0 in Column 2, \$.....0 in Column 3 and \$.....0 in Column 7.

(b) Include only portion of disability and accident and health claim liabilities applicable to assumed "accrued" benefits. Reserves (including reinsurance assumed and net of reinsurance ceded) for unaccrued benefits for

Ordinary Life Insurance \$.....0, Individual Annuities \$.....0, Credit Life (Group and Individual) \$.....0, and Group Life \$.....0,

are included in Page 3, Line 1, (See Exhibit 5, Section on Disability Disabled Lives); and for Group Accident and Health \$.....0, Credit (Group and Individual) Accident and Health \$.....0 and Other Accident and Health \$.....0

are included in Page 3, Line 2, (See Exhibit 6, Claim Reserve).

**EXHIBIT 8 - CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS****PART 2 - Incurred During the Year**

	1 Total	2 Industrial Life (a)	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health		
			3 Life Insurance (b)	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance (c)	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other
1. Settlements during the year:											
1.1 Direct.....	5,355,583		179,664	5,175,919							
1.2 Reinsurance assumed.....	0										
1.3 Reinsurance ceded.....	0										
1.4 Net.....	(d) 5,355,583	0	179,664	5,175,919	0	0	0	0	0	0	0
2. Liability December 31, current year from Part 1:											
2.1 Direct.....	1,421,602	0	57,357	1,364,245	0	0	0	0	0	0	0
2.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0	0
2.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0	0
2.4 Net.....	1,421,602	0	57,357	1,364,245	0	0	0	0	0	0	0
3. Amounts recoverable from reinsurers Dec. 31, current year.....	0										
4. Liability December 31, prior year:											
4.1 Direct.....	1,184,003		122,290	1,061,713							
4.2 Reinsurance assumed.....	0										
4.3 Reinsurance ceded.....	0										
4.4 Net.....	1,184,003	0	122,290	1,061,713	0	0	0	0	0	0	0
5. Amounts recoverable from reinsurers Dec. 31, prior year.....	0										
6. Incurred benefits:											
6.1 Direct.....	5,593,182	0	114,731	5,478,451	0	0	0	0	0	0	0
6.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0	0
6.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0	0
6.4 Net.....	5,593,182	0	114,731	5,478,451	0	0	0	0	0	0	0

(a) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$.....0 in Line 1.1, \$.....0 in Line 1.4, \$.....0 in Line 6.1 and \$....487 in Line 6.4.

(b) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$.....0 in Line 1.1, \$.....0 in Line 1.4, \$.....0 in Line 6.1 and \$.....0 in Line 6.4.

(c) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$.....0 in Line 1.1, \$.....0 in Line 1.4, \$.....0 in Line 6.1 and \$.....0 in Line 6.4.

(d) Includes \$.....0 premiums waived under total and permanent disability benefits.

**EXHIBIT OF NONADMITTED ASSETS**

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D).....			0
2. Stocks (Schedule D):			
2.1 Preferred stocks.....			0
2.2 Common stocks.....			0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens.....			0
3.2 Other than first liens.....			0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company.....			0
4.2 Properties held for the production of income.....			0
4.3 Properties held for sale.....			0
5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA).....			0
6. Contract loans.....			0
7. Derivatives (Schedule DB).....			0
8. Other invested assets (Schedule BA).....			0
9. Receivables for securities.....			0
10. Securities lending reinvested collateral assets (Schedule DL).....			0
11. Aggregate write-ins for invested assets.....	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	0	0	0
13. Title plants (for Title insurers only).....			0
14. Investment income due and accrued.....			0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection.....			0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.....			0
15.3 Accrued retrospective premiums and contracts subject to redetermination.....			0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers.....			0
16.2 Funds held by or deposited with reinsured companies.....			0
16.3 Other amounts receivable under reinsurance contracts.....			0
17. Amounts receivable relating to uninsured plans.....			0
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0
18.2 Net deferred tax asset.....			0
19. Guaranty funds receivable or on deposit.....			0
20. Electronic data processing equipment and software.....			0
21. Furniture and equipment, including health care delivery assets.....			0
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0
23. Receivables from parent, subsidiaries and affiliates.....			0
24. Health care and other amounts receivable.....			0
25. Aggregate write-ins for other-than-invested assets.....	629,840	604,623	(25,217)
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	629,840	604,623	(25,217)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0
28. TOTALS (Lines 26 and 27).....	629,840	604,623	(25,217)

**DETAILS OF WRITE-INS**

1101.....			0
1102.....			0
1103.....			0
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....	0	0	0
2501. Retirement Funds.....	629,840	604,623	(25,217)
2502. Deposit.....			0
2503.....			0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	629,840	604,623	(25,217)

**NOTES TO FINANCIAL STATEMENTS****Note 1 – Summary of Significant Accounting Policies and Going Concern****A. Accounting Practices**

	SSAP #	F/S Page	F/S Line #	2019	2018
<b>NET INCOME</b>					
(1) Company state basis (Page 4, Line 35, Columns 1 & 2)	XXX	XXX	XXX	\$ 985,922	\$ 1,052,998
(2) State Prescribed Practices that are an increase/(decrease) from NAIC SAP					
				\$	\$
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP					
				\$	\$
(4) NAIC SAP (1 – 2 – 3 = 4)	XXX	XXX	XXX	\$ 985,922	\$ 1,052,998
<b>SURPLUS</b>					
(5) Company state basis (Page 3, Line 38, Columns 1 & 2)	XXX	XXX	XXX	\$ 12,444,267	\$ 11,378,750
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP					
				\$	\$
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP					
				\$	\$
(8) NAIC SAP (5 – 6 – 7 = 8)	XXX	XXX	XXX	\$ 12,444,267	\$ 11,378,750

**B. Use of Estimates in the Preparation of the Financial Statement**

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

**C. Accounting Policy**

Asset values are generally stated as follows:

1. Short-term investments -- Accounted for in the same manner as similar long-term investments.
2. Bonds -- Amortized cost using the scientific method, except where other values are required by the NAIC Valuations of Securities manual.
3. Common Stocks -- Market values provided by the NAIC Valuations of Securities manual.
4. Preferred Stocks -- Original cost where permitted by the NAIC Valuations of Securities manual.
5. Mortgage Loans -- Aggregate unpaid balances.
6. The Society does not have any loan-backed bonds or structured securities.
7. The Society has no subsidiaries.
8. The Society does not have minor ownership interests in joint ventures.
9. There are no derivatives.
10. The Society does not anticipate investment income to be a factor in the premium deficiency calculation.
11. The Society does not issue accident and health contracts.
12. The Society has not modified its capitalization policy from the prior period.
13. The Society does not have Pharmaceutical Rebate receivables.

**D. Going Concern: NONE****Note 2 – Accounting Changes and Corrections of Errors: NONE****Note 3 – Business Combinations and Goodwill: NONE****Note 4 – Discontinued Operations: NONE****Note 5 – Investments**

- A. Mortgage Loans, including Mezzanine Real Estate Loans: NONE
- B. Debt Restructuring: NONE
- C. Reverse Mortgages: NONE
- D. Loan-Backed Securities: NONE
- E. Dollar Repurchase Agreements and/or Securities Lending Transactions: NONE
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing: NONE
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing: NONE
- H. Repurchase Agreements Transactions Accounted for as a Sale: NONE
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale: NONE
- J. Real Estate: NONE
- K. Low-Income Housing Tax Credits (LIHTC): NONE
- L. Restricted Assets: NONE
- M. Working Capital Finance Investments: NONE
- N. Offsetting and Netting of Assets and Liabilities: NONE
- O. 5\* Securities: NONE

**NOTES TO FINANCIAL STATEMENTS**

P. Short Sales: NONE  
 Q. Prepayment Penalty and Acceleration Fees:

**Note 6 – Joint Ventures, Partnerships and Limited Liability Companies:** NONE

**Note 7 – Investment Income**

Due and accrued income was excluded from investment income on the following basis:

Bonds -- where collection of interest is delayed	Amount: \$0
Mortgage Loans -- Interest is delinquent more than three (3) months	Amount: \$0
Real Estate -- Rent is in arrears more than three (3) months	Amount: \$0

**Note 8 – Derivative Instruments:** NONE

**Note 9 – Income Taxes:** NONE

**Note 10 – Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties:** NONE

**Note 11 – Debt:** NONE

**Note 12 – Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans**

E. Defined Contribution Plans: Alliance of Transylvanian Saxons employees are covered by a qualified defined contribution pension plan sponsored by the Alliance of Transylvanian Saxons.

Contributions of 10% of each employee's compensation are made each year. The Society's contribution for the plan was approximately \$25,200 for 2019 and \$18,000 for 2018. The approximate fair value of the plan assets at December 31, 2019 was \$1.8 million.

**Note 13 – Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations:** NONE

**Note 14 – Liabilities, Contingencies and Assessments:** NONE

**Note 15 – Leases:** NONE

**Note 16 – Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk:** NONE

**Note 17 – Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities:** NONE

**Note 18 – Gain or Loss to the Reporting Entity from Uninsured Plans and the Portion of Partially Insured Plans:** NONE

**Note 19 – Direct Premium Written/Produced by Managing General Agents/Third Party Administrators:** NONE

**Note 20 – Fair Value Measurements:** NONE

**Note 21 – Other Items:** NONE

**Note 22 – Events Subsequent:** NONE

**Note 23 – Reinsurance**

A. Ceded Reinsurance Report:

Section1 – General Interrogatories

(1) Are any of the reinsurers listed in Schedule S as non-affiliated, owned in excess of 10% or controlled, either directly or indirectly, by the company or by any representative, officer, trustee, or director of the company? NO

(2) Have any policies issued by the company been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) that is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor or any other person not primarily engaged in the insurance business? NO

Section 2 – Ceded Reinsurance Report – Part A

(1) Does the company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credits? NO

a. If yes, what is the estimated amount of the aggregate reduction in surplus of a unilateral cancellation by the reinsurer as of the date of this statement, for those agreements in which cancellation results in a net obligation of the reporting entity to the reinsurer, and for which such obligation is not presently accrued? Where necessary, the reporting entity may consider the current or anticipated experience of the business reinsured in making this estimate. \$1,103

b. What is the total amount of reinsurance credits taken, whether as an asset or as a reduction of liability, for these agreements in this statement?

**NOTES TO FINANCIAL STATEMENTS**

(2) Does the reporting entity have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies? NO

## Section 3 – Ceded Reinsurance Report – Part B

(1) What is the estimated amount of the aggregate reduction in surplus, (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of ALL reinsurance agreements, by either party, as of the date of this statement? Where necessary, the company may consider the current or anticipated experience of the business reinsured in making this estimate. \$0

(2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the company as of the effective date of the agreement? NO

**Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination:** NONE

**Note 25 – Change in Incurred Losses and Loss Adjustment Expenses:** NONE

**Note 26 – Intercompany Pooling Arrangements:** NONE

**Note 27 – Structured Settlements:** NONE

**Note 28 – Health Care Receivables:** NONE

**Note 29 – Participating Policies:** NONE

**Note 30 – Premium Deficiency Reserves:** NONE

**Note 31 – Reserves for Life Contracts and Deposit-Type Contracts**

(1) The Society waives deduction of deferred fractional premiums upon death of the insured and returns any portion of the final premium beyond the date of death. A reserve has been included in Exhibit 5 in the amount of \$2,780. Surrender values are not promised in excess of the legally computed reserves. The following exception is noted: NONE.

(2) Extra Premiums are charged for substandard lives. Reserves are determined by computing the regular mean reserve for the plan at the rated age and holding, in addition, one-half (1/2) of the extra annual premium. \$4,259.

(3) As of December 31, 2019, the Society had \$0 of insurance in force for which the gross premiums are less than the net premiums according to the standard of valuation set by the State of Ohio.

(4) The Tabular Interest (Page 7, Line 4) has been determined by formula as described in the instructions for Page 7. The Tabular Less Actual Reserve Released (Page 7, Line 5) has been determined by formula as described in the instructions for Page 7. The Tabular Cost (Page 7, Line 9) has been determined by formula as described in the instructions for Page 7.

(5) The Tabular Interest on Funds Not Involving Life Contingencies in Exhibit 7 are determined as the ending reserve plus funds withdrawn less funds added less beginning reserve. The resulting tabular interest is tested for reasonableness.

**Note 32 – Analysis of Annuity Actuarial Reserves and Deposit Type Liabilities by Withdrawal Characteristics**

A. INDIVIDUAL ANNUITIES:	General Accounts	Separate Account with Guarantees	Separate Account Nonguaranteed	Total	% of Total
1. Subject to Discretionary Withdrawal:					
(a) With market value adjustment	\$	\$	\$	\$	%
(b) At book value less current surrender charge of 5% or more	708,628			708,628	1.1%
(c) At fair value					%
(d) Total with market value adjustment or at fair value (total of a through c)	\$ 708,628	\$	\$	\$ 708,628	1.1%
(e) At book value without adjustment (minimal or no charge or adjustment)	59,019,253			59,019,253	95.2%
2. Not subject to discretionary withdrawal	2,276,378			2,276,378	3.7%
3. Total (gross: direct + assumed)	62,004,259			62,004,259	100.0%
4. Reinsurance ceded					
5. Total (net)* (3) - (4)	\$ 62,004,259	\$	\$	\$ 62,004,259	
6. Amount included in A(1)b above that will move to A(1)e in the year after the statement date	\$ 628,649	\$	\$	\$ 628,649	

**NOTES TO FINANCIAL STATEMENTS**

B. GROUP ANNUITIES:	General Accounts	Separate Account with Guarantees	Separate Account Nonguaranteed	Total	% of Total
1. Subject to Discretionary Withdrawal:					
(a) With market value adjustment	\$	\$	\$	\$	%
(b) At book value less current surrender charge of 5% or more					%
(c) At fair value					%
(d) Total with market value adjustment or at fair value (total of a through c)	\$	\$	\$	\$	%
(e) At book value without adjustment (minimal or no charge or adjustment)					%
2. Not subject to discretionary withdrawal					%
3. Total (gross: direct + assumed)					%
4. Reinsurance ceded					
5. Total (net) (3) - (4)	\$	\$	\$	\$	
6. Amount included in B(1)b above that will move to B(1)e in the year after the statement date	\$	\$	\$	\$	

C. DEPOSIT-TYPE CONTRACTS (no life contingencies)	General Accounts	Separate Account with Guarantees	Separate Account Nonguaranteed	Total	% of Total
1. Subject to Discretionary Withdrawal:					
(a) With market value adjustment	\$	\$	\$	\$	%
(b) At book value less current surrender charge of 5% or more					%
(c) At fair value					%
(d) Total with market value adjustment or at fair value (total of a through c)	\$	\$	\$	\$	%
(e) At book value without adjustment (minimal or no charge or adjustment)	8,995,313			8,995,313	100.0%
2. Not subject to discretionary withdrawal	-				%
3. Total (gross: direct + assumed)	8,995,313			8,995,313	100.0%
4. Reinsurance ceded					
5. Total (net) (3) - (4)	\$ 8,995,313	\$	\$	\$ 8,995,313	
6. Amount included in C(1)b above that will move to C(1)e in the year after the statement date	\$	\$	\$	\$	

## D. Life and Accident &amp; Health Annual Statement:

(1) Exhibit 5, Annuities section, Total (net)	\$ 62,004,260
(2) Exhibit 5, Supplementary contracts with life contingencies section, Total (net)	
(3) Exhibit 7, Deposit-type contracts, Line 14, Column 1	8,995,312
(4) Subtotal	\$ 70,999,572
Separate Accounts Statement:	
(5) Exhibit 3, Line 0299999, Column 2	\$
(6) Exhibit 3, Line 0399999, Column 2	
(7) Policyholder dividend and coupon accumulations	
(8) Policyholder premiums	
(9) Guaranteed interest contracts	
(10) Other contract deposit funds	
(11) Subtotal	\$
(12) Combined Total	\$ 70,999,572

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**NOTES TO FINANCIAL STATEMENTS**

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**NOTES TO FINANCIAL STATEMENTS****Note 33 – Analysis of Life Actuarial Reserves by Withdrawal Characteristics**

A. Subject to discretionary withdrawal, surrender values, or policy loans:

	General Account			Separate Account-		Guaranteed and	Nonguaranteed
	Account Value	Cash Value	Reserve	Account Value	Cash Value	Reserve	
(1) Term Policies with Cash Value	\$	\$	\$	\$	\$	\$	
(2) Universal Life							
(3) Universal Life with Secondary Guarantees							
(4) Indexed Universal Life							
(5) Indexed Universal Life with Secondary Guarantees							
(6) Indexed Life							
(7) Other Permanent Cash Value Life Insurance	26,180,472	6,586,152	8,031,893				
(8) Variable Life							
(9) Variable Universal Life							
(10) Miscellaneous Reserves							

B. Not subject to discretionary withdrawal or no cash values:

(1) Term Policies without Cash Value	XXX	XXX	\$	XXX	XXX	\$
(2) Accidental Death Benefits	XXX	XXX	6,732	XXX	XXX	
(3) Disability – Active Lives	XXX	XXX	1,274	XXX	XXX	
(4) Disability – Disabled Lives	XXX	XXX		XXX	XXX	
(5) Miscellaneous Reserves	XXX	XXX	7,039	XXX	XXX	

C. Total (gross: direct + assumed)	\$ 26,180,472	\$ 6,586,152	\$ 8,046,938	\$	\$	\$
D. Reinsurance Ceded	439,071		1,191			
E. Total (net) (c) (D)	\$ 25,741,401	\$ 6,586,152	\$ 8,045,747	\$	\$	\$

F. Amount

Life & Accident & Health Annual Statement:		
(1) Exhibit 5, Life Insurance Section, Total (net)		\$ 8,030,702
(2) Exhibit 5, Accidental Death Benefits Section, Total (net)		6,732
(3) Exhibit 5, Disability – Active Lives Section, Total (net)		1,274
(4) Exhibit 5, Disability – Disabled Lives Section, Total (net)		
(5) Exhibit 5, Miscellaneous Reserves Section, Total (net)		7,039
(6) Subtotal		\$ 8,045,747
Separate Accounts Annual Statement		
(7) Exhibit 3, Line 0199999, Column 2		\$
(8) Exhibit 3, Line 0499999, Column 2		
(9) Exhibit 3, Line 0599999, Column 2		
(10) Subtotal (Lines (7) through (9))		\$
(11) Combined Total ((6) and (10))		\$ 8,045,747

**Note 34 – Premium and Annuity Considerations Deferred and Uncollected**

A. Deferred and uncollected life insurance premiums and annuity considerations as of end of December 31, 2019 were:

	Gross	Net of Loading
(1) Industrial	\$	\$
(2) Ordinary new business		
(3) Ordinary renewal	6,318	5,171
(4) Credit life		
(5) Group life		
(6) Group annuity		
(7) Totals	\$ 6,318	\$ 5,171

**Note 35 – Separate Accounts:** NONE

**Note 36 – Loss/Claim Adjustment Expenses:** NONE

**GENERAL INTERROGATORIES****PART 1 - COMMON INTERROGATORIES****GENERAL**

1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [ ] No [ X ]  
If yes, complete Schedule Y, Parts 1, 1A and 2.

1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? Yes [ ] No [ ] N/A [ X ]

1.3 State regulating?

1.4 Is the reporting entity publicly traded or a member of publicly traded group? Yes [ ] No [ X ]

1.5 If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.

2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [ ] No [ X ]

2.2 If yes, date of change:

3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 10/05/2015

3.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2014

3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 01/19/2016

3.4 By what department or departments?  
Ohio

3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with departments? Yes [ X ] No [ ] N/A [ ]

3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [ X ] No [ ] N/A [ ]

4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:

4.11 sales of new business? Yes [ ] No [ X ]

4.12 renewals? Yes [ ] No [ X ]

4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:

4.21 sales of new business? Yes [ ] No [ X ]

4.22 renewals? Yes [ ] No [ X ]

5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [ ] No [ X ]  
If the answer is YES, complete and file the merger history data file with the NAIC.

5.2 If yes, provide the name of entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1	2 NAIC Company Code	3 State of Domicile
Name of Entity		

6.1 Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [ ] No [ X ]

6.2 If yes, give full information:

7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes [ ] No [ X ]

7.2 If yes,

7.21 State the percentage of foreign control %

7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).

1 Nationality	2 Type of Entity

8.1 Is the company a subsidiary of a bank holding company regulated with the Federal Reserve Board? Yes [ ] No [ X ]

8.2 If response to 8.1 is yes, please identify the name of the bank holding company.

8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [ ] No [ X ]

8.4 If the response to 8.3 is yes, please provide below the names and locations (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC

9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?  
James G. Zupka, CPA, Inc. 5240 East 98th St., Garfield Heights, OH 44125

10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? Yes [ ] No [ X ]

10.2 If the response to 10.1 is yes, provide information related to this exemption:

10.3 Has the insurer been granted any exemptions related to other requirements of the Annual Financial Reporting Model Regulation as allowed in Section 18A of the Model Regulation, or substantially similar state law or regulation? Yes [ ] No [ X ]

10.4 If the response to 10.3 is yes, provide information related to this exemption:

**GENERAL INTERROGATORIES****PART 1 - COMMON INTERROGATORIES**

10.5	Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws?	Yes [X]	No [ ]	N/A [ ]
10.6	If the response to 10.5 is no or n/a, please explain:			
11.	What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification? <u>Miller &amp; Newberg, Inc. 8717 W. 110th St. Suite 530, Overland Park, KS 66210</u>			
12.1	Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?	Yes [ ]	No [X]	
12.11	12.11 Name of real estate holding company			
12.12	12.12 Number of parcels involved	0		
12.13	12.13 Total book/adjusted carrying value	\$ 0		
12.2	If yes, provide explanation			
13.	<b>FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:</b>			
13.1	What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?			
13.2	Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located?	Yes [ ]	No [ ]	
13.3	Have there been any changes made to any of the trust indentures during the year?	Yes [ ]	No [ ]	
13.4	If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?	Yes [ ]	No [ ]	N/A [ ]
14.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?	Yes [X]	No [ ]	
14.11	(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;			
14.11	(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;			
14.11	(c) Compliance with applicable governmental laws, rules and regulations;			
14.11	(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and			
14.11	(e) Accountability for adherence to the code.			
14.11	If the response to 14.1 is no, please explain:			
14.2	Has the code of ethics for senior managers been amended?	Yes [ ]	No [X]	
14.21	If the response to 14.2 is yes, provide information related to amendment(s).			
14.3	Have any provisions of the code of ethics been waived for any of the specified officers?	Yes [ ]	No [X]	
14.31	If the response to 14.3 is yes, provide the nature of any waiver(s).			
15.1	Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List?	Yes [ ]	No [X]	
15.2	If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.			
	1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount
				\$

**BOARD OF DIRECTORS**

16.	Is the purchase or sale of all investments of the reporting entity passed upon either by the Board of Directors or a subordinator committee thereof?	Yes [X]	No [ ]
17.	Does the reporting entity keep a complete permanent record of the proceedings of its Board of Directors and all subordinate committees thereof?	Yes [X]	No [ ]
18.	Has the reporting entity an established procedure for disclosure to its Board of Directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person?	Yes [X]	No [ ]

**FINANCIAL**

19.	Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)?	Yes [ ]	No [X]	
20.1	Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):			
20.11	20.11 To directors or other officers	\$	0	
20.12	20.12 To stockholders not officers	\$	0	
20.13	20.13 Trustees, supreme or grand (Fraternal only)	\$	0	
20.2	Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):			
20.21	20.21 To directors or other officers	\$	0	
20.22	20.22 To stockholders not officers	\$	0	
20.23	20.23 Trustees, supreme or grand (Fraternal only)	\$	0	
21.1	Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement?	Yes [ ]	No [X]	
21.2	If yes, state the amount thereof at December 31 of the current year:			
21.21	21.21 Rented from others	\$	0	
21.22	21.22 Borrowed from others	\$	0	
21.23	21.23 Leased from others	\$	0	
21.24	21.24 Other	\$	0	
22.1	Does this statement include payments for assessments as described in the <i>Annual Statement Instructions</i> other than guaranty fund or guaranty association assessments?	Yes [ ]	No [X]	
22.2	If answer is yes:			
22.21	22.21 Amount paid as losses or risk adjustment	\$	0	
22.22	22.22 Amount paid as expenses	\$	0	
22.23	22.23 Other amounts paid	\$	0	
23.1	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?	Yes [ ]	No [X]	

**GENERAL INTERROGATORIES****PART 1 - COMMON INTERROGATORIES**

23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount:

\$ 0**INVESTMENT**

24.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date (other than securities lending programs addressed in 24.03)?  Yes [X]  No [ ]

24.02 If no, give full and complete information, relating thereto:

24.03 For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet (an alternative is to reference Note 17 where this information is also provided).

24.04 Does the company's security lending program meet the requirements for a conforming program as outlined in the *Risk-Based Capital Instructions*?  Yes [ ]  No [ ]  N/A [X]

24.05 If answer to 24.04 is yes, report amount of collateral for conforming programs: \$ 0

24.06 If answer to 24.04 is no, report amount of collateral for other programs \$ 0

24.07 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract?  Yes [ ]  No [ ]  N/A [X]

24.08 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%?  Yes [ ]  No [ ]  N/A [X]

24.09 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending?  Yes [ ]  No [ ]  N/A [X]

24.10 For the reporting entity's security lending program, state the amount of the following as of December 31 of the current year:

24.101 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2: \$ 0

24.102 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2: \$ 0

24.103 Total payable for securities lending reported on the liability page: \$ 0

25.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is current in force? (Exclude securities subject to Interrogatory 21.1 and 24.03.)  Yes [ ]  No [X]

25.2 If yes, state the amount thereof at December 31 of the current year:

25.21 Subject to repurchase agreements \$ 0

25.22 Subject to reverse repurchase agreements \$ 0

25.23 Subject to dollar repurchase agreements \$ 0

25.24 Subject to reverse dollar repurchase agreements \$ 0

25.25 Placed under option agreements \$ 0

25.26 Letter stock or securities restricted as sale – excluding FHLB Capital Stock \$ 0

25.27 FHLB Capital Stock \$ 0

25.28 On deposit with states \$ 0

25.29 On deposit with other regulatory bodies \$ 0

25.30 Pledged as collateral – excluding collateral pledged to an FHLB \$ 0

25.31 Pledged as collateral to FHLB – including assets backing funding agreements \$ 0

25.32 Other \$ 0

25.3 For category (25.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
		\$

26.1 Does the reporting entity have any hedging transactions reported on Schedule DB?  Yes [ ]  No [X]

26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?  Yes [ ]  No [ ]  N/A [X]  
If no, attach a description with this statement.

**Lines 26.3 through 26.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:**

26.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a results of interest rate sensitivity?  Yes [ ]  No [X]

26.4 If the response to 26.3 is yes, does the reporting entity utilize:

26.41 Special accounting provision of SSAP No. 108  Yes [ ]  No [ ]

26.42 Permitted accounting practice  Yes [ ]  No [ ]

26.43 Other accounting guidance  Yes [ ]  No [ ]

26.5 By responding yes to 26.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following:

- The reporting entity has obtained explicit approval from the domiciliary state.
- Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.
- Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guidance Conditional Tail Expectation Amount.
- Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.

27.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity?  Yes [ ]  No [X]

27.2 If yes, state the amount thereof at December 31 of the current year: \$ 0

28. Excluding items in Schedule E-Part 3-Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC *Financial Condition Examiners Handbook*?  Yes [X]  No [ ]

28.01 For agreements that comply with the requirements of the NAIC *Financial Condition Examiners Handbook*, complete the following:

1 Name of Custodian(s)	2 Custodian's Address
Fifth Third Bank	5050 Kingsley Drive MD1MOB2D Cincinnati, OH 45263

28.02 For all agreements that do not comply with the requirements of the NAIC *Financial Condition Examiners Handbook*, provide the name, location and a complete explanation

**GENERAL INTERROGATORIES****PART 1 - COMMON INTERROGATORIES**

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year? Yes [X] No [ ]

28.04 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason
US Bank	Fifth Third Bank	10/04/2019	Service

28.05 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. ("...that have access to the investment accounts", "... handle securities").

1 Name of Firm or Individual	2 Affiliation

28.0597 For those firms/individuals listed in the table for Question 28.05, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets?

Yes [ ] No [X]

28.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 28.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?

Yes [ ] No [X]

28.06 For those firms or individuals listed in the table for 28.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed

29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D-Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])? Yes [ ] No [X]

29.2 If yes, complete the following schedule:

1 CUSIP	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
		\$
29.2999 TOTAL		\$

29.3 For each mutual fund listed in the table above, complete the following schedule:

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation
		\$	

30. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

		1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1	Bonds	\$ 83,307,563	\$ 97,517,471	\$ 14,209,909
30.2	Preferred Stocks	\$ 0	\$ 0	\$ 0
30.3	Totals	\$ 83,307,563	\$ 97,517,471	\$ 14,209,909

30.4 Describe the sources or methods utilized in determining the fair values:

Clearwater Analytics, Inc. and Custodian/Broker statements

Yes [X] No [ ]

31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D?

Yes [X] No [ ]

31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source?

Yes [X] No [ ]

31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:

32.1 Have all the filing requirements of the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* been followed? Yes [X] No [ ]

32.2 If no, list exceptions:

33. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designation 5GI security:

- Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
- Issuer or obligor is current on all contracted interest and principal payments.
- The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities?

Yes [ ] No [X]

34. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:

- The security was purchased prior to January 1, 2018.
- The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as an NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
- The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Has the reporting entity self-designated PLGI securities?

Yes [ ] No [X]

35. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:

- The shares were purchased prior to January 1, 2019.

**GENERAL INTERROGATORIES****PART 1 - COMMON INTERROGATORIES**

- b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
- d. The fund only or predominantly holds bonds in its portfolio.
- e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
- f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria?

Yes [  ] No [  ]

**OTHER**

36.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? \$ 3,530

36.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1 Name	2 Amount Paid
American Fraternal Alliance	\$ 3,000

37.1 Amount of payments for legal expenses, if any? \$ 0

37.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid
	\$

38.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? \$ 0

38.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1 Name	2 Amount Paid
	\$

**GENERAL INTERROGATORIES****PART 2 – LIFE, ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES INTERROGATORIES****Life, Accident and Health Companies/Fraterna Benefit Societies:**

1.1	Does the reporting entity have any direct Medicare Supplement Insurance in force?	Yes [ ]	No [X]
1.2	If yes, indicate premium earned on U.S. business only.	\$	0
1.3	What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?	\$	0
1.3	Reason for excluding:		
1.4	Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above.	\$	0
1.5	Indicate total incurred claims on all Medicare Supplement insurance.	\$	0
1.6	Individual policies:		
	Most current three years:		
1.61	Total premium earned	\$	0
1.62	Total incurred claims	\$	0
1.63	Number of covered lives	\$	0
	All years prior to most current three years:		
1.64	Total premium earned	\$	0
1.65	Total incurred claims	\$	0
1.66	Number of covered lives	\$	0
1.7	Group policies:		
	Most current three years:		
1.71	Total premium earned	\$	0
1.72	Total incurred claims	\$	0
1.73	Number of covered lives	\$	0
	All years prior to most current three years:		
1.74	Total premium earned	\$	0
1.75	Total incurred claims	\$	0
1.76	Number of covered lives	\$	0
2.	Health Test:		
		1 Current Year	2 Prior Year
2.1	Premium Numerator	\$ 0	\$ 0
2.2	Premium Denominator	\$ 1,973,635	\$ 3,714,007
2.3	Premium Ratio (2.1/2.2)	0.0%	0.0%
2.4	Reserve Numerator	\$ 0	\$ 0
2.5	Reserve Denominator	\$ 71,464,569	\$ 0
2.6	Reserve Ratio (2.4/2.5)	0.0%	0.0%
3.1	Does the reporting entity have Separate Accounts?	Yes [ ]	No [X]
3.2	If yes, has a Separate Accounts statement been filed with this Department	Yes [ ]	No [ ]
3.3	What portion of capital and surplus funds of the reporting entity covered by assets in the Separate Accounts statement, is not currently distributable from the Separate Accounts to the general account for use by the general account?	\$ 0	
3.4	State the authority under which Separate Accounts are maintained:		
3.5	Was any of the reporting entity's Separate Accounts business reinsured as of December 31?	Yes [ ]	No [X]
3.6	Has the reporting entity assumed by reinsurance any Separate Accounts business as of December 31?	Yes [ ]	No [X]
3.7	If the reporting entity has assumed Separate Accounts business, how much, if any, reinsurance assumed receivable for reinsurance of Separate Accounts reserve expense allowances is included as a negative amount in the liability for "Transfers to Separate Accounts due or accrued (net)?"	\$ 0	
4.	For reporting entities having sold annuities to another insurer where the insurer purchasing the annuities has obtained a release of liability from the claimant (payee) as the result of the purchase of an annuity from the reporting entity only:		
4.1	Amount of loss reserves established by these annuities during the current year:	\$ 0	
4.2	List the name and location of the insurance company purchasing the annuities and the statement value on the purchase date of the annuities.		
		1 P&C Insurance Company and Location	2 Statement Value on Purchase Date of Annuities (i.e., Present Value)
5.1	Do you act as a custodian for health savings accounts?	Yes [ ]	No [X]
5.2	If yes, please provide the amount of custodial funds held as of the reporting date.	\$ 0	
5.3	Do you act as an administrator for health savings accounts?	Yes [ ]	No [X]
5.4	If yes, please provide the balance of the funds administered as of the reporting date.	\$ 0	
6.1	Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers?	Yes [ ]	No [X]
			N/A [ ]

**GENERAL INTERROGATORIES****PART 2 – LIFE, ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES INTERROGATORIES**

6.2 If the answer to 6.1 is yes, please provide the following:

1 Company Name	2 NAIC Company Code	3 Domiciliary Jurisdiction	4 Reserve Credit	Assets Supporting Reserve Credit		
				5 Letters of Credit	6 Trust Agreements	7 Other
			\$	\$	\$	\$

7. Provide the following for individual ordinary life insurance\* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded).

7.1 Direct premiums written	\$	0
7.2 Total incurred claims	\$	0
7.3 Number of covered lives		0
<b>*Ordinary Life Insurance Includes</b>		
Term (whether full underwriting, limited underwriting, jet issue, "short form app")		
Whole Life (whether full underwriting, limited underwriting, jet issue, "short form app")		
Variable Life (with or without secondary guarantee)		
Universal Life (with or without secondary guarantee)		
Variable Universal Life (with or without secondary guarantee)		

8. Is the reporting entity licensed or charted, registered, qualified, eligible or writing business in at least two states?

Yes [X] No [ ]

8.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?

Yes [ ] No [ ]

**Life, Accident and Health Companies Only:**

9.1 Are personnel or facilities of this reporting entity used by another entity or entities or are personnel or facilities of another entity or entities used by this reporting entity (except for activities such as administration of jointly underwritten group contracts and joint mortality or morbidity studies)?

Yes [ ] No [ ]

9.2 Net reimbursement of such expenses between reporting entities:

9.21 Paid	\$	0
9.22 Received	\$	0

10.1 Does the reporting entity write any guaranteed interest contracts?

Yes [ ] No [ ]

10.2 If yes, what amount pertaining to these items is included in:

10.21 Page 3, Line 1	\$	0
10.22 Page 4, Line 1	\$	0

11. For stock reporting entities only:

11.1 Total amount paid in by stockholders as surplus funds since organization of the reporting entity:	\$	0
--	----	---

12. Total dividends paid stockholders since organization of the reporting entity:

12.11 Cash	\$	0
12.12 Stock	\$	0

13.1 Does the reporting entity reinsure any Workers' Compensation Carve-Out business defined as:

Yes [ ] No [ ]

Reinsurance (including retrocessional reinsurance) assumed by life and health insurers of medical, wage loss and death benefits of the occupational illness and accident exposures, but not the employers liability exposures, of business originally written as workers' compensation insurance.

13.2 If yes, has the reporting entity completed the *Workers' Compensation Carve-Out Supplement* to the Annual Statement?

Yes [ ] No [ ]

13.3 If 13.1 is yes, the amounts of earned premiums and claims incurred in this statement are:

	1 Reinsurance Assumed	2 Reinsurance Ceded	3 Net Retained
13.31 Earned premium	\$ 0	\$ 0	\$ 0
13.32 Paid claims	\$ 0	\$ 0	\$ 0
13.33 Claim liability and reserve (beginning of year)	\$ 0	\$ 0	\$ 0
13.34 Claim liability and reserve (end of year)	\$ 0	\$ 0	\$ 0
13.35 Incurred claims	\$ 0	\$ 0	\$ 0

13.4 If reinsurance assumed included amounts with attachment points below \$1,000,000, the distribution of the amounts reported in Lines 13.31 and 13.34 for Column (1) are:

	Attachment Point	1 Earned Premium	2 Claim Liability and Reserve
13.41 <\$25,000		\$ 0	\$ 0
13.42 \$25,000 — 99,999		\$ 0	\$ 0
13.43 \$100,000 — 249,999		\$ 0	\$ 0
13.44 \$250,000 — 999,999		\$ 0	\$ 0
13.45 \$1,000,000 or more		\$ 0	\$ 0

13.5 What portion of earned premium reported in 13.31, Column 1 was assumed from pools?

\$ 0

**Fraternal Benefit Societies Only:**

14. Is the reporting entity organized and conducted on the lodge system, with ritualistic form of work and representative form of government?

Yes [X] No [ ]

15. How often are meetings of the subordinate branches required to be held?

Monthly

16. How are the subordinate branches represented in the supreme or governing body?

Delegates at Convention

17. What is the basis of representation in the governing body?

**GENERAL INTERROGATORIES****PART 2 – LIFE, ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES INTERROGATORIES**One Delegate for each 50 members in good standing or fractions of 26 or more within a minimum of two Delegates and maximum of 12 per lodge.

18.1 How often are regular meetings of the governing body held?  
Every Two Years

18.2 When was the last regular meeting of the governing body held? \_\_\_\_\_ 06/02/2018

18.3 When and where will the next regular or special meeting of the governing body be held?  
May 30 & 31, 2020. Cleveland, OH

18.4 How many members of the governing body attended the last regular meeting? \_\_\_\_\_ 86

18.5 How many of the same were delegates of the subordinate branches? \_\_\_\_\_ 81

19. How are the expenses of the governing body defrayed?  
Society's General Fund

20. When and by whom are the officers and directors elected?  
By Delegates at Convention

21. What are the qualifications for membership?  
Good Moral Character. Interest in the Transylvanian Saxons Culture and Traditions.

22. What are the limiting ages for admission?  
0-70 for Life Plans. No Age limits for Annuities.

23. What is the minimum and maximum insurance that may be issued on any one life?  
Minimum of \$2,000; No Maximum

24. Is a medical examination required before issuing a benefit certificate to applicants? Yes [ ] No [X]

25. Are applicants admitted to membership without filing an application with and becoming a member of a local branch by ballot and initiation? Yes [ ] No [X]

26.1 Are notices of the payments required sent to the members? Yes [X] No [ ] N/A [ ]

26.2 If yes, do the notices state the purpose for which the money is to be used? Yes [X] No [ ]

27. What proportion of first and subsequent year's payments may be used for management expenses?

27.11 First Year	70.0%
27.12 Subsequent Years	15.7%

28.1 Is any part of the mortuary, disability, emergency or reserve fund, or the accretions from or payments for the same, used for expenses? Yes [ ] No [X]

28.2 If so, what amount and for what purpose? \$ \_\_\_\_\_

29.1 Does the reporting entity pay an old age disability benefit? Yes [ ] No [X]

29.2 If yes, at what age does the benefit commence? \_\_\_\_\_

30.1 Has the constitution or have the laws of the reporting entity been amended during the year? Yes [ ] No [X]

30.2 If yes, when? \_\_\_\_\_

31. Have you filed with this Department all forms of benefit certificates issued, a copy of the constitution and all of the laws, rules and regulations in force at the present time? Yes [X] No [ ]

32.1 State whether all or a portion of the regular insurance contributions were waived during the current year under premium-paying certificates on account of meeting attained age or membership requirements? Yes [X] No [ ]

32.2 If so, was an additional reserve included in Exhibit 5? Yes [X] No [ ] N/A [ ]

32.3 If yes, explain  
Whole Life contracts valued at LP85 Reserves (Fully Paid-up Reserves).

33.1 Has the reporting entity reinsured, amalgamated with, or absorbed any company, order, society, or association during the year? Yes [ ] No [X]

33.2 If yes, was there any contract agreement, or understanding, written or oral, expressed or implied, by means of which any officer, director, trustee, or any other person, or firm, corporation, society or association, received or is to receive any fee, commission, emolument, or compensation of any nature whatsoever in connection with, on an account of such reinsurance, amalgamation, absorption, or transfer of membership or funds? Yes [ ] No [ ] N/A [X]

34. Has any present or former officer, director, trustee, incorporator, or any other persons, or any firm, corporation, society or association, any claims of any nature whatsoever against this reporting entity, which is not included in the liabilities on Page 3 of this statement? Yes [ ] No [X]

35.1 Does the reporting entity have outstanding assessments in the form of liens against policy benefits that have increased surplus? Yes [ ] No [X]

35.2 If yes, what is the date of the original lien and the total outstanding balance of liens that remain in surplus?

Date	Outstanding Lien Amount
	\$ _____

**FIVE-YEAR HISTORICAL DATA**

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e., 17.6.

\$000 omitted for amounts of life insurance

	1 2019	2 2018	3 2017	4 2016	5 2015
<b>Life Insurance in Force (Exhibit of Life Insurance)</b>					
1. Ordinary - whole life and endowment (Line 34, Col. 4).....	26,180	26,198	26,239	26,163	26,352
2. Ordinary - term (Line 21, Col. 4, less Line 34, Col. 4).....	0				
3. Credit life (Line 21, Col. 6).....					
4. Group, excluding FEGLI/SGLI (Line 21, Col. 9 less Lines 43 & 44, Col. 4).....					
5. Industrial (Line 21, Col. 2).....					
6. FEGLI/SGLI (Lines 43 & 44, Col. 4).....					
7. Total (Line 21, Col. 10).....	26,180	26,198	26,239	26,163	26,352
7.1 Total in force for which VM-20 deterministic/stochastic reserves are calculated.....				XXX	XXX
<b>New Business Issued (Exhibit of Life Insurance)</b>					
8. Ordinary - whole life and endowment (Line 34, Col. 2).....	102	270	254	89	174
9. Ordinary - term (Line 2, Col. 4, less Line 34, Col. 2).....					
10. Credit life (Line 2, Col. 6).....					
11. Group (Line 2, Col. 9).....					
12. Industrial (Line 2, Col. 2).....					
13. Total (Line 2, Col. 10).....	102	270	254	89	174
<b>Premium Income - Lines of Business (Exhibit 1-Part 1)</b>					
14. Industrial life (Line 20.4, Col. 2).....					
15.1 Ordinary life insurance (Line 20.4, Col. 3).....	75,617	78,320	85,750	70,871	85,095
15.2 Ordinary individual annuities (Line 20.4, Col. 4).....	1,898,018	3,635,688	2,772,499	2,701,897	2,913,326
16. Credit life (group and individual) (Line 20.4, Col. 5).....					
17.1 Group life insurance (Line 20.4, Col. 6).....					
17.2 Group annuities (Line 20.4, Col. 7).....					
18.1 A&H - group (Line 20.4, Col. 8).....					
18.2 A&H - credit (group and individual) (Line 20.4, Col. 9).....					
18.3 A&H - other (Line 20.4, Col. 10).....					
19. Aggregate of all other lines of business (Line 20.4, Col. 11).....					
20. Total.....	1,973,635	3,714,008	2,858,249	2,772,768	2,998,421
<b>Balance Sheet (Pages 2 and 3)</b>					
21. Total admitted assets excluding Separate Accounts business (Page 2, Line 26, Col. 3).....	94,283,949	93,210,584	89,313,861	87,313,180	85,547,627
22. Total liabilities excluding Separate Accounts business (Page 3, Line 26).....	81,839,682	81,831,835	79,082,996	77,793,760	76,887,929
23. Aggregate life reserves (Page 3, Line 1).....	70,050,007	71,181,342	68,463,084	66,979,971	65,691,717
23.1 Excess VM-20 deterministic/stochastic reserve over NPR related to Line 7.1.....				XXX	XXX
24. Aggregate A&H reserves (Page 3, Line 2).....					
25. Deposit-type contract funds (Page 3, Line 3).....	8,995,312	8,189,011	8,489,150	7,876,822	8,476,688
26. Asset valuation reserve (Page 3, Line 24.01).....	479,526	296,806	510,317	567,873	615,002
27. Capital (Page 3, Lines 29 & 30).....					
28. Surplus (Page 3, Line 37).....	12,444,267	11,378,750	10,230,865	9,519,420	8,659,698
<b>Cash Flow (Page 5)</b>					
29. Net cash from operations (Line 11).....	325,060	3,852,069	2,045,168	2,246,716	2,920,063
<b>Risk-Based Capital Analysis</b>					
30. Total adjusted capital.....	12,951,293	11,703,056	10,768,682	10,087,293	9,274,700
31. Authorized control level risk-based capital.....	833,636	1,079,697	1,233,507	1,226,634	1,150,978
<b>Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Line No. /Page 2, Line 12, Col. 3) x 100.0</b>					
32. Bonds (Line 1).....	89.5	80.7	81.6	77.9	79.5
33. Stocks (Lines 2.1 and 2.2).....	1.2	0.9	1.1	1.3	1.3
34. Mortgage loans on real estate (Lines 3.1 and 3.2).....					
35. Real estate (Line 4.1, 4.2 and 4.3).....	0.0	0.0	0.0	0.0	0.0
36. Cash, cash equivalents and short-term investments (Line 5).....	7.3	16.3	14.0	18.1	16.6
37. Contract loans (Line 6).....	0.3	0.2	0.2	0.2	0.2
38. Derivatives (Line 7).....					
39. Other invested assets (Line 8).....	1.7	1.8	3.0	2.4	2.5
40. Receivables for securities (Line 9).....					
41. Securities lending reinvested collateral assets (Line 10).....					
42. Aggregate write-ins for invested assets (Line 11).....					
43. Cash, cash equivalents and invested assets (Line 12).....	100.0	100.0	100.0	100.0	100.0

**FIVE-YEAR HISTORICAL DATA**

(continued)

	1 2019	2 2018	3 2017	4 2016	5 2015
<b>Investments in Parent, Subsidiaries and Affiliates</b>					
44. Affiliated bonds (Sch. D Summary, Line 12, Col. 1).....					
45. Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1).....					
46. Affiliated common stocks (Sch. D Summary, Line 24, Col. 1).....					
47. Affiliated short-term investments (subtotal included in Sch. DA, Verif., Col. 5, Line 10).....					
48. Affiliated mortgage loans on real estate .....					
49. All other affiliated.....					
50. Total of above Lines 44 to 49.....	0	0	0	0	0
51. Total investment in parent included in Lines 44 to 49 above.....					
<b>Total Nonadmitted and Admitted Assets</b>					
52. Total nonadmitted assets (Page 2, Line 28, Col. 2).....	629,840	604,623	587,110	554,601	535,786
53. Total admitted assets (Page 2, Line 28, Col. 3).....	94,283,949	93,210,584	89,313,861	87,313,180	85,547,627
<b>Investment Data</b>					
54. Net investment income (Exhibit of Net Investment Income).....	4,631,536	4,471,802	4,373,196	4,277,835	4,228,991
55. Realized capital gains (losses) (Page 4, Line 34, Column 1).....	(28,813)	55,051	(79,638)	41,773	1,399
56. Unrealized capital gains (losses) (Page 4, Line 38, Column 1).....	262,317	(118,625)	(9,608)	114,054	(75,281)
57. Total of above Lines 54, 55 and 56.....	4,865,040	4,408,228	4,283,950	4,433,662	4,155,109
<b>Benefits and Reserve Increase (Page 6)</b>					
58. Total contract/certificate benefits - life (Lines 10, 11, 12, 13, 14 and 15, Col. 1 minus Lines 10, 11, 12, 13, 14 and 15, Cols. 6, 7 & 8).....	5,632,509	3,379,674	3,895,229	3,947,174	3,058,881
59. Total contract/certificate benefits - A&H (Lines 13 & 14, Col. 6).....					
60. Increase in life reserves - other than group and annuities (Line 19, Col. 2).....	122,521	1,096	19,610	194	58,345
61. Increase in A&H reserves (Line 19, Col. 6).....					
62. Dividends to policyholders and refunds to members (Line 30, Col 1).....	51,821	51,774	51,780	51,943	55,962
<b>Operating Percentages</b>					
63. Insurance expense percent (Page 6, Col. 1, Lines 21, 22, & 23 less Line (6) / (Page 6, Col. 1, Line 1 plus Exhibit 7, Col. 2, Line 2) x 100.00).....	38.6	22.7	27.6	30.6	25.5
64. Lapse percent (ordinary only) [(Exhibit of Life Insurance, Col. 4, Lines 14 & 15) / 1/2 (Exhibit of Life Insurance, Col. 4, Lines 1 & 21)] x 100.00.....	0.4	0.5	0.3	0.7	0.3
65. A&H loss percent (Schedule H, Part 1, Lines 5 & 6, Col. 2).....					
66. A&H cost containment percent (Schedule H, Part 1, Line 4, Col. 2).....					
67. A&H expense percent excluding cost containment expenses (Schedule H, Part 1, Line 10, Col. 2).....					
<b>A&amp;H Claim Reserve Adequacy</b>					
68. Incurred losses on prior years' claims - group health (Sch. H, Part 3, Line 3.1, Col. 2).....					
69. Prior years' claim liability and reserve - group health (Sch. H, Part 3, Line 3.2, Col. 2).....					
70. Incurred losses on prior years' claims - health other than group (Sch. H, Part 3, Line 3.1, Col. 1 less Col. 2).....					
71. Prior years' claim liability and reserve - health other than group (Sch. H, Part 3, Line 3.2, Col. 1 less Col. 2).....					
<b>Net Gains From Operations After Dividends to Policyholders/Members' Refunds and Federal Income Taxes by Lines of Business (Page 6.x, Line 33)</b>					
72. Industrial life (Page 6.1, Col. 2).....					
73. Ordinary - life (Page 6.1, Col. 1 less Cols. 2, 10 and 12).....	156,905	11,479	19,820	18,193	29,008
74. Ordinary - individual annuities (Page 6, Col. 4).....	857,830	986,468	723,241	638,569	595,005
75. Ordinary - supplementary contracts.....	XXX				
76. Credit life (Page 6.1, Col. 10 plus Page 6.2, Col. 7).....					
77. Group life (Page 6.2, Col. 1 less Col. 7 less Col. 9).....					
78. Group annuities (Page 6, Col. 5).....					
79. A&H - group (Page 6.5, Col. 3).....					
80. A&H - credit (Page 6.5, Col. 10).....					
81. A&H - other (Page 6.5, Col. 1 less Cols. 3 and 10).....					
82. Aggregate of all other lines of business (Page 6, Col. 8).....					
83. Fraternal (Page 6, Col. 7).....					
84. Total (Page 6, Col. 1).....	1,014,735	997,947	743,061	656,762	624,013

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors?

Yes  No 

If no, please explain:

# EXHIBIT OF LIFE INSURANCE

(\$000 Omitted for Amounts of Life Insurance)

	Industrial		Ordinary		Credit Life (Group and Individual)		Group		10 Total Amount of Insurance
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance	5 Number of Individual Policies and Group Certificates	6 Amount of Insurance	7 Policies	8 Certificates	
1. In force end of prior year.....			5,564	26,198					26,198
2. Issued during year.....			16	102					102
3. Reinsurance assumed.....									0
4. Revived during year.....									0
5. Increased during year (net).....									0
6. Subtotals, Lines 2 to 5.....	0	0	16	102	0	0	0	0	102
7. Additions by dividends during year.....	XXX		XXX	140	XXX		XXX	XXX	140
8. Aggregate write-ins for increases.....	0	0	0	0	0	0	0	0	0
9. Totals (Lines 1 and 6 to 8).....	0	0	5,580	26,440	0	0	0	0	26,440
<b>Deductions during year:</b>									
10. Death.....			77	119			XXX		119
11. Maturity.....							XXX		0
12. Disability.....							XXX		0
13. Expiry.....			19	38					38
14. Surrender.....			19	97					97
15. Lapse.....									0
16. Conversion.....							XXX	XXX	XXX
17. Decreased (net).....			7	6					6
18. Reinsurance.....									0
19. Aggregate write-ins for decreases.....	0	0	0	0	0	0	0	0	0
20. Totals (Lines 10 to 19).....	0	0	122	260	0	0	0	0	260
21. In force end of year (b) (Line 9 minus Line 20).....	0	0	5,458	26,180	0	0	0	0	26,180
22. Reinsurance ceded end of year.....	XXX		XXX	515	XXX		XXX	XXX	515
23. Line 21 minus Line 22.....	XXX	0	XXX	25,665	XXX	(a) 0	XXX	XXX	0
<b>DETAILS OF WRITE-INS</b>									
0801.....									0
0802.....									0
0803.....									0
0898. Summary of remaining write-ins for Line 8 from overflow page	0	0	0	0	0	0	0	0	0
0899. Totals (Lines 0801 through 0803 plus 0898) (Line 8 above).....	0	0	0	0	0	0	0	0	0
1901.....									0
1902.....									0
1903.....									0
1998. Summary of remaining write-ins for Line 19 from overflow page	0	0	0	0	0	0	0	0	0
1999. Totals (Lines 1901 through 1903 plus 1998) (Line 19 above).....	0	0	0	0	0	0	0	0	0

Life Accident and Health Companies Only:

(a) Group \$.....0; Individual \$.....0.

Fraternal Benefit Societies Only:

(b) Paid-up insurance included in the final totals of Line 21 (including additions to certificates) number of certificates.....5,250 , amount, \$....24,788,594.

Additional accidental death benefits included in life certificates were in amount \$....412,262. Does the society collect any contributions from members for general expenses of the society under fully paid-up certificates? Yes [ ] No [ X ]

If not, how are such expenses met?.....Excess interest, mortality savings

**EXHIBIT OF LIFE INSURANCE**

(\$000 Omitted for Amounts of Life Insurance) (Continued)

**ADDITIONAL INFORMATION ON INSURANCE IN FORCE END OF YEAR**

	Industrial		Ordinary	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance
24. Additions by dividends.....	....XXX		....XXX.....	.....140
25. Other paid-up insurance.....				
26. Debit ordinary insurance.....	....XXX	....XXX.....		

**ADDITIONAL INFORMATION ON ORDINARY INSURANCE**

Term Insurance Excluding Extended Term Insurance	Issued During Year (Included in Line 2)		In Force End of Year (Included in Line 21)	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance
27. Term policies-decreasing.....				
28. Term policies-other.....				
29. Other term insurance-decreasing.....	....XXX		....XXX.....	
30. Other term insurance.....	....XXX		....XXX.....	
31. Totals (Lines 27 to 30).....	.....0	.....0	.....0	.....0
Reconciliation to Lines 2 and 21:				
32. Term additions.....	....XXX		....XXX.....	
33. Totals, extended term insurance.....	....XXX	....XXX.....		
34. Totals, whole life and endowment.....	.....16	.....102	.....5,458	.....26,180
35. Totals (Lines 31 to 34).....	.....16	.....102	.....5,458	.....26,180

**CLASSIFICATION OF AMOUNT OF INSURANCE BY PARTICIPATING STATUS**

	Issued During Year (Included in Line 2)		In Force End of Year (Included in Line 21)	
	1 Non-Participating	2 Participating	3 Non-Participating	4 Participating
36. Industrial.....				
37. Ordinary.....		.....102		.....26,180
38. Credit Life (Group and Individual).....				
39. Group.....				
40. Totals (Lines 36 to 39).....	.....0	.....102	.....0	.....26,180

**ADDITIONAL INFORMATION ON CREDIT LIFE AND GROUP INSURANCE**

	Credit Life		Group	
	1 Number of Individual Policies and Group Certificates	2 Amount of Insurance	3 Number of Certificates	4 Amount of Insurance
41. Amount of insurance included in Line 2 ceded to other companies.....	....XXX		....XXX.....	
42. Number in force end of year if the number under shared groups is counted on a pro-rata basis.....		....XXX.....		....XXX.....
43. Federal Employees' Group Life Insurance included in Line 21.....				
44. Servicemen's Group Life Insurance included in Line 21.....				
45. Group Permanent Insurance included in Line 21.....				

**ADDITIONAL ACCIDENTAL DEATH BENEFITS**

46. Amount of additional accidental death benefits in force end of year under ordinary policies.....		.....412
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**BASIS OF CALCULATION OF ORDINARY TERM INSURANCE**

47. State basis of calculation of (47.1) decreasing term insurance contained in Family Income, Mortgage Protection, etc., policies and riders and of (47.2) term insurance on wife and children under Family, Parent and Children, etc., policies and riders included above.	
47.1	
47.2	

**POLICIES WITH DISABILITY PROVISIONS**

Disability Provision	Industrial		Ordinary		Credit		Group	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance	5 Number of Policies	6 Amount of Insurance	7 Number of Certificates	8 Amount of Insurance
48. Waiver of Premium.....		.....19	.....196					
49. Disability Income.....								
50. Extended Benefits.....		....XXX	....XXX.....					
51. Other.....								
52. Total.....	.....0	(a).....0	.....19	(a).....196	.....0	(a).....0	.....0	(a).....0

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

**EXHIBIT OF NUMBER OF POLICIES, CONTRACTS, CERTIFICATES, INCOME PAYABLE  
AND ACCOUNT VALUES IN FORCE FOR SUPPLEMENTARY CONTRACTS,  
ANNUITIES, ACCIDENT & HEALTH AND OTHER POLICIES**

**SUPPLEMENTARY CONTRACTS**

	Ordinary		Group	
	1 Involving Life Contingencies	2 Not Involving Life Contingencies	3 Involving Life Contingencies	4 Not Involving Life Contingencies
1. In force end of prior year.....				
2. Issued during year.....				
3. Reinsurance assumed.....				
4. Increased during year (net).....				
5. Total (Lines 1 to 4).....	0	0	0	0
Deductions during year:				
6. Decreased (net).....				
7. Reinsurance ceded.....				
8. Totals (Lines 6 and 7).....	0	0	0	0
9. In force end of year.....	0	0	0	0
10. Amount on deposit.....		(a).....		(a).....
11. Income now payable.....		(a).....		
12. Amount of income payable.....	(a).....	(a).....	(a).....	(a).....

**ANNUITIES**

	Ordinary		Group	
	1 Immediate	2 Deferred	3 Contracts	4 Certificates
1. In force end of prior year.....	31	2,295		
2. Issued during year.....	3	90		
3. Reinsurance assumed.....				
4. Increased during year (net).....				
5. Total (Lines 1 to 4).....	34	2,385	0	0
Deductions during year:				
6. Decreased (net).....	4	113		
7. Reinsurance ceded.....				
8. Totals (Lines 6 and 7).....	4	113	0	0
9. In force end of year.....	30	2,272	0	0
Income now payable:				
10. Amount of income payable.....	(a).....181,410	XXX.....	XXX.....	(a).....
Deferred fully paid:				
11. Account balance.....	XXX.....	(a).....	XXX.....	(a).....
Deferred not fully paid:				
12. Account balance.....	XXX.....	(a).....59,811,896	XXX.....	(a).....

**ACCIDENT AND HEALTH INSURANCE**

	Group		Credit		Other	
	1 Certificates	2 Premiums in force	3 Policies	4 Premiums in force	5 Policies	6 Premiums in force
1. In force end of prior year.....						
2. Issued during year.....						
3. Reinsurance assumed.....						
4. Increased during year (net).....		XXX.....		XXX.....		XXX.....
5. Total (Lines 1 to 4).....	0	XXX.....	0	XXX.....	0	XXX.....
Deductions during year:						
6. Conversions.....		XXX.....	XXX.....	XXX.....	XXX.....	XXX.....
7. Decreased (net).....		XXX.....		XXX.....		XXX.....
8. Reinsurance ceded.....		XXX.....		XXX.....		XXX.....
9. Totals (Lines 6 to 8).....	0	XXX.....	0	XXX.....	0	XXX.....
10. In force end of year.....	0	(a).....	0	(a).....	0	(a).....

**DEPOSIT FUNDS AND DIVIDEND ACCUMULATIONS**

		1 Deposit Funds		2 Dividend Accumulations	
		Contracts		Contracts	
1. In force end of prior year.....			.75		1,772
2. Issued during year.....			.24		
3. Reinsurance assumed.....					
4. Increased during year (net).....					
5. Total (Lines 1 to 4).....			.99		1,772
Deductions during year:					
6. Decreased (net).....			2		56
7. Reinsurance ceded.....					
8. Totals (Lines 6 and 7).....			2		56
9. In force end of year.....			.97		1,716
10. Amount of account balance.....		(a).....4,529,009		(a).....	865,729

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

**SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS (b)**

Allocated by States and Territories

States, Etc.	1 Active Status (a)	Direct Business Only					
		Life Contracts		4 Accident and Health Insurance Premiums, Including Policy, Mem- bership and Other Fees	5 Other Considerations	6 Total Columns 2 through 5	7 Deposit-Type Contracts
		2 Life Insurance Premiums	3 Annuity Considerations				
1. Alabama.....	AL	N					0
2. Alaska.....	AK	N					0
3. Arizona.....	AZ	N					0
4. Arkansas.....	AR	N					0
5. California.....	CA	N					0
6. Colorado.....	CO	N					0
7. Connecticut.....	CT	N					0
8. Delaware.....	DE	N					0
9. District of Columbia.....	DC	N					0
10. Florida.....	FL	N					0
11. Georgia.....	GA	N					0
12. Hawaii.....	HI	N					0
13. Idaho.....	ID	N					0
14. Illinois.....	IL	L	3,364	53,321		56,685	
15. Indiana.....	IN	L	926	48,562		49,488	
16. Iowa.....	IA	N					0
17. Kansas.....	KS	N					0
18. Kentucky.....	KY	N					0
19. Louisiana.....	LA	N					0
20. Maine.....	ME	N					0
21. Maryland.....	MD	N					0
22. Massachusetts.....	MA	N					0
23. Michigan.....	MI	L	490	72,141		72,631	
24. Minnesota.....	MN	N					0
25. Mississippi.....	MS	N					0
26. Missouri.....	MO	N					0
27. Montana.....	MT	N					0
28. Nebraska.....	NE	N					0
29. Nevada.....	NV	N					0
30. New Hampshire.....	NH	N					0
31. New Jersey.....	NJ	N					0
32. New Mexico.....	NM	N					0
33. New York.....	NY	N					0
34. North Carolina.....	NC	N					0
35. North Dakota.....	ND	N					0
36. Ohio.....	OH	L	29,838	1,363,515		1,393,353	
37. Oklahoma.....	OK	N					0
38. Oregon.....	OR	N					0
39. Pennsylvania.....	PA	L	3,188	360,477		363,665	
40. Rhode Island.....	RI	N					0
41. South Carolina.....	SC	N					0
42. South Dakota.....	SD	N					0
43. Tennessee.....	TN	N					0
44. Texas.....	TX	N					0
45. Utah.....	UT	N					0
46. Vermont.....	VT	N					0
47. Virginia.....	VA	N					0
48. Washington.....	WA	N					0
49. West Virginia.....	WV	N					0
50. Wisconsin.....	WI	N					0
51. Wyoming.....	WY	N					0
52. American Samoa.....	AS	N					0
53. Guam.....	GU	N					0
54. Puerto Rico.....	PR	N					0
55. US Virgin Islands.....	VI	N					0
56. Northern Mariana Islands.....	MP	N					0
57. Canada.....	CAN	N					0
58. Aggregate Other Alien.....	OT	XXX	0	0	0	0	0
59. Subtotal.....		XXX	37,806	1,898,016	0	1,935,822	0
90. Reporting entity contributions for employee benefit plans.....		XXX					0
91. Dividends or refunds applied to purchase paid-up additions and annuities.....		XXX	39,518			39,518	
92. Dividends or refunds applied to shorten endowment or premium paying period.....		XXX				0	
93. Premium or annuity considerations waived under disability or other contract provisions.....		XXX				0	
94. Aggregate other amounts not allocable by State.....		XXX	0	0	0	0	0
95. Totals (Direct Business).....		XXX	77,324	1,898,016	0	1,975,340	0
96. Plus reinsurance assumed.....		XXX				0	
97. Totals (All Business).....		XXX	77,324	1,898,016	0	1,975,340	0
98. Less reinsurance ceded.....		XXX				0	
99. Totals (All Business) less reinsurance ceded.....		XXX	77,324	1,898,016	(c) 0	1,975,340	0

**DETAILS OF WRITE-INS**

58001.....		XXX					0
58002.....		XXX					0
58003.....		XXX					0
58998. Summ. of remaining write-ins for line 58 from overflow page.....		XXX	0	0	0	0	0
58999. Total (Lines 58001 thru 58003 plus 58998) (Line 58 above).....		XXX	0	0	0	0	0
9401.....		XXX					0
9402.....		XXX					0
9403.....		XXX					0
9498. Summ. of remaining write-ins for line 94 from overflow page.....		XXX	0	0	0	0	0
9499. Total (Lines 9401 thru 9403 plus 9498) (Line 94 above).....		XXX	0	0	0	0	0

## (a) Active Status Counts:

L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 5  
 E - Eligible - Reporting entities eligible or approved to write surplus lines in the state..... 0

R - Registered - Non-domiciled RRGs..... 0  
 Q - Qualified - Qualified or accredited reinsurer..... 0  
 N - None of the above - Not allowed to write business in the state..... 52

## (b) Explanation of basis of allocation by states, etc., of premiums and annuity considerations.

Allocation based on which branch the insured belongs to and the associated premiums and annuity considerations received by the branch for the insured.

(c) Column 4 should balance with Exhibit 1, Lines 6.4, 10.4 and 16.4, Cols. 8, 9, and 10, or with Schedule H, Part 1, Column 1, Line 1. Indicate which:

Exhibit 1, Lines 6.4, 10.4 and 16.4, Cols. 8, 9 and 10

**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
PART 1 – ORGANIZATIONAL CHART

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**2019 ALPHABETICAL INDEX**  
**LIFE ANNUAL STATEMENT BLANK**

Analysis of Increase in Reserves During The Year	7	Schedule D – Part 2 – Section 2	E12
Analysis of Operations By Lines of Business	6	Schedule D – Part 3	E13
Asset Valuation Reserve Default Component	30	Schedule D – Part 4	E14
Asset Valuation Reserve Equity	32	Schedule D – Part 5	E15
Asset Valuation Reserve Replications (Synthetic) Assets	35	Schedule D – Part 6 – Section 1	E16
Asset Valuation Reserve	29	Schedule D – Part 6 – Section 2	E16
Assets	2	Schedule D – Summary By Country	SI04
Cash Flow	5	Schedule D – Verification Between Years	SI03
Exhibit 1 – Part 1 – Premiums and Annuity Considerations for Life and Accident and Health Contracts	9	Schedule DA – Part 1	E17
Exhibit 1 – Part 2 – Dividends and Coupons Applied, Reinsurance Commissions and Expense	10	Schedule DA – Verification Between Years	SI10
Exhibit 2 – General Expenses	11	Schedule DB – Part A – Section 1	E18
Exhibit 3 – Taxes, Licenses and Fees (Excluding Federal Income Taxes)	11	Schedule DB – Part A – Section 2	E19
Exhibit 4 – Dividends or Refunds	11	Schedule DB – Part A – Verification Between Years	SI11
Exhibit 5 – Aggregate Reserve for Life Contracts	12	Schedule DB – Part B – Section 1	E20
Exhibit 5 – Interrogatories	13	Schedule DB – Part B – Section 2	E21
Exhibit 5A – Changes in Bases of Valuation During The Year	13	Schedule DB – Part B – Verification Between Years	SI11
Exhibit 6 – Aggregate Reserves for Accident and Health Contracts	14	Schedule DB – Part C – Section 1	SI12
Exhibit 7 – Deposit-Type Contracts	15	Schedule DB – Part C – Section 2	SI13
Exhibit 8 – Claims for Life and Accident and Health Contracts – Part 1	16	Schedule DB – Part D – Section 1	E22
Exhibit 8 – Claims for Life and Accident and Health Contracts – Part 2	17	Schedule DB – Part D – Section 2	E23
Exhibit of Capital Gains (Losses)	8	Schedule DB – Part E	E24
Exhibit of Life Insurance	25	Schedule DB – Verification	SI14
Exhibit of Net Investment Income	8	Schedule DL – Part 1	E25
Exhibit of Nonadmitted Assets	18	Schedule DL – Part 2	E26
Exhibit of Number of Policies, Contracts, Certificates, Income Payable and Account Values	27	Schedule E – Part 1 – Cash	E27
Five-Year Historical Data	22	Schedule E – Part 2 – Cash Equivalents	E28
Form for Calculating the Interest Maintenance Reserve (IMR)	28	Schedule E – Verification Between Years	SI15
General Interrogatories	20	Schedule E – Part 3 – Special Deposits	E29
Jurat Page	1	Schedule F	36
Liabilities, Surplus and Other Funds	3	Schedule H – Accident and Health Exhibit – Part 1	37
Life Insurance (State Page)	24	Schedule H – Part 2, Part 3 and Part 4	38
Notes To Financial Statements	19	Schedule H – Part 5 – Health Claims	39
Overflow Page For Write-ins	55	Schedule S – Part 1 – Section 1	40
Schedule A – Part 1	E01	Schedule S – Part 1 – Section 2	41
Schedule A – Part 2	E02	Schedule S – Part 2	42
Schedule A – Part 3	E03	Schedule S – Part 3 – Section 1	43
Schedule A – Verification Between Years	SI02	Schedule S – Part 3 – Section 2	44
Schedule B – Part 1	E04	Schedule S – Part 4	45
Schedule B – Part 2	E05	Schedule S – Part 5	46
Schedule B – Part 3	E06	Schedule S – Part 6	47
Schedule B – Verification Between Years	SI02	Schedule S – Part 7	48
Schedule BA – Part 1	E07	Schedule T – Part 2 Interstate Compact	50
Schedule BA – Part 2	E08	Schedule T – Premiums and Annuity Considerations	49
Schedule BA – Part 3	E09	Schedule Y – Information Concerning Activities of Insurer Members of a Holding Company Group	51
Schedule BA – Verification Between Years	SI03	Schedule Y – Part 1A – Detail of Insurance Holding Company System	52
Schedule D – Part 1	E10	Schedule Y – Part 2 – Summary of Insurer's Transactions With Any Affiliates	53
Schedule D – Part 1A – Section 1	SI05	Summary Investment Schedule	SI01
Schedule D – Part 1A – Section 2	SI08	Summary of Operations	4
Schedule D – Part 2 – Section 1	E11	Supplemental Exhibits and Schedules Interrogatories	54