



LIFE, AND ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES - ASSOCIATION EDITION

## ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2019  
OF THE CONDITION AND AFFAIRS OF THE

### Family Heritage Life Insurance Company of America

NAIC Group Code 0290 0290 NAIC Company Code 77968 Employer's ID Number 34-1626521  
(Current) (Prior)

Organized under the Laws of OHIO, State of Domicile or Port of Entry OH

Country of Domicile United States of America

Licensed as business type: Life, Accident and Health [ X ] Fraternal Benefit Societies [ ]

Incorporated/Organized 08/22/1989 Commenced Business 11/17/1989

Statutory Home Office 6001 East Royalton Road, Suite 200, Cleveland, OH, US 44147-3529  
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 6001 East Royalton Road, Suite 200  
(Street and Number) Cleveland, OH, US 44147-3529, 440-922-5200  
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address P.O. Box 470608, Cleveland, OH, US 44147-3529  
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 3700 South Stonebridge Drive  
(Street and Number) McKinney, TX, US 75070-8080, 469-617-4407  
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.FamilyHeritageLife.com

Statutory Statement Contact Brett Turner, 469-617-4407  
(Name) bxturbo@globe.life, 972-569-3734  
(E-mail Address) (FAX Number)

#### OFFICERS

President	<u>James Eric "Bo" McPartland</u>	Secretary	<u>Joel Patrick Scarborough</u>
Treasurer	<u>Michael Shane Henrie</u>	Appointed Actuary	<u>Barbara Sue Emig</u>

#### OTHER

<u>David Kendall Carlson, Divisional Senior Vice President</u>	<u>David Robert Cochrane, Divisional Senior Vice President</u>	<u>Tony Michael Martella, Division Senior Vice President</u>
<u>Seamus Fitzpatrick, Division Senior Vice President</u>	<u>Jeffrey Scott Morris, Divisional Senior Vice President</u>	<u>William Michael Pressley, Divisional Vice President</u>

#### DIRECTORS OR TRUSTEES

<u>James Eric "Bo" McPartland</u>	<u>Joel Patrick Scarborough</u>	<u>Jeffrey Scott Morris</u>
<u>Thomas Peter Kalmbach</u>	<u>Michael Shane Henrie</u>	<u>Maria Rose Burnett</u>

State of Texas SS: \_\_\_\_\_  
County of Collin

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.

Jame Eric "Bo" McPartland  
President

Michael Shane Henrie  
Treasurer

Joel Patrick Scarborough  
Secretary

Subscribed and sworn to before me this  
14th day of February, 2020

a. Is this an original filing? .....  
b. If no,  
1. State the amendment number.....  
2. Date filed .....  
3. Number of pages attached.....

Yes [ X ] No [ ]

Michelle Batiste  
Notary Public  
January 12, 2024

## 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) .....	1,189,940,040		1,189,940,040	1,115,620,008
2. Stocks (Schedule D):				
2.1 Preferred stocks .....			0	0
2.2 Common stocks .....			0	0
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens .....	13,147,492		13,147,492	11,069,741
3.2 Other than first liens.....			0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ encumbrances) .....			0	0
4.2 Properties held for the production of income (less \$ ..... encumbrances) .....			0	0
4.3 Properties held for sale (less \$ encumbrances) .....			0	0
5. Cash (\$ .....(7,956,213) , Schedule E - Part 1), cash equivalents (\$ .....4,003,320 , Schedule E - Part 2) and short-term investments (\$ ..... , Schedule DA) .....	(3,952,893)		(3,952,893)	3,642,197
6. Contract loans (including \$ ..... premium notes) .....	153,899		153,899	110,815
7. Derivatives (Schedule DB) .....			0	0
8. Other invested assets (Schedule BA) .....	47,134,340		47,134,340	29,514,607
9. Receivables for securities .....			0	0
10. Securities lending reinvested collateral assets (Schedule DL) .....			0	0
11. Aggregate write-ins for invested assets .....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	1,246,422,878	0	1,246,422,878	1,159,957,368
13. Title plants less \$ ..... charged off (for Title insurers only) .....			0	0
14. Investment income due and accrued .....	12,788,045		12,788,045	11,879,972
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	9,128,086		9,128,086	8,475,232
15.2 Deferred premiums and agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums) .....	1,237,894		1,237,894	1,168,726
15.3 Accrued retrospective premiums (\$ ..... ) and contracts subject to redetermination (\$ ..... ) .....			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....			0	0
16.2 Funds held by or deposited with reinsured companies .....			0	0
16.3 Other amounts receivable under reinsurance contracts .....			0	0
17. Amounts receivable relating to uninsured plans .....			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon .....	2,087,652		2,087,652	0
18.2 Net deferred tax asset .....	47,182,000	32,918,000	14,264,000	13,769,000
19. Guaranty funds receivable or on deposit .....	952,696		952,696	1,482,010
20. Electronic data processing equipment and software .....	2,927,002	2,549,518	377,484	83,620
21. Furniture and equipment, including health care delivery assets (\$ ..... ) .....	9,943	9,943	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....			0	0
23. Receivables from parent, subsidiaries and affiliates .....	50,434		50,434	0
24. Health care (\$ ..... ) and other amounts receivable .....			0	0
25. Aggregate write-ins for other than invested assets .....	22,067,671	22,067,671	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	1,344,854,301	57,545,132	1,287,309,169	1,196,815,928
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0	0
28. Total (Lines 26 and 27) .....	1,344,854,301	57,545,132	1,287,309,169	1,196,815,928
<b>DETAILS OF WRITE-INS</b>				
1101. ....				
1102. ....				
1103. ....				
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above) .....	0	0	0	0
2501. Agent Balances .....	21,499,995	21,499,995	0	0
2502. Prepaid Expenses .....	527,179	527,179	0	0
2503. Other Assets Nonadmitted .....	40,497	40,497	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above) .....	22,067,671	22,067,671	0	0

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America  
**LIABILITIES, SURPLUS AND OTHER FUNDS**

	1 Current Year	2 Prior Year
1. Aggregate reserve for life contracts \$ .....10,159,373 (Exh. 5, Line 9999999) less \$ ..... included in Line 6.3 (including \$ ..... Modco Reserve) .....	10,159,373	8,233,765
2. Aggregate reserve for accident and health contracts (including \$ .....0 Modco Reserve) .....	1,121,544,599	1,018,522,019
3. Liability for deposit-type contracts (Exhibit 7, Line 14, Col. 1) (including \$ ..... Modco Reserve) .....		
4. Contract claims:		
4.1 Life (Exhibit 8, Part 1, Line 4.4, Col. 1 less sum of Cols. 9, 10 and 11) .....	1,704,000	1,541,000
4.2 Accident and health (Exhibit 8, Part 1, Line 4.4, sum of Cols. 9, 10 and 11) .....	25,764,888	25,656,186
5. Policyholders' dividends/refunds to members \$ ..... and coupons \$ ..... due and unpaid (Exhibit 4, Line 10) .....	.0	0
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 \$ ..... Modco) .....		
6.2 Policyholders' dividends and refunds to members not yet apportioned (including \$ ..... Modco) .....		
6.3 Coupons and similar benefits (including \$ ..... 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 \$ ..... discount; including \$ .....0 accident and health premiums (Exhibit 1, Part 1, Col. 1, sum of lines 4 and 14) .....	.0	0
9. Contract liabilities not included elsewhere:		
9.1 Surrender values on canceled contracts .....		
9.2 Provision for experience rating refunds, including the liability of \$ ..... 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 \$ ..... assumed and \$ .....163,026 ceded .....	163,026	369,533
9.4 Interest maintenance reserve (IMR, Line 6) .....	1,497,774	943,060
10. Commissions to agents due or accrued-life and annuity contracts \$ .....26,385 accident and health \$ .....2,144,861 and deposit-type contract funds \$ .....	2,171,246	1,935,982
11. Commissions and expense allowances payable on reinsurance assumed .....		
12. General expenses due or accrued (Exhibit 2, Line 12, Col. 7) .....	2,494,247	3,828,697
13. Transfers to Separate Accounts due or accrued (net) (including \$ ..... 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) .....	1,142,498	1,110,887
15.1 Current federal and foreign income taxes, including \$ ..... on realized capital gains (losses) .....		201,145
15.2 Net deferred tax liability .....		
16. Unearned investment income .....		
17. Amounts withheld or retained by reporting entity as agent or trustee .....	630	169
18. Amounts held for agents' account, including \$ ..... agents' credit balances .....		
19. Remittances and items not allocated .....	472,050	514,892
20. Net adjustment in assets and liabilities due to foreign exchange rates .....		
21. Liability for benefits for employees and agents if not included above .....	621,257	362,754
22. Borrowed money \$ ..... and interest thereon \$ .....70,000 .....	70,000	70,000
23. Dividends to stockholders declared and unpaid .....		
24. Miscellaneous liabilities:		
24.01 Asset valuation reserve (AVR, Line 16, Col. 7) .....	8,310,792	6,677,525
24.02 Reinsurance in unauthorized and certified (\$ .....0 ) companies .....	.0	0
24.03 Funds held under reinsurance treaties with unauthorized and certified (\$ ..... ) reinsurers .....		
24.04 Payable to parent, subsidiaries and affiliates .....		49,107
24.05 Drafts outstanding .....		
24.06 Liability for amounts held under uninsured plans .....		
24.07 Funds held under coinsurance .....		
24.08 Derivatives .....	.0	0
24.09 Payable for securities .....		494,069
24.10 Payable for securities lending .....		40,851
24.11 Capital notes \$ ..... and interest thereon \$ .....		
25. Aggregate write-ins for liabilities .....	957,895	1,316,523
26. Total liabilities excluding Separate Accounts business (Lines 1 to 25) .....	1,177,568,344	1,071,374,095
27. From Separate Accounts Statement .....		
28. Total liabilities (Lines 26 and 27) .....	1,177,568,344	1,071,374,095
29. Common capital stock .....	2,556,000	2,556,000
30. Preferred capital stock .....		
31. Aggregate write-ins for other than special surplus funds .....	.0	0
32. Surplus notes .....	30,000,000	30,000,000
33. Gross paid in and contributed surplus (Page 3, Line 33, Col. 2 plus Page 4, Line 51.1, Col. 1) .....	52,647,000	52,647,000
34. Aggregate write-ins for special surplus funds .....	.0	0
35. Unassigned funds (surplus) .....	24,537,825	40,238,833
36. Less treasury stock, at cost:		
36.1 ..... shares common (value included in Line 29 \$ ..... ) .....		
36.2 ..... shares preferred (value included in Line 30 \$ ..... ) .....		
37. Surplus (Total Lines 31+32+33+34+35-36) (including \$ ..... in Separate Accounts Statement) .....	107,184,825	122,885,833
38. Totals of Lines 29, 30 and 37 (Page 4, Line 55) .....	109,740,825	125,441,833
39. Totals of Lines 28 and 38 (Page 2, Line 28, Col. 3) .....	1,287,309,169	1,196,815,928
<b>DETAILS OF WRITE-INS</b>		
2501. Unclaimed Property .....	957,895	1,316,523
2502. .....		
2503. .....		
2598. Summary of remaining write-ins for Line 25 from overflow page .....	.0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above) .....	957,895	1,316,523
3101. .....		
3102. .....		
3103. .....		
3198. Summary of remaining write-ins for Line 31 from overflow page .....	.0	0
3199. Totals (Lines 3101 thru 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 thru 3403 plus 3498)(Line 34 above) .....	0	0

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America  
**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) .....	298,707,093	170,048,872
2. Considerations for supplementary contracts with life contingencies .....	0	0
3. Net investment income (Exhibit of Net Investment Income, Line 17) .....	52,486,340	50,299,064
4. Amortization of Interest Maintenance Reserve (IMR, Line 5) .....	406,675	539,725
5. Separate Accounts net gain from operations excluding unrealized gains or losses .....	0	0
6. Commissions and expense allowances on reinsurance ceded (Exhibit 1, Part 2, Line 26.1, Col. 1) .....	995,542	132,918,591
7. Reserve adjustments on reinsurance ceded .....	0	38,914,339
8. Miscellaneous Income:		
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts .....	0	0
8.2 Charges and fees for deposit-type contracts .....	0	0
8.3 Aggregate write-ins for miscellaneous income .....	0	15
9. Total (Lines 1 to 8.3) .....	352,595,650	392,720,606
10. Death benefits .....	538,199	529,129
11. Matured endowments (excluding guaranteed annual pure endowments) .....	0	0
12. Annuity benefits (Exhibit 8, Part 2, Line 6.4, Cols. 4 + 8) .....	0	0
13. Disability benefits and benefits under accident and health contracts .....	100,266,215	83,516,774
14. Coupons, guaranteed annual pure endowments and similar benefits .....	0	0
15. Surrender benefits and withdrawals for life contracts .....	180,123	139,376
16. Group conversions .....	0	0
17. Interest and adjustments on contract or deposit-type contract funds .....	1,287	564
18. Payments on supplementary contracts with life contingencies .....	0	0
19. Increase in aggregate reserves for life and accident and health contracts .....	104,948,188	(25,671,859)
20. Totals (Lines 10 to 19) .....	205,934,012	58,513,984
21. Commissions on premiums, annuity considerations, and deposit-type contract funds (direct business only) (Exhibit 1, Part 2, Line 31, Col. 1) .....	67,133,988	63,212,995
22. Commissions and expense allowances on reinsurance assumed (Exhibit 1, Part 2, Line 26.2, Col. 1) .....	0	130,844,057
23. General insurance expenses and fraternal expenses (Exhibit 2, Line 10, Cols. 1, 2, 3, 4 and 6) .....	31,437,187	29,950,569
24. Insurance taxes, licenses and fees, excluding federal income taxes (Exhibit 3, Line 7, Cols. 1 + 2 + 3 + 5) .....	6,689,434	6,280,120
25. Increase in loading on deferred and uncollected premiums .....	(250,344)	(64,871,267)
26. Net transfers to or (from) Separate Accounts net of reinsurance .....	0	0
27. Aggregate write-ins for deductions .....	0	125,078,534
28. Totals (Lines 20 to 27) .....	310,944,277	349,008,992
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28) .....	41,651,373	43,711,614
30. Dividends to policyholders and refunds to members .....	0	0
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30) .....	41,651,373	43,711,614
32. Federal and foreign income taxes incurred (excluding tax on capital gains) .....	9,782,130	11,188,686
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) .....	31,869,243	32,522,928
34. Net realized capital gains (losses) (excluding gains (losses) transferred to the IMR) less capital gains tax of \$ (696) (excluding taxes of \$ 405,775 transferred to the IMR) .....	155,536	(1,029,619)
35. Net income (Line 33 plus Line 34) .....	32,024,779	31,493,309
<b>CAPITAL AND SURPLUS ACCOUNT</b>		
36. Capital and surplus, December 31, prior year (Page 3, Line 38, Col. 2) .....	125,441,833	100,322,921
37. Net income (Line 35) .....	32,024,779	31,493,309
38. Change in net unrealized capital gains (losses) less capital gains tax of \$ (17,000) .....	(62,577)	(126,295)
39. Change in net unrealized foreign exchange capital gain (loss) .....		
40. Change in net deferred income tax .....	5,524,000	4,168,000
41. Change in nonadmitted assets .....	(19,874,550)	(6,388,475)
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 .....	0	0
44. Change in asset valuation reserve .....	(1,633,267)	(1,362,345)
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 .....		(950)
51. Surplus adjustment:		
51.1 Paid in .....	0	20,000,950
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 .....	(31,493,000)	(22,995,000)
53. Aggregate write-ins for gains and losses in surplus .....	(186,393)	77,128
54. Net change in capital and surplus for the year (Lines 37 through 53) .....	(15,701,008)	25,118,912
55. Capital and surplus, December 31, current year (Lines 36 + 54) (Page 3, Line 38) .....	109,740,825	125,441,833
<b>DETAILS OF WRITE-INS</b>		
08.301. Miscellaneous Income .....		15
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 thru 08.303 plus 08.398)(Line 8.3 above) .....	0	15
2701. Loss from MODCO Cessation .....		125,078,534
2702. .....		
2703. .....		
2798. Summary of remaining write-ins for Line 27 from overflow page .....	0	0
2799. Totals (Lines 2701 thru 2703 plus 2798)(Line 27 above) .....	0	125,078,534
5301. Change in Executive Benefit Plans .....	(235,393)	98,128
5302. Change in Executive Benefit Plans – Deferred FIT .....	49,000	(21,000)
5303. .....		
5398. Summary of remaining write-ins for Line 53 from overflow page .....	0	0
5399. Totals (Lines 5301 thru 5303 plus 5398)(Line 53 above) .....	(186,393)	77,128

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America  
**CASH FLOW**

	1 Current Year	2 Prior Year
<b>Cash from Operations</b>		
1. Premiums collected net of reinsurance .....	298,048,006	277,160,377
2. Net investment income .....	44,124,831	36,101,290
3. Miscellaneous income .....	995,542	174,638,184
4. Total (Lines 1 through 3) .....	343,168,379	487,899,851
5. Benefit and loss related payments .....	100,733,220	30,461,988
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions .....	106,040,841	274,859,185
8. Dividends paid to policyholders .....	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ ..... tax on capital gains (losses) .....	12,476,006	10,512,953
10. Total (Lines 5 through 9) .....	219,250,067	315,834,126
11. Net cash from operations (Line 4 minus Line 10) .....	123,918,312	172,065,725
<b>Cash from Investments</b>		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds .....	19,811,470	15,399,986
12.2 Stocks .....	0	0
12.3 Mortgage loans .....	0	0
12.4 Real estate .....	0	0
12.5 Other invested assets .....	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments .....	0	0
12.7 Miscellaneous proceeds .....	(40,851)	40,851
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	19,770,619	15,440,837
13. Cost of investments acquired (long-term only):		
13.1 Bonds .....	83,404,363	171,459,109
13.2 Stocks .....	0	0
13.3 Mortgage loans .....	2,018,135	7,535,945
13.4 Real estate .....	0	0
13.5 Other invested assets .....	19,016,556	7,145,309
13.6 Miscellaneous applications .....	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	104,439,054	186,140,363
14. Net increase (decrease) in contract loans and premium notes .....	43,084	46,004
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14) .....	(84,711,519)	(170,745,530)
<b>Cash from Financing and Miscellaneous Sources</b>		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes .....	0	0
16.2 Capital and paid in surplus, less treasury stock .....	0	20,000,000
16.3 Borrowed funds .....	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities .....	0	0
16.5 Dividends to stockholders .....	31,493,000	22,995,000
16.6 Other cash provided (applied) .....	(15,308,881)	(3,311,284)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6) .....	(46,801,881)	(6,306,284)
<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) .....	(7,595,088)	(4,986,089)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year .....	3,642,195	8,628,284
19.2 End of year (Line 18 plus Line 19.1) .....	(3,952,893)	3,642,195

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

20.0001. Non-cash bond exchanges excluded from proceeds from investments sold and cost of investments acquired .....	17,815,504	6,627,202
20.0002. Unsettled bond purchases excluded from investments acquired and miscellaneous proceeds .....	494,069	

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America

## ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - SUMMARY

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America  
**ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - INDIVIDUAL LIFE INSURANCE (b)**

	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 (c)	11 Other Individual Life	12 YRT Mortality Risk Only
1. Premiums for life contracts <sup>(a)</sup> .....	3,663,028		3,663,028									
2. Considerations for supplementary contracts with life contingencies .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Net investment income .....	513,169		513,169									
4. Amortization of Interest Maintenance Reserve (IMR) .....	3,976		3,976									
5. Separate Accounts net gain from operations excluding unrealized gains or losses .....	0											
6. Commissions and expense allowances on reinsurance ceded .....	150	0	150									
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		0									
8.2 Charges and fees for deposit-type contracts .....	0		0	0	0	0	0	0	0	0	0	0
8.3 Aggregate write-ins for miscellaneous income .....	0	0	0	0	0	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3) .....	4,180,323	0	4,180,323	0	0	0	0	0	0	0	0	0
10. Death benefits .....	538,199		538,199									
11. Matured endowments (excluding guaranteed annual pure endowments) .....	0											
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 .....	180,123		180,123									
16. Group conversions .....	0											
17. Interest and adjustments on contract or deposit-type contract funds .....	1,287		1,287									
18. Payments on supplementary contracts with life contingencies .....	0											
19. Increase in aggregate reserves for life and accident and health contracts .....	1,925,608		1,925,608									
20. Totals (Lines 10 to 19) .....	2,645,217	0	2,645,217	0	0	0	0	0	0	0	0	0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) .....	843,929	0	843,929									XXX
22. Commissions and expense allowances on reinsurance assumed .....	0	0	0									
23. General insurance expenses .....	677,635		677,635									
24. Insurance taxes, licenses and fees, excluding federal income taxes .....	83,618		83,618									
25. Increase in loading on deferred and uncollected premiums .....	(250,344)		(250,344)									
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) .....	4,000,055	0	4,000,055	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) .....	180,268	0	180,268	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) .....	180,268	0	180,268	0	0	0	0	0	0	0	0	0
32. Federal income taxes incurred (excluding tax on capital gains) .....	42,337		42,337									
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) .....	137,931	0	137,931	0	0	0	0	0	0	0	0	0
34. Policies/certificates in force end of year .....	13,567		13,567									
<b>DETAILS OF WRITE-INS</b>												
08.301. ....												
08.302. ....												
08.303. ....												
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. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above) .....	0	0	0	0	0	0	0	0	0	0	0	0
2701. ....												
2702. ....												
2703. ....												
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. Totals (Lines 2701 thru 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 Life Insurance  
**N O N E**

Analysis of Operations by Lines of Business - Individual Annuities  
**N O N E**

Analysis of Operations by Lines of Business - Group Annuities  
**N O N E**

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - ACCIDENT AND HEALTH <sup>(a)</sup>

	1 Total	Comprehensive		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
		2 Individual	3 Group										
1. Premiums for accident and health contracts	295,044,064												295,044,064
2. Considerations for supplementary contracts with life contingencies	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Net investment income	51,973,172												51,973,172
4. Amortization of Interest Maintenance Reserve (IMR)	402,699												402,699
5. Separate Accounts net gain from operations excluding unrealized gains or losses	0												
6. Commissions and expense allowances on reinsurance ceded	995,393									0			995,393
7. Reserve adjustments on reinsurance ceded	0									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	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8.3 Aggregate write-ins for miscellaneous income	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3)	348,415,328	0	0	0	0	0	0	0	0	0	0	0	348,415,328
10. Death benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
11. Matured endowments (excluding guaranteed annual pure endowments)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
12. Annuity benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Disability benefits and benefits under accident and health contracts	100,266,215												100,266,215
14. Coupons, guaranteed annual pure endowments and similar benefits	0												
15. Surrender benefits and withdrawals for life contracts	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
16. Group conversions	0												
17. Interest and adjustments on contract or deposit-type contract funds	0												
18. Payments on supplementary contracts with life contingencies	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
19. Increase in aggregate reserves for life and accident and health contracts	103,022,580												103,022,580
20. Totals (Lines 10 to 19)	203,288,795	0	0	0	0	0	0	0	0	0	0	0	203,288,795
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)	66,290,059										0		66,290,059
22. Commissions and expense allowances on reinsurance assumed	0										0		
23. General insurance expenses	30,759,552												30,759,552
24. Insurance taxes, licenses and fees, excluding federal income taxes	6,605,816												6,605,816
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	0	0	0	0
28. Totals (Lines 20 to 27)	306,944,222	0	0	0	0	0	0	0	0	0	0	0	306,944,222
29. Net gain from operations before dividends to policyholders, and refunds to members and federal income taxes (Line 9 minus Line 28)	41,471,106	0	0	0	0	0	0	0	0	0	0	0	41,471,106
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)	41,471,106	0	0	0	0	0	0	0	0	0	0	0	41,471,106
32. Federal income taxes incurred (excluding tax on capital gains)	9,739,793												9,739,793
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)	31,731,313	0	0	0	0	0	0	0	0	0	0	0	31,731,313
34. Policies/certificates in force end of year	460,271												460,271
<b>DETAILS OF WRITE-INS</b>													
08.301.													
08.302.													
08.303.													
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	0
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above)	0	0	0	0	0	0	0	0	0	0	0	0	0
2701.													
2702.													
2703.													
2798. Summary of remaining write-ins for Line 27 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 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.

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America  
**ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR - INDIVIDUAL LIFE INSURANCE <sup>(a)</sup>**

	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 <sup>(b)</sup> (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 of prior year	8,233,765	0	8,233,765									
2. Tabular net premiums or considerations	2,747,632		2,747,632									
3. Present value of disability claims incurred	0											
4. Tabular interest	.348,601		.348,601									
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)	11,329,998	0	11,329,998	0	0	0	0	0	0	0	0	0
9. Tabular cost	.511,450		.511,450									
10. Reserves released by death	60,214		60,214									
11. Reserves released by other terminations (net)	.598,961		.598,961									
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)	1,170,625	0	1,170,625	0	0	0	0	0	0	0	0	0
15. Reserve December 31 of current year	10,159,373	0	10,159,373	0	0	0	0	0	0	0	0	0
<b>Cash Surrender Value and Policy Loans</b>												
16. CSV Ending balance December 31, current year	3,433,401		3,433,401									
17. Amount Available for Policy Loans Based upon Line 16 CSV	3,433,401		3,433,401									

(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  
**N O N E**

Analysis of Increase in Reserves During the Year - Individual Annuities  
**N O N E**

Analysis of Increase in Reserves During the Year - Group Annuities  
**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America  
**EXHIBIT OF NET INVESTMENT INCOME**

	1 Collected During Year	2 Earned During Year
1. U.S. Government bonds .....	(a) 2,481,114	2,480,792
1.1 Bonds exempt from U.S. tax .....	(a)	
1.2 Other bonds (unaffiliated) .....	(a) 50,976,482	51,683,338
1.3 Bonds of affiliates .....	(a)	
2.1 Preferred stocks (unaffiliated) .....	(b)	
2.11 Preferred stocks of affiliates .....	(b)	
2.2 Common stocks (unaffiliated) .....		
2.21 Common stocks of affiliates .....		
3. Mortgage loans .....	(c) 887,034	.890,383
4. Real estate .....	(d)	
5. Contract loans .....	.11,172	11,172
6. Cash, cash equivalents and short-term investments .....	(e) 218,987	.216,193
7. Derivative instruments .....	(f)	
8. Other invested assets .....	1,646,661	1,847,645
9. Aggregate write-ins for investment income .....	1,011,177	1,011,177
10. Total gross investment income .....	57,232,627	58,140,700
11. Investment expenses .....	(g) 2,371,156	
12. Investment taxes, licenses and fees, excluding federal income taxes .....	(g)	0
13. Interest expense .....	(h) 1,972,285	
14. Depreciation on real estate and other invested assets .....	(i)	
15. Aggregate write-ins for deductions from investment income .....		1,310,919
16. Total deductions (Lines 11 through 15) .....		5,654,360
17. Net investment income (Line 10 minus Line 16) .....		52,486,340
<b>DETAILS OF WRITE-INS</b>		
0901. Agent Balances .....	1,011,108	1,011,108
0902. Policy Reinstatement Interest .....	69	69
0903. .....		
0998. Summary of remaining write-ins for Line 9 from overflow page .....	.0	0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above) .....	1,011,177	1,011,177
1501. Amortization of Tax Credit Fund .....		1,310,919
1502. .....		
1503. .....		
1598. Summary of remaining write-ins for Line 15 from overflow page .....		0
1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above) .....		1,310,919

(a) Includes \$ 10,529,230 accrual of discount less \$ 1,818,164 amortization of premium and less \$ 666,984 paid for accrued interest on purchases.  
 (b) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued dividends on purchases.  
 (c) Includes \$ 59,616 accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.  
 (d) Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.  
 (e) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.  
 (f) Includes \$ accrual of discount less \$ amortization of premium.  
 (g) Includes \$ investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.  
 (h) Includes \$ interest on surplus notes and \$ interest on capital notes.  
 (i) Includes \$ depreciation on real estate and \$ 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	.0	.0	.0	.0
1.1 Bonds exempt from U.S. tax .....			.0		
1.2 Other bonds (unaffiliated) .....	1,522,004	.0	1,522,004	.0	.0
1.3 Bonds of affiliates .....	.0	.0	.0	.0	.0
2.1 Preferred stocks (unaffiliated) .....	.0	.0	.0	.0	.0
2.11 Preferred stocks of affiliates .....	.0	.0	.0	.0	.0
2.2 Common stocks (unaffiliated) .....	.0	.0	.0	.0	.0
2.21 Common stocks of affiliates .....	.0	.0	.0	.0	.0
3. Mortgage loans .....			.0	.0	.0
4. Real estate .....			.0	.0	.0
5. Contract loans .....			.0	.0	.0
6. Cash, cash equivalents and short-term investments .....			.0	.0	.0
7. Derivative instruments .....			.0	.0	.0
8. Other invested assets .....		.0	.0	(79,577)	.0
9. Aggregate write-ins for capital gains (losses) .....	.0	.0	.0	.0	.0
10. Total capital gains (losses) .....	1,522,004	.0	1,522,004	(79,577)	.0
<b>DETAILS OF WRITE-INS</b>					
0901. .....					
0902. .....					
0903. .....					
0998. Summary of remaining write-ins for Line 9 from overflow page .....	.0	.0	.0	.0	.0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above) .....	.0	.0	.0	.0	.0

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America

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

	1 Total	2 Industrial Life	Insurance									11 Aggregate of All Other Lines of Business	12 Fraternal (Fraternal Benefit Societies Only)		
			Ordinary		5 Credit Life (Group and Individual)	Group		Accident and Health							
			3 Life Insurance	4 Individual Annuities		6 Life Insurance	7 Annuities	8 Group	9 Credit (Group and Individual)	10 Other					
<b>FIRST YEAR (other than single)</b>															
1. Uncollected	1,712,337		.24,407						.90,757			1,597,173			
2. Deferred and accrued	21,840		.21,840												
3. Deferred, accrued and uncollected:															
3.1 Direct	1,744,695		.46,247						.90,893			1,607,555			
3.2 Reinsurance assumed	0														
3.3 Reinsurance ceded	10,518								136			10,382			
3.4 Net (Line 1 + Line 2)	1,734,177	0	.46,247	.0					.90,757	.0		1,597,173	0		
4. Advance	0														
5. Line 3.4 - Line 4	1,734,177	0	.46,247	.0					.90,757	.0		1,597,173	0		
6. Collected during year:															
6.1 Direct	50,920,987		716,761						2,901,325			47,302,901			
6.2 Reinsurance assumed	0														
6.3 Reinsurance ceded	429,395								3,817			425,578			
6.4 Net	50,491,592	0	716,761	.0					2,897,508	.0		46,877,323	0		
7. Line 5 + Line 6.4	52,225,769	0	.763,008	.0					2,988,265	.0		48,474,496	0		
8. Prior year (uncollected + deferred and accrued - advance)	1,823,269	0	.372,335	.0					.86,036	.0		1,364,898	0		
9. First year premiums and considerations:															
9.1 Direct	50,830,612		390,673						2,906,112			47,533,827			
9.2 Reinsurance assumed	0														
9.3 Reinsurance ceded	428,112								3,883			424,229			
9.4 Net (Line 7 - Line 8)	50,402,500	0	390,673	.0					2,902,229	.0		47,109,598	0		
<b>SINGLE</b>															
10. Single premiums and considerations:															
10.1 Direct	0														
10.2 Reinsurance assumed	0														
10.3 Reinsurance ceded	0														
10.4 Net	0		0	.0					0			0	0		
<b>RENEWAL</b>															
11. Uncollected	7,451,919		.77,502						.337,204			7,037,213			
12. Deferred and accrued	1,509,927		1,509,927												
13. Deferred, accrued and uncollected:															
13.1 Direct	9,028,241		1,588,370						.339,376			7,100,495			
13.2 Reinsurance assumed	0														
13.3 Reinsurance ceded	66,395		.941						2,172			63,282			
13.4 Net (Line 11 + Line 12)	8,961,846	0	1,587,429	.0					.337,204	.0		7,037,213	0		
14. Advance	0														
15. Line 13.4 - Line 14	8,961,846	0	1,587,429	.0					.337,204	.0		7,037,213	0		
16. Collected during year:															
16.1 Direct	250,339,967		3,211,885						.11,930,199			235,197,883			
16.2 Reinsurance assumed	0														
16.3 Reinsurance ceded	2,596,142		.86,330						.85,493			2,424,319			
16.4 Net	247,743,825	0	3,125,555	.0					.11,844,706	.0		232,773,564	0		
17. Line 15 + Line 16.4	256,705,671	0	4,712,984	.0					.12,181,910	.0		239,810,777	0		
18. Prior year (uncollected + deferred and accrued - advance)	.8,401,075	0	.1,440,629	.0					.290,182	.0		.6,670,264	0		
19. Renewal premiums and considerations:															
19.1 Direct	250,901,569		3,358,548						.11,976,763			235,566,258			
19.2 Reinsurance assumed	0														
19.3 Reinsurance ceded	2,596,976		.86,193						.85,035			2,425,748			
19.4 Net (Line 17 - Line 18)	248,304,593	0	3,272,355	.0					.11,891,728	.0		233,140,510	0		
<b>TOTAL</b>															
20. Total premiums and annuity considerations:															
20.1 Direct	301,732,181	0	3,749,221	.0					.14,882,875	.0		283,100,085	0		
20.2 Reinsurance assumed	0	0	.0	.0					0	.0		0	0		
20.3 Reinsurance ceded	3,025,088	0	.86,193	.0					.88,918	.0		2,849,977	0		
20.4 Net (Lines 9.4 + 10.4 + 19.4)	298,707,093	0	3,663,028	.0					0	.14,793,957	.0		280,250,108	0	

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America

**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									11 Aggregate of All Other Lines of Business	12 Fraternal (Fraternal Benefit Societies Only)		
			Ordinary		5 Credit Life (Group and Individual)	Group		Accident and Health							
			3 Life Insurance	4 Individual Annuities		6 Life Insurance	7 Annuities	8 Group	9 Credit (Group and 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 .....	0														
<b>REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES INCURRED</b>															
23. First year (other than single):															
23.1 Reinsurance ceded .....	382,890			(2)					3,413			379,479			
23.2 Reinsurance assumed .....	0														
23.3 Net ceded less assumed .....	382,890	0	(2)	0	0	0	0	3,413	0	379,479	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	0		
25. Renewal:															
25.1 Reinsurance ceded .....	612,652			152					20,860			591,640			
25.2 Reinsurance assumed .....	0														
25.3 Net ceded less assumed .....	612,652	0	152	0	0	0	0	20,860	0	591,640	0	0	0		
26. Totals:															
26.1 Reinsurance ceded (Page 6, Line 6) .....	995,542	0	150	0	0	0	0	24,273	0	971,119	0	0	0		
26.2 Reinsurance assumed (Page 6, Line 22) .....	0	0	0	0	0	0	0	0	0	0	0	0	0		
26.3 Net ceded less assumed .....	995,542	0	150	0	0	0	0	24,273	0	971,119	0	0	0		
<b>COMMISSIONS INCURRED (direct business only)</b>															
27. First year (other than single) .....	40,295,920			539,720					2,323,093			37,433,107			
28. Single .....	0														
29. Renewal .....	26,838,067			304,208					1,299,282			25,234,577			
30. Deposit-type contract funds .....	0														
31. Totals (to agree with Page 6, Line 21)	67,133,987	0	843,928	0	0	0	0	3,622,375	0	62,667,684	0	0	0		

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America  
**EXHIBIT 2 - GENERAL EXPENSES**

	Insurance			5	6	7	
	1 Life	Accident and Health			6	7	
		2 Cost Containment	3 All Other				
1. Rent .....	7,953		628,282			636,235	
2. Salaries and wages .....	197,631		15,612,875			15,810,506	
3.11 Contributions for benefit plans for employees .....	19,661		1,553,254			1,572,915	
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 .....			269,311			269,311	
3.32 Other agent welfare .....						0	
4.1 Legal fees and expenses .....			114,415			114,415	
4.2 Medical examination fees .....						0	
4.3 Inspection report fees .....	60,606					60,606	
4.4 Fees of public accountants and consulting actuaries .....			335,341			335,341	
4.5 Expense of investigation and settlement of policy claims .....			68,241			68,241	
5.1 Traveling expenses .....			776,093			776,093	
5.2 Advertising .....			207,496			207,496	
5.3 Postage, express, telegraph and telephone .....			586,527			586,527	
5.4 Printing and stationery .....			614,253			614,253	
5.5 Cost or depreciation of furniture and equipment .....			12,898			12,898	
5.6 Rental of equipment .....			142,210			142,210	
5.7 Cost or depreciation of EDP equipment and software .....			2,171,725			2,171,725	
6.1 Books and periodicals .....			28,610			28,610	
6.2 Bureau and association fees .....			797			797	
6.3 Insurance, except on real estate .....			85,362			85,362	
6.4 Miscellaneous losses .....						0	
6.5 Collection and bank service charges .....					295,156	295,156	
6.6 Sundry general expenses .....			457,992			457,992	
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 \$ recovered) .....			(60,518)			(60,518)	
7.3 Agency conferences other than local meetings .....	22,705		1,793,731			1,816,436	
8.1 Official publication (Fraternal Benefit Societies Only) .....	XXX	XXX	XXX	XXX	XXX	0	
8.2 Expense of supreme lodge meetings (Fraternal Benefit Societies Only) .....	XXX	XXX	XXX	XXX	XXX	0	
9.1 Real estate expenses .....						0	
9.2 Investment expenses not included elsewhere .....					2,076,000	2,076,000	
9.3 Aggregate write-ins for expenses .....	369,078	0	5,360,658	0	0	5,729,736	
10. General expenses incurred .....	677,634	0	30,759,553	0	2,371,156	(b) 0 (a) 33,808,343	
11. General expenses unpaid Dec. 31, prior year .....	22,500		3,786,197		20,000	3,828,697	
12. General expenses unpaid Dec. 31, current year .....	27,925		2,446,322		20,000	2,494,247	
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) .....	672,209	0	32,099,428	0	2,371,156	0	
<b>DETAILS OF WRITE-INS</b>							
09.301. Sales Awards and Incentives .....	60,362		4,768,616			4,828,978	
09.302. Life Administrator Fees .....	308,716					308,716	
09.303. Recruiting Expenses .....			269,724			269,724	
09.398. Summary of remaining write-ins for Line 9.3 from overflow page .....	0	0	322,318	0	0	0	
09.399. Totals (Lines 09.301 thru 09.303 plus 09.398) (Line 9.3 above) .....	369,078	0	5,360,658	0	0	5,729,736	

(a) Includes management fees of \$ 5,232,000 to affiliates and \$ 0 to non-affiliates.

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

1. Charitable \$ ..... ; 2. Institutional \$ ..... ; 3. Recreational and Health \$ ..... ; 4. Educational \$ ..... ; 5. Religious \$ ..... ; 6. Membership \$ ..... ; 7. Other \$ ..... ; 8. Total \$ ..... 0

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

	Insurance			4	5	6
	1 Life	2 Accident and Health	3 All Other Lines of Business			
1. Real estate taxes .....						0
2. State insurance department licenses and fees .....	3,659	289,066				292,725
3. State taxes on premiums .....	69,566	5,495,733				5,565,299
4. Other state taxes, including \$ for employee benefits .....	(242)	(19,153)				(19,395)
5. U.S. Social Security taxes .....	7,604	600,704				608,308
6. All other taxes .....	3,031	239,466				242,497
7. Taxes, licenses and fees incurred .....	83,618	6,605,816	0	0	0	6,689,434
8. Taxes, licenses and fees unpaid Dec. 31, prior year .....	14,163	1,096,724				1,110,887
9. Taxes, licenses and fees unpaid Dec. 31, current year .....	14,281	1,128,217				1,142,498
10. Taxes, licenses and fees paid during year (Lines 7 + 8 - 9) .....	83,500	6,574,323	0	0	0	6,657,823

**EXHIBIT 4 - DIVIDENDS OR REFUNDS**

	1 Life	2 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 .....		
4. Applied to provide paid-up annuities .....		
5. Total Lines 1 through 4 .....		
6. Paid in cash .....		
7. Left on deposit .....		
8. Aggregate write-ins for dividend or refund options .....		
9. Total Lines 5 through 8 .....		
10. Amount due and unpaid .....		
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 (Excludes Line 13) .....		
15. Total Lines 10 through 14 .....		
16. Total from prior year .....		
17. Total dividends or refunds (Lines 9 + 15 - 16) .....		

**DETAILS OF WRITE-INS**

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

**NONE**

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

1 Valuation Standard	2 Total	3 Industrial	4 Ordinary	5 Credit (Group and Individual)	6 Group
0100001. 80 CSO 4.5% NLP IDB 01-06	104,833		104,833		
0100002. 01 CSO 4.0% NLP IDB 07-12	246,261		246,261		
0100003. 01 CSO 3.5% NLP IDB 13-18	14,238		14,238		
0100004. 01 CSO 4.0% CRVM, IDB 07-12	1,748,600		1,748,600		
0100005. 01 CSO 4.25% CRVM, IDB 07-12	1,135,274		1,135,274		
0100006. 01 CSO 3.5% CRVM, IDB 13-18	4,970,223		4,970,223		
0100007. 01 CSO 3.75% CRVM, IDB 13-18	1,864,597		1,864,597		
0100008. 01 CSO 3.5% NPR 2019	3,529		3,529		
0100009. 01 CSO 4.5% NPR 2019	50		50		
0100010. 01 CSO 4.75% NPR 2019	1,520		1,520		
0199997. Totals (Gross)	10,089,125	0	10,089,125	0	0
0199998. Reinsurance ceded	15,147		15,147		
0199999. Life Insurance: Totals (Net)	10,073,978	0	10,073,978	0	0
0299998. Reinsurance ceded	0	XXX		XXX	
0299999. Annuities: Totals (Net)	0	XXX	0	XXX	0
0399998. Reinsurance ceded	0				
0399999. SCWLC: Totals (Net)	0	0	0	0	0
0400001. 59 ADB 4.5% NLP IDB 01-06	3,887		3,887		
0400002. 59 ADB 4.0% NLP IDB 07	13,603		13,603		
0400003. 59 ADB 3% ALB NLP IDB 07-NB	67,905		67,905		
0499997. Totals (Gross)	85,395	0	85,395	0	0
0499998. Reinsurance ceded	0				
0499999. Accidental Death Benefits: Totals (Net)	85,395	0	85,395	0	0
0599998. Reinsurance ceded	0				
0599999. Disability-Active Lives: Totals (Net)	0	0	0	0	0
0699998. Reinsurance ceded	0				
0699999. Disability-Disabled Lives: Totals (Net)	0	0	0	0	0
0799998. Reinsurance ceded	0				
0799999. Miscellaneous Reserves: Totals (Net)	0	0	0	0	0
9999999. Totals (Net) - Page 3, Line 1	10,159,373	0	10,159,373	0	0

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America  
**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.  
     Non-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.  
     Non-Participating .....

3. Does the reporting entity at present issue or have in force contracts that contain non-guaranteed elements? ..... Yes [ ] No [ X ]  
 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? ..... Yes [ ] No [ X ]  
 If so, state:  
 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 the 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 31 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	
9999999 - Total (Column 4, only)			

**NONE**

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America

**EXHIBIT 6 - AGGREGATE RESERVES FOR ACCIDENT AND HEALTH CONTRACTS <sup>(a)</sup>**

	1 Total	Comprehensive		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
		2 Individual	3 Group										
<b>ACTIVE LIFE RESERVE</b>													
1. Unearned premium reserves	17,494,174												17,494,174
2. Additional contract reserves (b)	1,106,213,113												1,106,213,113
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)	1,123,707,287												1,123,707,287
8. Reinsurance ceded	5,116,479												5,116,479
9. Totals (Net)	1,118,590,808	0	0	0	0	0	0	0	0	0	0	0	1,118,590,808
<b>CLAIM RESERVE</b>													
10. Present value of amounts not yet due on claims	2,953,791												2,953,791
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)	2,953,791												2,953,791
15. Reinsurance ceded	0												
16. Totals (Net)	2,953,791	0	0	0	0	0	0	0	0	0	0	0	2,953,791
17. TOTAL (Net)	1,121,544,599	0	0	0	0	0	0	0	0	0	0	0	1,121,544,599
18. TABULAR FUND INTEREST	42,785,367												42,785,367
<b>DETAILS OF WRITE-INS</b>													
0601.													
0602.													
0603.													
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 thru 0603 plus 0698) (Line 6 above)	0	0	0	0	0	0	0	0	0	0	0	0	0
1301.													
1302.													
1303.													
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 thru 1303 plus 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.

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America

**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 .....						
2. Deposits received during the year .....						
3. Investment earnings credited to the account .....						
4. Other net change in reserves .....						
5. Fees and other charges assessed .....						
6. Surrender charges .....						
7. Net surrender or withdrawal payments .....						
8. Other net transfers to or (from) Separate Accounts .....						
9. Balance at the end of current year before reinsurance (Lines 1+2+3+4-5-6-7-8) .....						
10. Reinsurance balance at the beginning of the year .....						
11. Net change in reinsurance assumed .....						
12. Net change in reinsurance ceded .....						
13. Reinsurance balance at the end of the year (Lines 10+11-12) .....						
14. Net balance at the end of current year after reinsurance (Lines 9 + 13) .....						

NONE

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America

**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	5,391,162								480		5,390,682
1.2 Reinsurance assumed	0										
1.3 Reinsurance ceded	0										
1.4 Net	5,391,162	0	0	0	0	0	0	0	480	0	5,390,682
2. In course of settlement:											
2.1 Resisted	0										
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	146,236								3,240		142,996
2.21 Direct	146,236								3,240		142,996
2.22 Reinsurance assumed	0										
2.23 Reinsurance ceded	0										
2.24 Net	146,236	0	(b) 0	(b) 0	0	(b) 0	(b) 0	0	(b) 3,240	(b) 0	(b) 142,996
3. Incurred but unreported:											
3.1 Direct	22,409,517			1,940,000					1,136,306		19,333,211
3.2 Reinsurance assumed	0										
3.3 Reinsurance ceded	478,027			236,000					7,000		235,027
3.4 Net	21,931,490	0	(b) 1,704,000	(b) 0	0	(b) 0	(b) 0	0	(b) 1,129,306	(b) 0	(b) 19,098,184
4. TOTALS	27,946,915	0	1,940,000	0	0	0	0	0	1,140,026	0	24,866,889
4.1 Direct	0									0	0
4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	478,027	0	236,000	0	0	0	0	0	7,000	0	235,027
4.4 Net	27,468,888	(a) 0	(a) 1,704,000	0	0	0	(a) 0	0	1,133,026	0	24,631,862

(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).

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America  
**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	101,079,145		547,033						1,555,901		98,976,211
1.2 Reinsurance assumed	0										
1.3 Reinsurance ceded	546,431		171,834						3,386		371,211
1.4 Net	(d) 100,532,714	0	375,199	0	0	0	0	0	1,552,515	0	98,605,000
2. Liability December 31, current year from Part 1:											
2.1 Direct	27,946,915	0	1,940,000	0	0	0	0	0	1,140,026	0	24,866,889
2.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
2.3 Reinsurance ceded	478,027	0	236,000	0	0	0	0	0	7,000	0	235,027
2.4 Net	27,468,888	0	1,704,000	0	0	0	0	0	1,133,026	0	24,631,862
3. Amounts recoverable from reinsurers December 31, current year	0										
4. Liability December 31, prior year:											
4.1 Direct	27,732,833	0	1,797,000	0	0	0	0	0	1,236,533	0	24,699,300
4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	535,647	0	256,000	0	0	0	0	0	9,000	0	270,647
4.4 Net	27,197,186	0	1,541,000	0	0	0	0	0	1,227,533	0	24,428,653
5. Amounts recoverable from reinsurers December 31, prior year	0										
6. Incurred Benefits											
6.1 Direct	101,293,227	0	690,033	0	0	0	0	0	1,459,394	0	99,143,800
6.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
6.3 Reinsurance ceded	488,811	0	151,834	0	0	0	0	0	1,386	0	335,591
6.4 Net	100,804,416	0	538,199	0	0	0	0	0	1,458,008	0	98,808,209

(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 \$ 0 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.

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America  
**EXHIBIT OF NON-ADMITTED 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 .....	32,918,000	27,823,000	(5,095,000)
19. Guaranty funds receivable or on deposit .....			0
20. Electronic data processing equipment and software .....	2,549,518	336,298	(2,213,220)
21. Furniture and equipment, including health care delivery assets .....	9,943	21,658	11,715
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 .....	22,067,671	9,489,626	(12,578,045)
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	57,545,132	37,670,582	(19,874,550)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0
28. Total (Lines 26 and 27) .....	57,545,132	37,670,582	(19,874,550)
<b>DETAILS OF WRITE-INS</b>			
1101. .....			
1102. .....			
1103. .....			
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above) .....	0	0	0
2501. Agents Balances .....	21,499,995	8,873,607	(12,626,388)
2502. Prepaid Expenses .....	527,179	575,522	48,343
2503. Other Assets Nonadmitted .....	40,497	40,497	0
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above) .....	22,067,671	9,489,626	(12,578,045)

## NOTES TO FINANCIAL STATEMENTS

**NOTE 1 Summary of Significant Accounting Policies and Going Concern**
**A. Accounting Practices**

The accompanying financial statements have been completed in conformity with the accounting practices and procedures permitted by the NAIC's Accounting Practices and Procedures manual and the State of Ohio.

	SSAP #	F/S Page	F/S Line #	2019	2018
NET INCOME					
(1) State basis (Page 4, Line 35, Columns 1 & 2)	XXX	XXX	XXX	\$ 32,024,779	\$ 31,493,309
(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	\$ 32,024,779	\$ 31,493,309
SURPLUS					
(5) State basis (Page 3, Line 38, Columns 1 & 2)	XXX	XXX	XXX	\$ 109,740,825	\$ 125,441,833
(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	\$ 109,740,825	\$ 125,441,833

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

The preparation of financial statements in conformity with the Annual Statement Instructions and Accounting Practices and Procedures annual requires the use of management's estimates.

**C. Accounting Policy**

1. Short-term investments are stated at cost or amortized cost.
2. Bonds not backed by other loans are valued at amortized cost using the scientific method.
3. Common stocks are carried at market.
4. Preferred stocks are carried at cost or amortized cost.
5. Mortgage loans are reported at unpaid principal balances, net of any unamortized discount or premium and allowance for loan losses. The loans are secured by the underlying real estate.
6. Loan-backed and other structured securities are stated at amortized cost or the lower of amortized cost or fair value. Anticipated prepayments are used at the time of purchase to determine the effective yield. Changes in the timing of expected cash flows after original acquisition are accounted for using the retrospective method. Securities that are determined to be other-than-temporarily impaired are accounted for using the prospective method.
7. Common stocks of unconsolidated subsidiaries and affiliates in which the Company has an interest of 20% or more are carried on the equity basis.
8. Investments in joint ventures, partnerships and limited liability companies are accounted for using the equity basis.
9. The Company does not have any derivatives.
10. The Company anticipates investment income as a factor in the premium deficiency calculation, in accordance with SSAP No. 54, for Individual and Group Accident and Health Contracts.
11. The Company uses both a developmental lag method (for short-tailed lines of business) and a tabular reserve method (for long-tailed lines of business) in calculating claim liabilities for accident and health contracts. Loss adjustment expenses are calculated as a percentage of paid claims based on historical experience.
12. The Company has not modified its capitalization policy from the prior period.
13. The Company does not have any pharmaceutical rebates receivable so no estimates are made for these.

**D. Going Concern**

After evaluating the Company's ability to continue as a going concern, management was not aware of any conditions or events which raises substantial doubts concerning the Company's ability to continue as a going concern as of the date of the filing of this statement.

**NOTE 2 Accounting Changes and Corrections of Errors**

There were no material changes in accounting principles or corrections of error in 2019.

**NOTE 3 Business Combinations and Goodwill**

- A. Statutory Purchase Method N/A
- B. Statutory Merger N/A
- C. Assumption Reinsurance N/A
- D. Impairment Loss N/A

**NOTE 4 Discontinued Operations**

- A. Discontinued Operation Disposed of or Classified as Held for Sale N/A
- B. Change in Plan of Sale of Discontinued Operation N/A
- C. Nature of Any Significant Continuing Involvement with Discontinued Operations After Disposal N/A
- D. Equity Interest Retained in the Discontinued Operation After Disposal N/A

**NOTE 5 Investments**

- A. Mortgage Loans, including Mezzanine Real Estate Loans
  - (1) During 2019, the minimum and maximum rates of interest received for new commercial mortgage loans was none.
  - (2) During 2019, the maximum percentage of any one loan to the value of collateral at the time of the loan was none.

## NOTES TO FINANCIAL STATEMENTS

		Current Year	Prior Year
(3) Taxes, assessments and any amounts advanced and not included in the mortgage loan total		\$	-
None for 2019 and 2018			

(4) Age Analysis of Mortgage Loans and Identification of Mortgage Loans in Which the Insurer is a Participant or Co-lender in a Mortgage Loan Agreement:

	Farm	Residential		Commercial		Mezzanine	Total
		Insured	All Other	Insured	All Other		
a. Current Year							
1. Recorded Investment (All)							
(a) Current	\$ -	\$ -	\$ -	\$ -	\$ -	\$13,147,492	\$ -
(b) 30 - 59 Days Past Due	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(c) 60 - 89 Days Past Due	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(d) 90 - 179 Days Past Due	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(e) 180+ Days Past Due	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
2. Accruing Interest 90 - 179 Days Past Due							
(a) Recorded Investment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(b) Interest Accrued	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
3. Accruing Interest 180+ Days Past Due							
(a) Recorded Investment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(b) Interest Accrued	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Interest Reduced							
(a) Recorded Investment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(b) Number of Loans	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(c) Percent Reduced	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%
5. Participant or Co-lender in a Mortgage Loan Agreement							
(a) Recorded Investment	\$ -	\$ -	\$ -	\$ -	\$ -	\$13,147,492	\$ -
b. Prior Year							
1. Recorded Investment (All)							
(a) Current						\$11,069,741	\$11,069,741
(b) 30 - 59 Days Past Due						\$ -	\$ -
(c) 60 - 89 Days Past Due						\$ -	\$ -
(d) 90 - 179 Days Past Due						\$ -	\$ -
(e) 180+ Days Past Due						\$ -	\$ -
Due							
(a) Recorded Investment						\$ -	\$ -
(b) Interest Accrued						\$ -	\$ -
3. Accruing Interest 180+ Days Past Due						\$ -	\$ -
(a) Recorded Investment						\$ -	\$ -
(b) Interest Accrued						\$ -	\$ -
4. Interest Reduced						\$ -	\$ -
(a) Recorded Investment						\$ -	\$ -
(b) Number of Loans						\$ -	\$ -
(c) Percent Reduced	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%
5. Participant or Co-lender in a Mortgage Loan Agreement						\$11,069,741	\$11,069,741
(a) Recorded Investment							

(5) Investment in Impaired Loans With or Without Allowance for Credit Losses and Impaired Loans Subject to a Participant or Co-lender Mortgage Loan Agreement for Which the Reporting Entity is Restricted from Unilaterally Foreclosing on the Mortgage Loan: Agreement: None

(6) Investment in Impaired Loans – Average Recorded Investment, Interest Income Recognized, Recorded Investment on Nonaccrual Status and Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting: None

(7) Allowance for credit losses: None

(8) Mortgage Loans Derecognized as a Result of Foreclosure: None

(9) Interest income on mortgage loans is accrued and recorded net of servicing fees. Interest that is 180 days past due but that is still deemed collectible is accrued, but non-admitted. Any interest deemed uncollectible is written off as a charge against investment income.

B. Debt Restructuring N/A

C. Reverse Mortgages N/A

D. Loan-Backed Securities

The Company does not own any residential or commercial mortgage-backed securities. Investments in other structured securities include whole business securitizations, and other asset-back securities.

(1) Call, redemption and projected cash flow information for other structured securities were obtained from Bloomberg and bond prospectuses.

(2) Recognized OTTI, intent to sell or inability to hold None

(3) Recognized OTTI securities, present value of cash flows less than amortized cost None

(4) a) The aggregate amount of unrealized losses:

1. Less than 12 Months

2. 12 Months or Longer

\$ -

b) The aggregate related fair value of securities with unrealized losses:

1. Less than 12 Months

\$ (74,186)

2. 12 Months or Longer

\$ -

\$ 2,775,815

(5) Several sources of information are considered when determining if impairments are, or are not, other-than-temporary. These include, but are not limited to, the following: Credit rating agency information related to the security is reviewed, in addition to direct discussions with the rating analyst as needed. Reports from third party research providers and sell-side research analysts are reviewed. Market and trading information on the securities and other like-securities is monitored to assess trends impacting the securities. Market liquidity is analyzed to gauge how much it is impacting prices versus actual credit quality changes. Some sources of information will not be available for all securities. Where applicable, additional information is gathered for collateralized investments. This includes analysis of the individual underlying collateral and estimates of potential future collateral performance. Multiple cash flow scenarios are calculated based on various loss rate assumptions and used to assess the likelihood of future possible impairment.

## NOTES TO FINANCIAL STATEMENTS

E.	Dollar Repurchase Agreements and/or Securities Lending Transactions	N/A						
F.	Repurchase Agreements Transactions Accounted for as Secured Borrowing	N/A						
G.	Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing	N/A						
H.	Repurchase Agreements Transactions Accounted for as a Sale	N/A						
I.	Reverse Repurchase Agreements Transactions Accounted for as a Sale	N/A						
J.	Real Estate	N/A						
K.	Low Income Housing tax Credits (LIHTC)							
	(1) There are 12 years of remaining unexpired tax credits for low-income housing investments, with a required holding period of 17 years.							
	(2) The amount of LIHTC and other tax benefits recognized were \$1,338,344 and \$57,237 during 2019 and 2018, respectively.							
	(3) The balance of the investment recognized in the statement of financial position at December 31, 2019 and 2018 was \$5,874,847 and \$2,009,182, respectively.							
	(4) Currently the LIHTC property is not subject to any regulatory reviews.							
	(5) N/A							
	(6) N/A							
	(7) N/A							
L.	Restricted Assets							
1.	Restricted Assets (Including Pledged)							
		Gross (Admitted & Nonadmitted) Restricted						
		Current Year						
		1	2	3	4	5	6	7
	Restricted Asset Category	Total General Account (G/A)	G/A Supporting S/A Activity (a)	Total Separate Account (S/A) Restricted Assets	S/A Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/(Decrease) (5 minus 6)
a.	Subject to contractual obligation for which liability is not shown	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
b.	Collateral held under security lending agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
c.	Subject to repurchase agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
d.	Subject to reverse repurchase agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
e.	Subject to dollar repurchase agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
f.	Subject to dollar reverse repurchase agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
g.	Placed under option contracts	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
h.	Letter stock or securities restricted as to sale - excluding FHLB capital stock	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
i.	FHLB capital stock	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
j.	On deposit with states	\$ 3,590,444	\$ -	\$ -	\$ -	\$ 3,590,444	\$ 3,571,751	\$ 18,693
k.	On deposit with other regulatory bodies	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
l.	Pledged collateral to FHLB (including assets backing funding agreements)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
m.	Pledged as collateral not captured in other categories	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
n.	Other restricted assets	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
o.	Total Restricted Assets	\$ 3,590,444	\$ -	\$ -	\$ -	\$ 3,590,444	\$ 3,571,751	\$ 18,693

(a) Subset of Column 1

(b) Subset of Column 3

Restricted Asset Category	Current Year			
	8	9	Percentage	
			10	11
	Total Non-admitted Restricted	Total Admitted Restricted (5 minus 8)	Gross (Admitted & Non-admitted) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (d)
a.	Subject to contractual obligation for which liability is not shown	\$ -	\$ -	0.000% 0.000%
b.	Collateral held under security lending agreements	\$ -	\$ -	0.000% 0.000%
c.	Subject to repurchase agreements	\$ -	\$ -	0.000% 0.000%
d.	Subject to reverse repurchase agreements	\$ -	\$ -	0.000% 0.000%
e.	Subject to dollar repurchase agreements	\$ -	\$ -	0.000% 0.000%
f.	Subject to dollar reverse repurchase agreements	\$ -	\$ -	0.000% 0.000%
g.	Placed under option contracts	\$ -	\$ -	0.000% 0.000%
h.	Letter stock or securities restricted as to sale - excluding FHLB capital stock	\$ -	\$ -	0.000% 0.000%
i.	FHLB capital stock	\$ -	\$ -	0.000% 0.000%
j.	On deposit with states	\$ -	\$ 3,590,444	0.267% 0.279%
k.	On deposit with other regulatory bodies	\$ -	\$ -	0.000% 0.000%

## NOTES TO FINANCIAL STATEMENTS

I. Pledged collateral to FHLB (including assets backing funding agreements)	\$ -	\$ -	0.000%	0.000%
m. Pledged as collateral not captured in other categories	\$ -	\$ -	0.000%	0.000%
n. Other restricted assets	\$ -	\$ -	0.000%	0.000%
o. Total Restricted Assets	\$ -	\$ 3,590,444	0.267%	0.279%

(c) Column 5 divided by Asset Page, Column 1, Line 28

(d) Column 9 divided by Asset Page, Column 3, Line 28

2. Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate) None
3. Detail of Other Restricted Assets (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate) None
4. Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements None

M. Working Capital Finance Investments N/A

N. Offsetting and Netting of Assets and Liabilities N/A

O. 5GI Securities N/A

P. Short Sales N/A

Q. Prepayment Penalty and Acceleration Fees

	General Account	Separate Account
1. Number of CUSIPs	13	
2. Aggregate Amount of Investment Income	\$ -	\$ -

## NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies

- A. The Company has no investment in joint ventures, partnerships or limited liability companies that exceed 10% of its admitted assets.
- B. There was no impairment to the Company's only investment in a joint venture.

## NOTE 7 Investment Income

- A. All investment income due and accrued on bonds with amounts 90 days past due are excluded from surplus.
- B. The total amount of due and accrued investment income excluded from surplus at December 31, 2019 was \$0.

NOTE 8 Derivative Instruments N/A

## NOTE 9 Income Taxes

- A. The components of the net deferred tax asset/(liability) at the end of current period are as follows:

	As of End of Current Period			12/31/2018			Change		
	(1) Ordinary	(2) Capital	(3) (Col. 1 + 2) Total	(4) Ordinary	(5) Capital	(6) (Col. 4 + 5) Total	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5) Capital	(9) (Col. 7 + 8) Total
(a) Gross Deferred Tax Assets	\$45,976,000	\$ 9,434,000	\$55,410,000	\$40,080,000	\$10,098,000	\$50,178,000	\$ 5,896,000	\$ (664,000)	\$ 5,232,000
(b) Statutory Valuation Allowance Adjustment	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	\$45,976,000	\$ 9,434,000	\$55,410,000	\$40,080,000	\$10,098,000	\$50,178,000	\$ 5,896,000	\$ (664,000)	\$ 5,232,000
(d) Deferred Tax Assets Nonadmitted	\$23,951,000	\$ 8,967,000	\$32,918,000	\$20,222,000	\$ 7,601,000	\$27,823,000	\$ 3,729,000	\$ 1,366,000	\$ 5,095,000
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	\$22,025,000	\$ 467,000	\$22,492,000	\$19,858,000	\$ 2,497,000	\$22,355,000	\$ 2,167,000	\$ (2,030,000)	\$ 137,000
(f) Deferred Tax Liabilities	\$ 7,761,000	\$ 467,000	\$ 8,228,000	\$ 8,447,000	\$ 139,000	\$ 8,586,000	\$ (686,000)	\$ 328,000	\$ (358,000)
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$14,264,000	\$ -	\$14,264,000	\$11,411,000	\$ 2,358,000	\$13,769,000	\$ 2,853,000	\$ (2,358,000)	\$ 495,000

The company has not established a statutory valuation allowance in determining its adjusted gross deferred tax assets as management believes that it is more likely than not that all of its gross deferred tax assets will be realized.

2. The amount of admitted adjusted gross deferred tax assets under each component of SSAP No 101 are presented below.

	As of End of Current Period			12/31/2018			Change		
	(1) Ordinary	(2) Capital	(3) (Col. 1 + 2) Total	(4) Ordinary	(5) Capital	(6) (Col. 4 + 5) Total	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5) Capital	(9) (Col. 7 + 8) Total
Admission Calculation Components SSAP No. 101									
(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks	\$ -	\$ -	\$ -			\$ -	\$ -	\$ -	\$ -
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	\$14,264,000	\$ -	\$14,264,000	\$11,411,000	\$ 2,358,000	\$13,769,000	\$ 2,853,000	\$ (2,358,000)	\$ 495,000
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date.	\$15,401,000	\$ -	\$15,401,000	\$11,411,000	\$ 2,358,000	\$13,769,000	\$ 3,990,000	\$ (2,358,000)	\$ 1,632,000
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX	\$14,264,000	XXX	XXX	\$16,738,000	XXX	XXX	\$ (2,474,000)
(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	\$ 7,761,000	\$ 467,000	\$ 8,228,000	\$ 8,447,000	\$ 139,000	\$ 8,586,000	\$ (686,000)	\$ 328,000	\$ (358,000)
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$22,025,000	\$ 467,000	\$22,492,000	\$19,858,000	\$ 2,497,000	\$22,355,000	\$ 2,167,000	\$ (2,030,000)	\$ 137,000

## NOTES TO FINANCIAL STATEMENTS

3.

	2019	2018
a. Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount.	1035.000%	1314.000%
b. Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above.	\$ 103,787,617	\$ 118,350,358

4.

	As of End of Current Period		12/31/2018		Change	
	(1) Ordinary	(2) Capital	(3) Ordinary	(4) Capital	(5) (Col. 1 - 3) Ordinary	(6) (Col. 2 - 4) Capital
Impact of Tax Planning Strategies:						
(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.						
1. Adjusted Gross DTAs amount from Note 9A1(c)	\$ 45,976,000	\$ 9,434,000	\$ 40,080,000	\$ 10,098,000	\$ 5,896,000	\$ (664,000)
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies	0.000%	0.000%	0.000%	1.000%	0.000%	-1.000%
3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$ 22,025,000	\$ 467,000	\$ 19,858,000	\$ 2,497,000	\$ 2,167,000	\$ (2,030,000)
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	20.000%	0.000%	9.000%	13.000%	11.000%	-13.000%

b. Do the Company's tax-planning strategies include the use of reinsurance? Yes  No 

B. There are no temporary differences for which deferred tax liabilities are not recognized.

The change in deferred income taxes reported in surplus before consideration of non-admitted assets is comprised of the following components:

	12/31/2019			12/31/2018			Change		
	(1) Ordinary	(2) Capital	(3) (Col. 1 + 2) Total	(4) Ordinary	(5) Capital	(6) (Col. 4 + 5) Total	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5) Capital	(9) (Col. 7 + 8) Total
Net Deferred Tax Asset (Liability)	\$ 38,215,000	\$ 8,967,000	\$ 47,182,000	\$ 31,633,000	\$ 9,959,000	\$ 41,592,000	\$ 6,582,000	\$ (992,000)	\$ 5,590,000
- Tax-effect of unrealized gains and losses	\$ -	\$ (16,000)	\$ (16,000)	\$ -	\$ (33,000)	\$ (33,000)	\$ -	\$ 17,000	\$ 17,000
- Tax-effect of other surplus gains and losses	\$ 111,429	\$ -	\$ 111,429	\$ 62,429	\$ -	\$ 62,429	\$ 49,000	\$ -	\$ 49,000
Prior Period Adjustment - unrealized gains and losses	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Net tax-effect without unrealized gains and losses and prior period adjustments	\$ 38,103,571	\$ 8,983,000	\$ 47,086,571	\$ 31,570,571	\$ 9,992,000	\$ 41,562,571	\$ 6,533,000	\$ (1,009,000)	\$ 5,524,000

C. Current income taxes incurred consist of the following major components:

	(1) As of End of Current Period	(2) 12/31/2018	(3) (Col. 1 - 2) Change
1. Current Income Tax			
(a) Federal	\$ 9,782,130	\$ 11,188,686	\$ (1,406,556)
(b) Foreign	\$ -	\$ -	\$ -
(c) Subtotal	\$ 9,782,130	\$ 11,188,686	\$ (1,406,556)
(d) Federal income tax on net capital gains	\$ 405,079	\$ 1,227,260	\$ (822,181)
(e) Utilization of capital loss carry-forwards	\$ -	\$ -	\$ -
(f) Other	\$ -	\$ -	\$ -
(g) Federal and foreign income taxes incurred	\$ 10,187,209	\$ 12,415,946	\$ (2,228,737)
2. Deferred Tax Assets:			
(a) Ordinary:			
(1) Discounting of unpaid losses	\$ -	\$ -	\$ -
(2) Unearned premium reserve	\$ -	\$ -	\$ -
(3) Policyholder reserves	\$ 17,034,000	\$ 15,454,000	\$ 1,580,000
(4) Investments	\$ -	\$ -	\$ -
(5) Deferred acquisition costs	\$ 20,539,000	\$ 18,989,000	\$ 1,550,000
(6) Policyholder dividends accrual	\$ -	\$ -	\$ -
(7) Fixed Assets	\$ -	\$ -	\$ -
(8) Compensation and benefits accrual	\$ 130,000	\$ 76,000	\$ 54,000
(9) Pension accrual	\$ -	\$ -	\$ -
(10) Receivables - nonadmitted	\$ -	\$ -	\$ -
(11) Net operating loss carry-forward	\$ -	\$ -	\$ -
(12) Tax credit carry-forward	\$ -	\$ -	\$ -
(13) Other (including items <5% of total ordinary tax assets)	\$ 8,273,000	\$ 5,561,000	\$ 2,712,000
(99) Subtotal	\$ 45,976,000	\$ 40,080,000	\$ 5,896,000
(b) Statutory valuation allowance adjustment	\$ -	\$ -	\$ -
(c) Nonadmitted	\$ 23,951,000	\$ 20,222,000	\$ 3,729,000
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	\$ 22,025,000	\$ 19,858,000	\$ 2,167,000
(e) Capital:			
(1) Investments	\$ 8,017,000	\$ 8,686,000	\$ (669,000)
(2) Net capital loss carry-forward	\$ -	\$ -	\$ -
(3) Real estate	\$ -	\$ -	\$ -
(4) Other (including items <5% of total ordinary tax assets)	\$ 1,417,000	\$ 1,412,000	\$ 5,000
(99) Subtotal	\$ 9,434,000	\$ 10,098,000	\$ (664,000)
(f) Statutory valuation allowance adjustment	\$ -	\$ -	\$ -
(g) Nonadmitted	\$ 8,967,000	\$ 7,601,000	\$ 1,366,000
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	\$ 467,000	\$ 2,497,000	\$ (2,030,000)
(i) Admitted deferred tax assets (2d + 2h)	\$ 22,492,000	\$ 22,355,000	\$ 137,000
3. Deferred Tax Liabilities:			

## NOTES TO FINANCIAL STATEMENTS

(a) Ordinary:				
(1) Investments	\$ -	\$ -	\$ -	\$ -
(2) Fixed Assets	\$ 483,000	\$ 18,000	\$ 465,000	
(3) Deferred and uncollected premium	\$ 274,000	\$ 259,000	\$ 15,000	
(4) Policyholder reserves	\$ 6,901,000	\$ 8,051,000	\$ (1,150,000)	
(5) Other (including items <5% of total ordinary tax liabilities)	\$ 103,000	\$ 119,000	\$ (16,000)	
(99) Subtotal	\$ 7,761,000	\$ 8,447,000	\$ (686,000)	
(b) Capital:				
(1) Investments	\$ -	\$ -	\$ -	\$ -
(2) Real estate	\$ -	\$ -	\$ -	\$ -
(3) Other (including items <5% of total capital tax liabilities)	\$ 467,000	\$ 139,000	\$ 328,000	
(99) Subtotal	\$ 467,000	\$ 139,000	\$ 328,000	
(c) Deferred tax liabilities (3a99 + 3b99)	\$ 8,228,000	\$ 8,586,000	\$ (358,000)	
4. Net deferred tax assets/liabilities (2i - 3c)	\$ 14,264,000	\$ 13,769,000	\$ 495,000	

D. Among the more significant book to tax adjustments were the following:

- (1) Current income taxes incurred
- Change in deferred income tax (without tax on unrealized gains and losses or foreign exchange gains and losses)
- (2) Total income tax reported
- Net gain from operations before federal income tax and realized gains
- Realized Capital gains (losses) before federal income tax, after transfer to IMR
- (5) Income before taxes
- Expected Income tax expense (benefit) at the statutory rate
- (7) Increase (decrease) in actual tax reported resulting from
  - a. Tax Adjustment for IMR
  - b. Deferred tax benefit on nonadmitted assets
  - c. Change in Deferred Taxes due to Tax Reform
  - d. Prior year adjustments
  - e. Nondeductible expenses
  - f. Tax-Exempt Interest
  - g. Tax credits
  - h. Stock based compensation
  - i. Other
- (8) Total income tax reported

	12/31/2019	12/31/2018	Change
\$ 10,187,209	\$ 12,415,946	\$ (2,228,737)	
\$ (5,524,000)	\$ (4,168,000)	\$ (1,356,000)	
\$ 4,663,209	\$ 8,247,946	\$ (3,584,737)	
\$ 41,651,373	\$ 43,711,615	\$ (2,060,242)	
\$ 560,616	\$ 197,641	\$ 362,975	
\$ 42,211,989	\$ 43,909,256	\$ (1,697,267)	
21%	21%		
\$ 8,864,518	\$ 9,220,944	\$ (356,426)	
\$ 116,000	\$ 4,000	\$ 112,000	
\$ (3,104,000)	\$ (624,000)	\$ (2,480,000)	
\$ -	\$ (43,000)	\$ 43,000	
\$ 17,000	\$ 107,000	\$ (90,000)	
\$ 111,000	\$ 74,000	\$ 37,000	
\$ (227,000)	\$ (114,000)	\$ (113,000)	
\$ (1,067,000)	\$ (36,000)	\$ (1,031,000)	
\$ (48,000)	\$ (350,000)	\$ 302,000	
\$ 691	\$ 9,002	\$ (8,311)	
\$ 4,663,209	\$ 8,247,946	\$ (3,584,737)	

E. (1) As of 12/31/2019, the Company has no net operating loss or tax credit carryforwards.

(2) The amount of Federal income taxes incurred that are available for recoupment in the event of future net losses are

\$ 407,000 for 2019  
\$ 198,000 for 2018, and  
\$ 296,000 for 2017

(3) The aggregate amount of deposits admitted under Section 6603 of the Internal Revenue Code = None

F. (1) The Company's federal income tax return is consolidated with its ultimate parent, Globe Life Inc. (formerly Torchmark Corporation), as well as its affiliated subsidiaries including Liberty National Life Insurance Company, American Income Life Insurance Company, United American Insurance Company, National Income Life Insurance Company, Globe Life And Accident Insurance Company, TMK Buildings Corporation, Brown Service Funeral Homes Company, Inc., Torchmark Insurance Agency, Inc., Specialized Advertising Group, Inc., Globe Marketing Services, Inc., AILIC Receivables Corporation, American Income Marketing Services, Inc., Liberty National Auto Club, Inc., Globe Life Insurance Agency, Inc., Globe Life Insurance Company of New York (formerly First United American Insurance Company), and TMK Re, Ltd.

(2) Each Company pays a share of the total tax liability determined as if computed separately. Companies that would report a loss are reimbursed to the extent that their losses are utilized by affiliates with taxable income. The calculation is made pursuant to Federal Income Tax Regulation 1.1552-1(a)(2) and 1.1502-33(d)(3)(i).

G. Federal or foreign income tax loss contingencies None

H. Repatriation Transition Tax (RTT)  
The Company doesn't owe RTT for the year

I. Alternative Minimum Tax (AMT) Credit  
The Company had no AMT credit carryforwards as of the beginning of the year. As a result, no AMT credits were recovered during the year or exists as of the end of the year.

#### NOTE 10 Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

A. Common stock ownership of the Company and affiliates is shown in the chart on Schedule Y. All companies are 100% owned except where indicated otherwise.

B. The Company declared common stock dividends to Globe Life And Accident Insurance Company in the amount of \$8,498,000, \$4,000,000, \$3,495,000, \$5,200,000, \$5,200,000, and \$5,100,000 on March 12, March 25, April 12, July 3, October 17 and December 12, 2019, respectively.

American Income Life Insurance Company loaned the Company \$5,000,000 on January 25, 2019 at an interest rate of 5.5%. The borrowing was repaid in full on July 26, 2019.

The Company made a surplus note interest payment of \$393,750 to American Income Life Insurance Company on June 15, 2019.

The Company made a surplus note interest payment of \$393,750 to Liberty National Life Insurance Company on June 15, 2019.

American Income Life Insurance Company loaned the Company \$5,000,000 on July 26, 2019 at an interest rate of 5.5%. The borrowing was repaid in full on August 23, 2019.

The Company made a surplus note interest payment of \$393,750 to American Income Life Insurance Company on December 15, 2019.

The Company made a surplus note interest payment of \$393,750 to Liberty National Life Insurance Company on December 15, 2019.

During 2019, the Company paid \$288,396 in interest to Globe Life Inc. (formerly Torchmark Corporation) in relation to the sale of agents balances on March 23 and December 24, 2018.

C. Not applicable

D. The Company had the following Inter Company Receivables

Globe Life And Accident Insurance Company \$ 50,434

E. Guarantees or undertaking – None

F. The Company's investment management function is managed by Globe Life Inc. (formerly, Torchmark Corporation). under the master services agreement with Globe Life Inc. discussed below. The fee for these services is based on the total value of the securities managed. For the reporting period, investment fees paid to Globe Life Inc totaled \$2,076,000.

## NOTES TO FINANCIAL STATEMENTS

The Company has a separate service agreement with Globe Life Inc to provide a wide variety of possible services. The Globe Life Inc. agreement is a master service agreement with the Company and the other insurance subsidiaries. The fee charged to the Company is based on the ratio of certain expenses at the affiliate level to comparable Globe Life Inc. consolidated expenses applied to Globe Life Inc.'s total operating expenses for the prior year. For the 2019 reporting period, management fees paid to Globe Life Inc. totaled \$3,156,000.

The Company is a party to a service agreement by and between American Income Life Insurance Company, Globe Life And Accident Insurance Company, Liberty National Life Insurance Company, Globe Life Inc., and United American Insurance Company.

- G. Nature of relationships that could affect operations None
- H. The Company does not own shares of stock of an upstream or ultimate parent.
- I. Investments in affiliates greater than 10% of admitted assets None
- J. Write-downs for impairments of investments in affiliates None
- K. Foreign insurance subsidiary valued using CARVM N/A
- L. Downstream holding company valued using look-through method N/A
- M. All SCA Investments N/A
- N. Investment in Insurance SCAs N/A
- O. SCA or SSAP 48 Entity Loss Tracking N/A

**NOTE 11 Debt**

- A. The Company does not have any unaffiliated debt.
- B. FHLB (Federal Home Loan Bank) Agreements N/A

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

- A. Defined Benefit Plan N/A
- B. Description of investment policies and strategies N/A
- C. The fair value of each class of plan assets N/A
- D. Rate of return assumptions N/A
- E. Defined Contribution Plan
 

The Company participates in a defined contribution thrift plan covering substantially all employees. The liability for the plan is maintained at the holding company level. The thrift plan is funded by employee contributions that are matched by the Company based on percentage of such contributions. Company contributions were \$211,913 and \$213,582 for the years ended December 31, 2019 and 2018, respectively.
- F. Multiemployer Plans N/A
- G. Consolidated/Holding Company Plans
 

The Company participates in a Supplemental Executive Retirement Plan (SERP) which provides a limited number of executives an additional supplemental defined pension benefit. The supplemental benefit is based on the participant's qualified plan benefit without consideration to regulatory limits on compensation and benefit payments applicable to qualified plans, except that eligible compensation is capped at \$1 million. The Company's liability for the plan was \$621,257 and \$362,754 at December 31, 2019 and 2018, respectively. Pension costs is determined in the same manner as the defined benefit plan. Expense recognized for the plan was \$23,127 and \$34,164 for the years ended December 31, 2019 and 2018, respectively.
- H. Postemployment Benefits and Compensated Absences
 

Compensated absences/vacation pay is recorded in accordance with SSAP No. 11.
- I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)
 

The Company does not offer postretirement benefits to retired employees over age sixty-five. Therefore, passage of the Medical Prescription Drug Improvement and Modernization Act of 2003 has no effect on its benefit obligations

**NOTE 13 Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations**

- (1) The Company has 1,000 common shares authorized and 213 common shares issued and outstanding. The par value is \$12,000 per share.
- (2) The Company has no preferred shares.
- (3) Statutory regulations in the state of Ohio limit the payment of dividends by stock life insurance companies in any one year to an amount equal to the greater of statutory net income from the previous year or 10% of surplus as regards policyholders reported for the previous year. Dividends in excess of these limitations are not available without special approval by the Ohio Department of Insurance. The maximum dividend that can be made without prior approval in 2020 is \$32,024,779.
- (4) Dividends paid in 2019 - See Note 10.
- (5) Amount of ordinary dividends that may be paid - See (3) above
- (6) Restrictions on unassigned funds - N/A
- (7) Mutual surplus advances - N/A
- (8) The Company does not hold any of its own stock
- (9) The Company has no special surplus funds in 2019
- (10) The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses \$ 59,991
- (11) The Company issued the following surplus debentures or similar obligations:

Date Issued	Interest Rate	Par Value (Face Amount of Notes)	Carrying Value of Note*	Interest And/Or Principal Paid Current Year	Total Interest And/Or Principal Paid	Unapproved Interest And/Or Principal	Date of Maturity
9/30/2016	5.250%	\$ 15,000,000	\$ 15,000,000	\$ 787,500	\$ 2,526,563	\$ -	9/30/2046
9/30/2016	5.250%	\$ 15,000,000	\$ 15,000,000	\$ 787,500	\$ 2,526,563	\$ -	9/30/2046
1311999. Total		\$ 30,000,000	\$ 30,000,000	\$ 1,575,000	\$ 5,053,126	\$ -	XXX

\* Total should agree with Page 3, Line 32.

- (12) The impact of any restatement due to prior quasi-reorganizations is as follows: N/A
- (13) Date of quasi-reorganization N/A

**NOTE 14 Liabilities, Contingencies and Assessments**

- A. Contingent Commitments
 

The Company has commitments listed on Schedule BA for Joint Venture Interests and Non-Guaranteed Federal Low Income Housing Tax Credits.

- (1) Total commitments: \$ 65,678,106

## NOTES TO FINANCIAL STATEMENTS

(2) None

(3) None

**B. Assessments**

(1) The Company paid assessments for Penn Treaty Network American Insurance Company (Penn Treaty) and American Network Insurance Company (American Network), which were fully accrued in the prior year.

(2) a. Assets recognized from paid and accrued premium tax offsets and policy surcharges prior year-end \$ 1,482,010

b. Decreases current year:

Premium Tax offset applied	\$ 535,162
Reversal of prior year accrual	\$ 97,976

c. Increases current year:

Assessments paid	\$ 103,824
------------------	------------

d. Assets recognized from paid and accrued premium tax offsets and policy surcharges current year-end \$ 952,696

(3)

a. Discount Rate Applied	0.0%
--------------------------	------

b. The Undiscounted and Discounted Amount of the Guaranty Fund Assessments and Related Assets by Insolvency

Name of the Insolvency	Guaranty Fund Assessment		Related Assets	
	Undiscounted	Discounted	Undiscounted	Discounted
Penn Treaty/American Network	\$ 41,931			

c. Number of Jurisdictions, Ranges of Years Used to Discount and Weighted Average Number of Years of the Discounting Time Period for Payables and Recoverables by Insolvency N/A

C. Gain Contingencies None

D. Claims related extra contractual obligations and bad faith losses stemming from lawsuits N/A

E. Joint and Several Liabilities None

F. All Other Contingencies

Various lawsuits against the Company have arisen in the course of the Company's business. Contingent liabilities arising from litigation, income taxes, and other matters are not considered material in relation to the financial position of the Company.

**NOTE 15 Leases**

A. Lessee Operating Lease:

(1) The Company has entered into various operating leases. Lease expense for 2019 and 2018 was \$739,885 and \$627,168 respectively.

(2) a. At December 31, 2019, the minimum aggregate rental commitments are as follows:

	Operating Leases
1. 2020	\$ 619,071
2. 2021	\$ 186,241
3. 2022	\$ 8,640
4. 2023	\$ 8,640
5. 2024	\$ 6,480
6. Total	\$ 829,072

(3) The Company is not involved in any sale - leaseback transactions.

B. Lessor 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**

A. Transfers of receivables reported as sales None

B. Transfer and servicing of financial assets None

C. Wash Sales None

**NOTE 18 Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured 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**

A.

(1) Fair Value Measurements at Reporting Date

As of year-end, the company did not have any securities measured and reported at fair value on the statement of financial position.

(2) Fair Value Measurements in (Level 3) of the Fair Value hierarchy

As of year end, the Company did not have securities categorized as Level 3 that are measured and reported at fair value on the statement of financial position.

(3) During the year, the Company did not have any transfers into or out of Level 3 for assets measured and reported at fair value on the statement of financial position.

## NOTES TO FINANCIAL STATEMENTS

(4) The majority of the Company's securities are not actively traded and direct quotes are not generally available. Management therefore determines the fair values of securities after consideration of data provided by third-party pricing services, independent broker/dealers, and other resources. Prices provided by third-party pricing services are not binding offers but are estimated exit values. They are based on observable market data inputs which can vary by security type. Such inputs include benchmark yields, available trades, broker/dealer quotes, issuer spreads, benchmark securities, bids, offers and other inputs that are corroborated in the market. All fair value measurements based on prices determined with observable market data are reported as Level 1 or Level 2 measurements. When third-party vendor prices are not available, the Company attempts to obtain valuations from other sources, including but not limited to broker/dealers, broker quotes, and prices on comparable securities.

When valuations have been obtained for all securities in the portfolio, management reviews and analyzes the prices to insure their reasonableness, taking into account available observable information. When two or more valuations are available for a security and the variance between the valuations is 10% or less, the close correlation suggests similar observable inputs were used in deriving the prices, and the average of the prices is used. Securities valued in this manner are classified as level 2. When the variance exceeds 10%, further review is performed on the available valuations to determine if they can be corroborated within reasonable tolerance to any other observable evidence. If one of the valuations or the average of the available valuations can be corroborated with other observable evidence, then the corroborated value is used and reported as level 2. The Company uses information and analytical techniques deemed appropriate for determining the point within the range of reasonable fair value estimates that is most representative of fair value under current market conditions. Valuations that cannot be corroborated with a reasonable tolerance are classified as Level 3.

(5) Fair Value Measurements of derivative assets and liabilities    None

B. Fair Value combination disclosure    None

C. Aggregate fair value for all financial instruments and the level within the fair value hierarchy in which the fair value measurements in their entirety fall.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	\$ 1,335,978,306	\$ 1,189,940,040	\$ -	\$ 1,270,931,904	\$ 65,046,402	\$ -	\$ -
Mortgage loans ***	\$ 13,147,492	\$ 13,147,492	\$ -	\$ -	\$ 13,147,492	\$ -	\$ -
Cash, cash equivalents & short term investments	\$ (5,956,213)	\$ (5,956,213)	\$ (7,956,213)	\$ 2,000,000	\$ -	\$ -	\$ -
Exempt Money Market Mutual Funds Identified by SVO	\$ 2,003,320	\$ 2,003,320	\$ -	\$ -	\$ -	\$ 2,003,320	\$ -
Policy Loans	\$ 153,899	\$ 153,899	\$ -	\$ -	\$ -	\$ -	\$ 153,899
Other Invested Assets - Surplus Notes	\$ 44,103,267	\$ 38,349,531	\$ -	\$ 44,103,267	\$ -	\$ -	\$ -
Other Invested Assets - Non Guaranteed LIHTC's	\$ 9,119,073	\$ 5,874,847	\$ -	\$ -	\$ 9,119,073	\$ -	\$ -
Receivable - Affiliated	\$ 50,434	\$ 50,434	\$ -	\$ -	\$ 50,434	\$ -	\$ -

\*\*\* The Company invests in mortgage loans with 1 month floating rates. For this reason, the fair value approximates book value.

D. Not Practicable to Estimate Fair Value

Type or Class of Financial Instrument	Carrying Value	Effective Interest Rate	Maturity Date	Explanation
Policy Loans	\$ 153,899	0.000%		There is no reliable market for these type of instruments.

E. Investments reported at Net Asset Value (NAV) consist entirely of Exempt Money Market Mutual Funds as identified by the Securities Valuation Office (SVO). These assets are permitted to be valued at NAV under SSAP 2R, Cash, Cash Equivalents, Drafts and Short-Term Investments.

### NOTE 21 Other Items

A. Unusual or Infrequent Items    None

B. Troubled Debt Restructuring: Debtors    None

C. Other Disclosures    None

D. Business Interruption Insurance Recoveries    None

E. State Transferable and Non-transferable Tax Credits    None

F. Subprime Mortgage Related Risk Exposure  
(1) The Company has no direct exposure to subprime mortgage related risk and no exposure to subprime mortgage related risk through the sources described in the note for which disclosure is required.

G. Retained Assets    None

H. Insurance-Linked Securities (ILS) Contracts    None

I. The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy  
None

### NOTE 22 Events Subsequent

Type I - Recognized Subsequent Events:

Subsequent events have been considered through 02/14/2020 for the statutory statement issued on 02/15/2020

Type II - Nonrecognized Subsequent Events:

	Current Year	Prior Year
A. Did the reporting entity write accident and health insurance premium that is subject to Section 9010 of the Federal Affordable Care Act (YES/NO)?	No	
B. ACA fee assessment payable for the upcoming year	\$ -	\$ -
C. ACA fee assessment paid	\$ -	\$ -
D. Premium written subject to ACA 9010 assessment	\$ -	\$ -
E. Total Adjusted Capital before surplus adjustment (Five-Year Historical Line 30)	\$ -	
F. Total Adjusted Capital after surplus adjustment (Five-Year Historical Line 30 minus 22B above)	\$ -	
G. Authorized Control Level (Five-Year Historical Line 31)	\$ -	
H. Would reporting the ACA assessment as of Dec. 31, 2019 have triggered an RBC action level (YES/NO)?	No	

## NOTES TO FINANCIAL STATEMENTS

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**NOTE 23 Reinsurance**

## A. Ceded Reinsurance Report

## Section 1 - General Interrogatories

1. None of the reinsurers, listed in Schedule S as non-affiliated are 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.
2. None of the policies issued by the Company have been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) which is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor of an insured or any other person not primarily engaged in the insurance business.

## Section 2 - Ceded Reinsurance Report - Part A

1. The Company does not 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.
2. The Company does not 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 which, 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.

## Section 3 - Ceded Reinsurance Report - Part B

1. 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 is \$ 0.
2. The Company does not have any reinsurance credits taken for new agreements executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts which were in force or which had existing reserves established by the company as of the effective date of the agreement.

## B. Uncollectible Reinsurance      None

## C. Commutation of Reinsurance Reflected in Income and Expenses.      N/A

## D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation      None

## E. Reinsurance of Variable Annuity contracts      None

## F. Reserve Credit for Variable Annuities      None

## G. Ceding Entities That Utilize Captive Reinsurers to Assume Reserves Subject to the XXX/ AXXX Captive Framework      None

**NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination**

## A. Method of estimating premium adjustments      N/A

## B. Adjustment to written or to earned premiums      N/A

## C. Amount and percent of net retrospective premiums      N/A

## D. Medical loss ratio rebates required pursuant to the Public Health Service Act.      N/A

## E. Risk Sharing Provisions of the Affordable Care Act

(1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions (YES/NO)?

Yes [ ] No [X]

(2) Impact of Risk Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year

N/A

(3) Roll forward of prior year ACA risk sharing provisions for the following asset (gross of any nonadmission) and liability balances along with the reasons for adjustments to prior year balance.

N/A

(4) Roll-Forward of Risk Corridors Asset and Liability Balances by Program Benefit Year

N/A

(5) ACA Risk Corridors Receivable as of Reporting Date

N/A

**NOTE 25 Change in Incurred Losses and Loss Adjustment Expenses**

A. Reserves on accident and health contracts for incurred losses and loss adjustment expenses attributable to insured events or prior years developed during 2019. See Schedule H, Part 3 and the Five Year Historical Data. Original estimates are increased or decreased as additional information becomes available regarding individual claims. However, no significant trends or unanticipated events were noted in 2019. None of the Company's accident and health contracts are subject to retrospective rating or experience refunds.

B. No change

**NOTE 26 Intercompany Pooling Arrangements**      None**NOTE 27 Structured Settlements**      None**NOTE 28 Health Care Receivables**      N/A**NOTE 29 Participating Policies**      None**NOTE 30 Premium Deficiency Reserves**

1. Liability carried for premium deficiency reserves	\$	-
2. Date of the most recent evaluation of this liability	12/31/2019	
3. Was anticipated investment income utilized in the calculation?	Yes [ ] No [X]	

**NOTE 31 Reserves for Life Contracts and Annuity Contracts**

- (1) The Company waives deduction of deferred fractional premiums upon death of insured. It returns any portion of the final premium beyond the date of death where required only. Surrender values are not promised in excess of the legally computed reserves.
- (2) The Company does not currently issue substandard policies and does not have any in force.
- (3) As of December 31, 2019, the Company had no insurance in force for which the gross premiums are less than the net premiums according to the standard valuation set by the State of Ohio.
- (4) The Tabular Interest has been determined by formula as described in the instructions.  
The Tabular Less Actual Reserve Released has been determined by formula as described in the instructions.  
The Tabular Cost has been determined by formula as described in the instructions.
- (5) For the determination of Tabular Interest on funds not involving life contingencies for each valuation rate of interest, the tabular interest is calculated as one hundredth of the product of such valuation rate of interest times the mean of the amount of funds subject to such valuation rate of interest held at the beginning and end of the year of valuation.
- (6) The details for other changes:      None

## NOTES TO FINANCIAL STATEMENTS

**NOTE 32 Analysis of Annuity Actuarial Reserves and Deposit Type Contract Liabilities by Withdrawal Characteristics**

A. Individual Annuities	None	
B. Group Annuities	None	
C. Deposit-Type Contracts (no life contingencies):	None	
D. Life & Accident & Health Annual Statement:		<u>Amount</u>
1. Exhibit 5, Annuities Section, Total (net)		\$ -
2. Exhibit 5, Supplementary Contracts with Life Contingencies Section, Total (net)		\$ -
3. Exhibit 7, Deposit-Type Contracts, Line 14, Column 1		\$ -
4. Subtotal		\$ -
Separate Accounts Annual 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		\$ -

**NOTE 33 Analysis of Life Actuarial Reserves by Withdrawal Characteristics**

	Account Value	General Account			Separate Account - Guaranteed and Nonguaranteed		
		Cash Value	Reserve	Account Value	Cash Value	Reserve	
A. Subject to discretionary withdrawal, surrender values, or policy loans:							
(1) Term Policies with Cash Value	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(2) Universal Life Guarantees	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(4) Indexed Universal Life	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(5) Indexed Universal Life with Secondary Guarantees	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(6) Indexed Life	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(7) Other Permanent Cash Value Life Insurance	\$ -	\$ 3,562,610	\$ 10,174,520	\$ -	\$ -	\$ -	\$ -
(8) Variable Life	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(9) Variable Universal Life	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(10) Miscellaneous Reserves	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
B. Not subject to discretionary withdrawal or no cash values:							
(1) Term Policies with Cash Value	XXX	XXX	\$ -	XXX	XXX	\$ -	\$ -
(2) Accidental Death Benefits	XXX	XXX	\$ -	XXX	XXX	\$ -	\$ -
(3) Disability - Active Lives	XXX	XXX	\$ -	XXX	XXX	\$ -	\$ -
(4) Disability - Disabled Lives	XXX	XXX	\$ -	XXX	XXX	\$ -	\$ -
(5) Miscellaneous Reserves	XXX	XXX	\$ -	XXX	XXX	\$ -	\$ -
C. Total (gross: direct + assumed)	\$ -	\$ 3,562,610	\$ 10,174,520	\$ -	\$ -	\$ -	\$ -
D. Reinsurance ceded	\$ -	\$ -	\$ 15,147	\$ -	\$ -	\$ -	\$ -
E. Total (net) (C) - (D)	\$ -	\$ 3,562,610	\$ 10,159,373	\$ -	\$ -	\$ -	\$ -
F. Life & Accident & Health Annual Statement:					<u>Amount</u>		
(1) Exhibit 5, Life Insurance Section, Total (net)					\$ 10,073,978		
(2) Exhibit 5, Accidental Death Benefits Section, Total (net)					\$ 85,395		
(3) Exhibit 5, Disability - Active Lives Section, Total (net)					\$ -		
(4) Exhibit 5, Disability - Disabled Lives Section, Total (net)					\$ -		
(5) Exhibit 5, Miscellaneous reserves Section, Total (net)					\$ -		
(6) Subtotal					\$ 10,159,373		
Separate Accounts 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))					\$ 10,159,373		

**NOTE 34 Premium & Annuity Considerations Deferred and Uncollected**

A. Deferred and uncollected life insurance premiums and annuity considerations as of the end of current period, were as follows:

Type	Gross	Net of Loading
(1) Industrial	\$ -	\$ -
(2) Ordinary new business	\$ 46,247	\$ 8,635
(3) Ordinary renewal	\$ 1,588,370	\$ 1,295,660
(4) Credit Life	\$ -	\$ -
(5) Group Life	\$ -	\$ -
(6) Group Annuity	\$ -	\$ -
(7) Totals	\$ 1,634,617	\$ 1,304,295

**NOTE 35 Separate Accounts**

A. Separate Account Activity N/A

**NOTE 36 Loss/Claim Adjustment Expenses**

The balance in the liability for unpaid accident and health claim adjustment expenses as of December 31, 2019 and 2018 was \$1,296,325 and \$1,287,482, respectively.

The Company incurred \$5,538,109 and paid \$5,529,266 of claim adjustment expenses in the current year, of which \$1,102,778 of paid amount was attributable to insured or covered events of prior years.

The Company does not anticipate any salvage or subrogation amounts and therefore no such amounts are reflected in the liability for unpaid claims or losses.

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America  
**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 [ X ]  No [ ]  
 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 [ X ]  No [ ]  N/A [ ]

1.3 State Regulating? .....  Ohio

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

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. .....  0000320335

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. .....  12/31/2019

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. .....  12/31/2015

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). .....  02/28/2017

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 [ ]  No [ ]  N/A [ X ]

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

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 yes, complete and file the merger history data file with the NAIC.

5.2 If yes, provide the name of the 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 Name of Entity	2 NAIC Company Code	3 State of Domicile
---------------------	------------------------	------------------------

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 or government, manager or attorney in fact).

1 Nationality	2 Type of Entity
------------------	---------------------

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America  
**GENERAL INTERROGATORIES**

8.1 Is the company a subsidiary of a bank holding company regulated by 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 response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal 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?  
 Deloitte & Touche, LLP  
 2200 Ross Avenue, Suite 1600  
 Dallas, TX 75201

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 the other requirements of the Annual Financial Reporting Model Regulation as allowed for 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:

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?  
 Barbara Sue Emig, Officer  
 Family Heritage Life Insurance Company of America  
 6001 East Royalton Road, Suite 200  
 Broadview Heights, OH 44147

12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? ..... Yes [ X ] No [ ]

12.11 Name of real estate holding company ..... AVALONBAY COMMUNITIES, BROOKFIELD ASSET MGMT INC, ERP OPERATING LP, FEDERAL REALTY INVESTMENT, GOODMAN US FIN FOUR, HEALTH CARE REIT INC, HOSPITALITY PROP TRUST, KIMCO REALTY CORP, LTC PROPERTIES INC, NATIONAL RETAIL PROPERTIES INC, NATIONWIDE HEALTH PPTYS, PIEDMONT OPERATING PARTNERSHIP, RAMCO- GERSHENSON, REALTY INCOME CORP, REGENCY CENTERS LP, RETAIL PROPERTIES OF AMERICA, SENIOR HOUSING PROP TRUST, SIMON PROPERTY GRP LP, SPIRIT REALTY LP, VENTAS REALTY LP

12.12 Number of parcels involved .....  
 12.13 Total book/adjusted carrying value ..... \$ ..... 62,074,918

12.2 If, yes provide explanation:  
 The Company invests in securities of real estate holding companies and REITS. In addition, the Company has a 50% investment in a joint venture which owns the corporate home office.

13. **FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:**

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 [ ]  
 a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;  
 b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;  
 c. Compliance with applicable governmental laws, rules and regulations;  
 d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and  
 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).

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America  
**GENERAL INTERROGATORIES**

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 subordinate 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 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 To directors or other officers.....	\$ ..... 0
20.12 To stockholders not officers.....	\$ ..... 0
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 To directors or other officers.....	\$ ..... 0
20.22 To stockholders not officers.....	\$ ..... 0
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 Rented from others.....	\$ ..... 0
21.22 Borrowed from others.....	\$ ..... 0
21.23 Leased from others .....	\$ ..... 0
21.24 Other .....	\$ ..... 0

22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? ..... Yes [ ] No [ X ]

22.2 If answer is yes:

22.21 Amount paid as losses or risk adjustment \$ .....	
22.22 Amount paid as expenses .....	\$ .....
22.23 Other amounts paid .....	\$ .....

23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? ..... Yes [ X ] No [ ]

23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: ..... \$ ..... 50,434

**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. .... \$ .....

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

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 ]

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America  
**GENERAL INTERROGATORIES**

24.10 For the reporting entity's security lending program state the amount of the following as 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 currently in force? (Exclude securities subject to Interrogatory 21.1 and 24.03). ....  Yes [ X ]  No [ ]

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

25.21 Subject to repurchase agreements .....	\$ .....
25.22 Subject to reverse repurchase agreements .....	\$ .....
25.23 Subject to dollar repurchase agreements .....	\$ .....
25.24 Subject to reverse dollar repurchase agreements .....	\$ .....
25.25 Placed under option agreements .....	\$ .....
25.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock .....	\$ .....
25.27 FHLB Capital Stock .....	\$ .....
25.28 On deposit with states .....	\$ ..... 3,590,444
25.29 On deposit with other regulatory bodies .....	\$ .....
25.30 Pledged as collateral - excluding collateral pledged to an FHLB .....	\$ .....
25.31 Pledged as collateral to FHLB - including assets backing funding agreements .....	\$ .....
25.32 Other .....	\$ .....

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 result 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 .....	<input type="checkbox"/> Yes [ ] <input type="checkbox"/> No [ ]
26.42 Permitted accounting practice .....	<input type="checkbox"/> Yes [ ] <input type="checkbox"/> No [ ]
26.43 Other accounting guidance .....	<input type="checkbox"/> Yes [ ] <input type="checkbox"/> 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: .....  Yes [ ]  No [ ]

- 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 Guideline 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 that 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. .... \$ .....

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
The Northern Trust Company .....	50 South LaSalle Street Chicago, IL 60603 .....

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America  
**GENERAL INTERROGATORIES**

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:

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 [ ] No [ X ]

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

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason
.....	.....	.....	.....

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
Globe Life Inc. (formerly Torchmark Corporation) .....	A.....
PRUDENTIAL PRIVATE PLACEMENT INVESTORS, LP .....	U.....
BLACKROCK INVESTMENT MANAGEMENT, LLC .....	U.....
Alliance Bernstein, LP .....	U.....

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
.....	Globe Life Inc. (formerly Torchmark Corporation) .....	.....	Not Registered .....	DS.....
106442 .....	Prudential Private Placement Investors, LP .....	.....	U.S. Securities & Exchange Commission .....	NO.....
108928 .....	Blackrock Investment Management, LLC .....	.....	U.S. Securities & Exchange Commission .....	NO.....
108477 .....	Alliance Bernstein, LP .....	0JK55UGWSINF3X7KLQ85 .....	U.S. Securities & Exchange Commission .....	NO.....

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	.....	0

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
.....	.....	.....	.....

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America  
**GENERAL INTERROGATORIES**

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 .....	1,189,940,040	1,335,978,306	146,038,266
30.2 Preferred stocks .....	0		0
30.3 Totals .....	1,189,940,040	1,335,978,306	146,038,266

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

The Company primarily used ICE and Refinitiv (which are third party vendors), and certain private placements were valued by a broker. ....

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 of each self-designated 5GI security:

- a. 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.
- b. Issuer or obligor is current on all contracted interest and principal payments.
- c. 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:

- a. The security was purchased prior to January 1, 2018.
- b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
- d. 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:

- a. The shares were purchased prior to January 1, 2019.
- 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 [ X ]

## OTHER

36.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? ..... \$ 0

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
.....	.....

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America  
**GENERAL INTERROGATORIES**

37.1 Amount of payments for legal expenses, if any? .....\$ .....87,507

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
.....	

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America  
**GENERAL INTERROGATORIES**

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

**Life, Accident and Health Companies/Fraternal 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

1.31 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	298,707,093	170,048,872
2.3 Premium Ratio (2.1/2.2)	0.000	0.000
2.4 Reserve Numerator	43,259,062	42,317,356
2.5 Reserve Denominator	1,159,172,860	1,053,952,970
2.6 Reserve Ratio (2.4/2.5)	0.037	0.040

3.1 Does this reporting entity have Separate Accounts? ..... Yes [ ] No [ X ]

3.2 If yes, has a Separate Accounts Statement been filed with this Department? ..... Yes [ ] No [ ] N/A [ X ]

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 [ ]

3.6 Has the reporting entity assumed by reinsurance any Separate Accounts business as of December 31? ..... Yes [ ] No [ ]

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	2 Statement Value on Purchase Date of Annuities (i.e., Present Value)
P&C Insurance Company And Location	

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America  
**GENERAL INTERROGATORIES**

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

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 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 [ ] N/A [ X ]

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 Premium Written ..... \$ ..... 3,749,221
7.2 Total Incurred Claims ..... \$ ..... 547,033
7.3 Number of Covered Lives ..... 13,567

*Ordinary Life Insurance Includes
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 chartered, 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 [ X ] No [ ]

9.2 Net reimbursement of such expenses between reporting entities:

9.21 Paid ..... \$ ..... 18,286,575
9.22 Received ..... \$ ..... 0

10.1 Does the reporting entity write any guaranteed interest contracts? ..... Yes [ ] No [ X ]

10.2 If yes, what amount pertaining to these lines 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: ..... \$ ..... 52,647,000

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

12.11 Cash ..... \$ ..... 299,116,999
12.12 Stock ..... \$ ..... 0

13.1 Does the reporting entity reinsurance any Workers' Compensation Carve-Out business defined as: ..... Yes [ ] No [ X ]

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			

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America  
**GENERAL INTERROGATORIES**

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

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 [ ] No [ ]

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

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

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

18.1 How often are regular meetings of the governing body held? ..... \_\_\_\_\_

18.2 When was the last regular meeting of the governing body held? ..... \_\_\_\_\_

18.3 When and where will the next regular or special meeting of the governing body be held? ..... \_\_\_\_\_

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

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

19. How are the expenses of the governing body defrayed? ..... \_\_\_\_\_

20. When and by whom are the officers and directors elected? ..... \_\_\_\_\_

21. What are the qualifications for membership? ..... \_\_\_\_\_

22. What are the limiting ages for admission? ..... \_\_\_\_\_

23. What is the minimum and maximum insurance that may be issued on any one life? ..... \_\_\_\_\_

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

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 [ ]

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

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

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

27.11 First Year ..... \_\_\_\_\_ %  
 27.12 Subsequent Years ..... \_\_\_\_\_ %

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 [ ]

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

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

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 [ ]

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 [ ] 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 [ ] No [ ]

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

32.3 If yes, explain ..... \_\_\_\_\_

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

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 [ ]

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 [ ]

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

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
.....	.....

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America

**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</b>					
(Exhibit of Life Insurance)					
1. Ordinary - whole life and endowment (Line 34, Col. 4) .....	378,010	345,761	8,970,385	7,018,717	5,744,280
2. Ordinary - term (Line 21, Col. 4, less Line 34, Col. 4) .....	6	30	4,306,355	3,481,177	1,711,808
3. Credit life (Line 21, Col. 6) .....	0	0	0	0	0
4. Group, excluding FEGLI/SGLI (Line 21, Col. 9 less Lines 43 & 44, Col. 4) .....	0	0	0	0	0
5. Industrial (Line 21, Col. 2) .....	0	0	0	0	0
6. FEGLI/SGLI (Lines 43 & 44, Col. 4) .....	0	0	0	0	0
7. Total (Line 21, Col. 10) .....	378,016	345,791	13,276,740	10,499,894	7,456,088
7.1 Total in force for which VM-20 deterministic/stochastic reserves are calculated .....	71,850			XXX	XXX
<b>New Business Issued</b>					
(Exhibit of Life Insurance)					
8. Ordinary - whole life and endowment (Line 34, Col. 2) .....	84,898	80,742	83,988	103,967	118,478
9. Ordinary - term (Line 2, Col. 4, less Line 34, Col. 2) .....	0	0	0	0	0
10. Credit life (Line 2, Col. 6) .....	0	0	0	0	0
11. Group (Line 2, Col. 9) .....	0	0	0	0	0
12. Industrial (Line 2, Col. 2) .....	0	0	0	0	0
13. Total (Line 2, Col. 10) .....	84,898	80,742	83,988	103,967	118,478
<b>Premium Income - Lines of Business</b>					
(Exhibit 1 - Part 1)					
14. Industrial life (Line 20.4, Col. 2) .....	0	0	0	0	0
15.1 Ordinary-life insurance (Line 20.4, Col. 3) .....	3,663,028	(105,526,924)	28,341,465	27,947,753	32,481,538
15.2 Ordinary-individual annuities (Line 20.4, Col. 4) .....	0	0	0	0	0
16 Credit life (group and individual) (Line 20.4, Col. 5) .....	0	0	0	0	0
17.1 Group life insurance (Line 20.4, Col. 6) .....	0	0	0	0	0
17.2 Group annuities (Line 20.4, Col. 7) .....	0	0	0	0	0
18.1 A & H-group (Line 20.4, Col. 8) .....	14,793,957	13,466,363	11,753,852	10,124,774	8,444,739
18.2 A & H-credit (group and individual) (Line 20.4, Col. 9) .....	0	0	0	0	0
18.3 A & H-other (Line 20.4, Col. 10) .....	280,250,108	262,109,433	244,171,664	226,545,997	213,213,594
19. Aggregate of all other lines of business (Line 20.4, Col. 11) .....	0	0	0	0	0
20. Total .....	298,707,093	170,048,872	284,266,981	264,618,524	254,139,871
<b>Balance Sheet (Pages 2 &amp; 3)</b>					
21. Total admitted assets excluding Separate Accounts business (Page 2, Line 26, Col. 3) .....	1,287,309,169	1,196,815,928	1,290,358,205	1,108,816,313	921,028,255
22. Total liabilities excluding Separate Accounts business (Page 3, Line 26) .....	1,177,568,344	1,071,374,095	1,190,035,284	1,004,588,622	842,709,863
23. Aggregate life reserves (Page 3, Line 1) .....	10,159,373	8,233,765	133,670,851	76,043,877	32,979,901
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) .....	1,121,544,599	1,018,522,019	918,756,792	814,110,199	716,823,489
25. Deposit-type contract funds (Page 3, Line 3) .....		0	0	0	0
26. Asset valuation reserve (Page 3, Line 24.01) .....	8,310,792	6,677,525	5,315,180	3,928,304	2,935,675
27. Capital (Page 3, Lines 29 and 30) .....	2,556,000	2,556,000	2,556,950	2,556,950	2,556,950
28. Surplus (Page 3, Line 37) .....	107,184,825	122,885,833	97,765,971	101,670,741	75,761,442
<b>Cash Flow (Page 5)</b>					
29. Net Cash from Operations (Line 11) .....	123,918,312	172,065,725	152,631,675	132,988,201	103,991,998
<b>Risk-Based Capital Analysis</b>					
30. Total adjusted capital .....	118,051,617	132,119,358	105,638,101	108,155,995	81,254,067
31. Authorized control level risk - based capital .....	10,027,392	9,008,597	7,651,746	6,689,299	5,957,862
<b>Percentage Distribution of Cash, Cash Equivalents and Invested Assets</b>					
(Page 2, Col. 3) (Line No. /Page 2, Line 12, Col. 3) x 100.0					
32. Bonds (Line 1) .....	95.5	96.2	96.9	97.5	97.6
33. Stocks (Lines 2.1 and 2.2) .....	0.0	0.0	0.0	0.0	0.0
34. Mortgage loans on real estate(Lines 3.1 and 3.2) .....	1.1	1.0	0.3	0.0	0.0
35. Real estate (Lines 4.1, 4.2 and 4.3) .....	0.0	0.0	0.0	0.1	0.0
36. Cash, cash equivalents and short-term investments (Line 5) .....	(0.3)	0.3	0.8	0.6	0.3
37. Contract loans (Line 6) .....	0.0	0.0	0.0	0.0	0.0
38. Derivatives (Page 2, Line 7) .....	0.0	0.0	0.0	0.0	0.0
39. Other invested assets (Line 8) .....	3.8	2.5	2.0	1.8	2.0
40. Receivables for securities (Line 9) .....	0.0	0.0	0.0	0.0	0.0
41. Securities lending reinvested collateral assets (Line 10) .....	0.0	0.0	0.0	0.0	0.0
42. Aggregate write-ins for invested assets (Line 11) .....	0.0	0.0	0.0	0.0	0.0
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 (Schedule D Summary, Line 12, Col. 1) .....		0	0	0	0
45. Affiliated preferred stocks (Schedule D Summary, Line 18, Col. 1) .....	0	0	0	0	0
46. Affiliated common stocks (Schedule D Summary Line 24, Col. 1), .....	0	0	0	0	0
47. Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10) .....		0	0	0	0
48. Affiliated mortgage loans on real estate .....		0	0	0	0
49. All other affiliated .....		0	0	0	0
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 .....		0	0	0	0
<b>Total Nonadmitted and Admitted Assets</b>					
52. Total nonadmitted assets (Page 2, Line 28, Col. 2) .....	57,545,132	37,670,582	31,282,107	55,824,470	44,316,943
53. Total admitted assets (Page 2, Line 28, Col. 3) .....	1,287,309,169	1,196,815,928	1,290,358,205	1,108,816,313	921,028,255
<b>Investment Data</b>					
54. Net investment income (Exhibit of Net Investment Income) .....	52,486,340	50,299,064	45,306,592	38,585,438	33,304,471
55. Realized capital gains (losses) (Page 4, Line 34, Column 1) .....	155,536	(1,029,619)	269,730	(66,528)	(71,037)
56. Unrealized capital gains (losses) (Page 4, Line 38, Column 1) .....	(62,577)	126,295	136,732	2,377	(290,656)
57. Total of above Lines 54, 55 and 56 .....	52,579,299	49,395,740	45,713,054	38,521,287	32,942,778
<b>Benefits and Reserve Increases (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 and 8) .....	718,322	668,505	697,397	664,154	664,829
59. Total contract/certificate benefits - A & H (Lines 13 & 14, Col. 6) .....	100,266,215	83,516,774	70,490,406	59,903,413	55,039,976
60. Increase in life reserves - other than group and annuities (Line 19, Col. 2) .....	1,925,608	(125,437,086)	57,626,974	43,063,976	25,788,092
61. Increase in A & H reserves (Line 19, Col. 6) .....	103,022,580	99,765,227	104,646,593	97,286,710	91,040,951
62. Dividends to policyholders and refunds to members (Line 30, Col. 1) .....	0	0	0	0	0
<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 100.0 .....	32.7	53.6	29.4	28.7	29.1
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 100.0 .....	13.7	38.2	29.1	32.9	0.9
65. A & H loss percent (Schedule H, Part 1, Lines 5 and 6, Col. 2) .....	68.8	66.1	68.1	66.4	65.8
66. A & H cost containment percent (Schedule H, Pt. 1, Line 4, Col. 2) .....	0.0	0.0	0.0	0.0	0.0
67. A & H expense percent excluding cost containment expenses (Schedule H, Pt. 1, Line 10, Col. 2) .....	34.9	35.5	35.2	34.1	35.4
<b>A &amp; H Claim Reserve Adequacy</b>					
68. Incurred losses on prior years' claims - group health (Schedule H, Part 3, Line 3.1 Col. 2) .....	638,839	560,371	541,733	439,220	365,825
69. Prior years' claim liability and reserve - group health (Schedule H, Part 3, Line 3.2 Col. 2) .....	1,394,099	1,227,594	846,852	836,390	585,663
70. Incurred losses on prior years' claims-health other than group (Schedule H, Part 3, Line 3.1 Col. 1 less Col. 2) .....	24,844,691	21,040,722	19,210,038	17,156,307	16,172,728
71. Prior years' claim liability and reserve-health other than group (Schedule H, Part 3, Line 3.2 Col. 1 less Col. 2) .....	27,103,259	24,096,979	21,124,673	19,072,409	16,431,755
<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) .....	0	0	0	0	0
73. Ordinary - life (Page 6.1, Col. 1 less Cols. 2, 10 and 12) .....	137,931	766,685	627,867	931,728	162,582
74. Ordinary - individual annuities (Page 6, Col. 4) .....	0	0	0	0	0
75. Ordinary-supplementary contracts .....	XXX	0	0	0	0
76. Credit life (Page 6.1, Col. 10 plus Page 6.2, Col. 7) .....	0	0	0	0	0
77. Group life (Page 6.2, Col. 1 Less Cols. 7 and 9) .....	0	0	0	0	0
78. Group annuities (Page 6, Col. 5) .....	0	0	0	0	0
79. A & H-group (Page 6.5, Col. 3) .....	0	1,197,857	788,340	972,525	665,563
80. A & H-credit (Page 6.5, Col. 10) .....	0	0	0	0	0
81. A & H-other (Page 6.5, Col. 1 less Cols. 3 and 10) .....	31,731,313	30,558,386	21,309,364	21,980,391	18,338,951
82. Aggregate of all other lines of business (Page 6, Col. 8) .....	0	0	0	0	0
83. Fraternal (Page 6, Col. 7) .....	0				
84. Total (Page 6, Col. 1) .....	31,869,244	32,522,928	22,725,571	23,884,644	19,167,096

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: .....

## ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America

## 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	Number of			
							7 Policies	8 Certificates		
1. In force end of prior year .....	.0	0	12,388	345,791	.0	0	0	0	345,791	
2. Issued during year .....		0	3,074	84,898		0			84,898	
3. Reinsurance assumed .....			1	75					0	
4. Revived during year .....									.75	
5. Increased during year (net) .....									0	
6. Subtotals, Lines 2 to 5 .....	0	0	3,075	84,973	0	0	0	0	84,973	
7. Additions by dividends during year .....	XXX		XXX		XXX		XXX	XXX	0	
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	15,463	430,764	0	0	0	0	430,764	
Deductions during year:										
10. Death .....			.13	.597			XXX		.597	
11. Maturity .....							XXX		0	
12. Disability .....							XXX		0	
13. Expiry .....			1	.224					.224	
14. Surrender .....			.299	.12,600					12,600	
15. Lapse .....			1,485	.36,967					.36,967	
16. Conversion .....							XXX	XXX	0	
17. Decreased (net) .....			.98	2,360					2,360	
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	1,896	.52,748	0	0	0	0	.52,748	
21. In force end of year (b) (Line 9 minus Line 20) .....	0	0	13,567	.378,016	0	0	0	0	.378,016	
22. Reinsurance ceded end of year .....	XXX		XXX	.22,040	XXX		XXX	XXX	.22,040	
23. Line 21 minus Line 22 .....	XXX	0	XXX	355,976	XXX	(a) 0	XXX	XXX	355,976	
<b>DETAILS OF WRITE-INS</b>										
0801. ....										
0802. ....										
0803. ....										
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 thru 0803 plus 0898) (Line 8 above) .....	0	0	0	0	0	0	0	0	0	
1901. ....										
1902. ....										
1903. ....										
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 thru 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 , Amount \$

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

If not, how are such expenses met?

**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	
25. Other paid-up insurance .....			68	486
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 .....	XXX		XXX	
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	1	6
34. Totals, whole life and endowment .....	3,074	84,898	13,566	378,010
35. Totals (Lines 31 to 34) .....	3,074	84,898	13,567	378,016

**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 .....	84,898		378,016	
38. Credit Life (Group and Individual) .....				
39. Group .....				
40. Totals (Lines 36 to 39) .....	84,898	0	378,016	0

**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
42. Number in force end of year if the number under 41 above is discounted 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	102,714
---	---------

**BASIS OF CALCULATION OF ORDINARY TERM INSURANCE**

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

**NONE****POLICIES WITH DISABILITY PROVISIONS**

Disability Provisions	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 .....								
49. Disability Income .....								
50. Extended Benefits .....		XXX		XXX				
51. Other .....								
52. Total .....	(a)		(a)		(a)		(a)	

(a) See the Annual Audited Financial Reports section of the annual statement for additional information.

**NONE**

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America  
**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) .....				
Deductions during year:				
6. Decreased (net) .....				
7. Reinsurance ceded .....				
8. Totals (Lines 6 and 7) .....				
9. In force end of year .....				
10. Amount on deposit .....				(a) .....
11. Income now payable .....				(a) .....
12. Amount of income payable .....	(a)	(a)	(a)	(a)

**NONE**

**ANNUITIES**

	Ordinary		Group	
	1 Immediate	2 Deferred	3 Contracts	4 Certificates
1. In force end of prior year .....				
2. Issued during year .....				
3. Reinsurance assumed .....				
4. Increased during year (net) .....				
5. Totals (Lines 1 to 4) .....				
Deductions during year:				
6. Decreased (net) .....				
7. Reinsurance ceded .....				
8. Totals (Lines 6 and 7) .....				
9. In force end of year .....				
Income now payable:				
10. Amount of income payable .....			XXX	(a)
Deferred fully paid:				
11. Account balance .....	XXX	(a)	XXX	(a)
Deferred not fully paid:				
12. Account balance .....	XXX	(a)	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 .....	17,453	14,368,617	0		.391,174	272,763,424
2. Issued during year .....	5,521	3,303,059			112,553	61,847,822
3. Reinsurance assumed .....						
4. Increased during year (net) .....		XXX		XXX		XXX
5. Totals (Lines 1 to 4) .....	22,974	XXX	0	XXX	503,727	XXX
Deductions during year:						
6. Conversions .....		XXX	XXX	XXX	XXX	XXX
7. Decreased (net) .....	2,995	XXX		XXX	63,435	XXX
8. Reinsurance ceded .....		XXX		XXX		XXX
9. Totals (Lines 6 to 8) .....	2,995	XXX	0	XXX	63,435	XXX
10. In force end of year .....	19,979	(a) 15,491,185	0	(a)	440,292	(a) 294,012,844

**DEPOSIT FUNDS AND DIVIDEND ACCUMULATIONS**

			1		2	
			Deposit Funds	Contracts	Dividend Accumulations	Contracts
1. In force end of prior year .....						
2. Issued during year .....						
3. Reinsurance assumed .....						
4. Increased during year (net) .....						
5. Totals (Lines 1 to 4) .....						
Deductions During Year:						
6. Decreased (net) .....						
7. Reinsurance ceded .....						
8. Totals (Lines 6 and 7) .....						
9. In force end of year .....						
10. Amount of account balance .....			(a)	(a)		

(a) See the Annual Audited Financial Reports section of the annual statement instructions.

**NONE**

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America  
**SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS (b)**

Allocated by States and Territories

States, Etc.	1 Active Status (a)	Life Contracts		Direct Business Only		6 Total Columns 2 through 5	7 Deposit-Type Contracts
		2 Life Insurance Premiums	3 Annuity Considerations	4 Accident and Health Insurance Premiums, Including Policy, Membership and Other Fees	5 Other Considerations		
1. Alabama	AL	39,761	0	3,004,548	0	3,044,309	0
2. Alaska	AK	0	0	44,701	0	44,701	0
3. Arizona	AZ	100,572	0	5,475,949	0	5,576,521	0
4. Arkansas	AR	215,725	0	8,817,248	0	9,032,973	0
5. California	CA	56,154	0	6,919,341	0	6,975,495	0
6. Colorado	CO	61,573	0	8,567,986	0	8,629,559	0
7. Connecticut	CT	84	0	15,181	0	15,265	0
8. Delaware	DE	1,928	0	483,988	0	485,916	0
9. District of Columbia	DC	0	0	12,770	0	12,770	0
10. Florida	FL	79,368	0	6,169,163	0	6,248,531	0
11. Georgia	GA	133,172	0	10,917,909	0	11,051,081	0
12. Hawaii	HI	1,012	0	77,722	0	78,734	0
13. Idaho	ID	3,194	0	1,351,683	0	1,354,877	0
14. Illinois	IL	98,651	0	12,943,536	0	13,042,187	0
15. Indiana	IN	21,088	0	9,618,861	0	9,639,949	0
16. Iowa	IA	35,154	0	7,229,403	0	7,264,557	0
17. Kansas	KS	78,390	0	9,852,256	0	9,930,646	0
18. Kentucky	KY	151,405	0	8,393,037	0	8,544,442	0
19. Louisiana	LA	25,105	0	6,813,900	0	6,839,005	0
20. Maine	ME	1,166	0	504,367	0	505,533	0
21. Maryland	MD	4,698	0	1,419,402	0	1,424,100	0
22. Massachusetts	MA	1,250	0	23,939	0	25,189	0
23. Michigan	MI	2,719	0	2,038,502	0	2,041,221	0
24. Minnesota	MN	38,975	0	15,510,671	0	15,549,646	0
25. Mississippi	MS	16,433	0	1,225,188	0	1,241,621	0
26. Missouri	MO	78,730	0	9,324,344	0	9,403,074	0
27. Montana	MT	14,704	0	2,899,492	0	2,914,196	0
28. Nebraska	NE	20,649	0	9,271,376	0	9,292,025	0
29. Nevada	NV	10,103	0	1,056,383	0	1,066,486	0
30. New Hampshire	NH	10,704	0	549,337	0	560,041	0
31. New Jersey	NJ	2,610	0	69,084	0	71,694	0
32. New Mexico	NM	18,251	0	1,823,113	0	1,841,364	0
33. New York	NY	0	0	0	0	0	0
34. North Carolina	NC	135,238	0	10,508,010	0	10,643,248	0
35. North Dakota	ND	5,428	0	1,613,648	0	1,619,076	0
36. Ohio	OH	85,933	0	22,115,013	0	22,200,946	0
37. Oklahoma	OK	64,784	0	4,190,339	0	4,255,123	0
38. Oregon	OR	9,921	0	1,661,137	0	1,671,058	0
39. Pennsylvania	PA	20,474	0	2,883,822	0	2,904,296	0
40. Rhode Island	RI	0	0	57,963	0	57,963	0
41. South Carolina	SC	70,803	0	3,089,458	0	3,160,261	0
42. South Dakota	SD	12,632	0	6,072,032	0	6,084,664	0
43. Tennessee	TN	144,668	0	6,170,621	0	6,315,289	0
44. Texas	TX	1,739,393	0	61,391,347	0	63,130,740	0
45. Utah	UT	2,078	0	4,237,922	0	4,240,000	0
46. Vermont	VT	3,210	0	35,071	0	38,281	0
47. Virginia	VA	106,253	0	5,438,662	0	5,544,915	0
48. Washington	WA	112,973	0	4,085,141	0	4,198,114	0
49. West Virginia	WV	73,757	0	3,669,879	0	3,743,636	0
50. Wisconsin	WI	6,423	0	5,067,874	0	5,074,297	0
51. Wyoming	WY	11,350	0	2,611,832	0	2,623,182	0
52. American Samoa	AS	0	0	0	0	0	0
53. Guam	GU	0	0	0	0	0	0
54. Puerto Rico	PR	0	0	8,157	0	8,157	0
55. U.S. Virgin Islands	VI	0	0	0	0	0	0
56. Northern Mariana Islands	MP	0	0	0	0	0	0
57. Canada	CAN	0	0	0	0	0	0
58. Aggregate Other Alien	OT	0	0	0	0	0	0
59. Subtotal	XXX	3,928,646	0	297,332,308	0	301,260,954	0
90. Reporting entity contributions for employee benefits plans	XXX					0	0
91. Dividends or refunds applied to purchase paid-up additions and annuities	XXX					0	0
92. Dividends or refunds applied to shorten endowment or premium paying period	XXX					0	0
93. Premium or annuity considerations waived under disability or other contract provisions	XXX					0	0
94. Aggregate or other amounts not allocable by State	XXX	0	0	0	0	0	0
95. Totals (Direct Business)	XXX	3,928,646	0	297,332,308	0	301,260,954	0
96. Plus reinsurance assumed	XXX	3,928,646	0	297,332,308	0	301,260,954	0
97. Totals (All Business)	XXX	3,928,646	0	297,332,308	0	301,260,954	0
98. Less reinsurance ceded	XXX	86,330	0	2,939,208	0	3,025,538	0
99. Totals (All Business) less Reinsurance Ceded	XXX	3,842,316	0	(c) 294,393,100	0	298,235,416	0
DETAILS OF WRITE-INS							
58001.	XXX						
58002.	XXX						
58003.	XXX						
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX	0	0	0	0	0	0
9401.	XXX						
9402.	XXX						
9403.	XXX						
9498. Summary of remaining write-ins for Line 94 from overflow page	XXX	0	0	0	0	0	0
9499. Totals (Lines 9401 through 9403 plus 9498)(Line 94 above)	XXX	0	0	0	0	0	0

(a) Active Status Counts:

L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 51 R - Registered - Non-domiciled RRGs..... 0  
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state..... 0 Q - Qualified - Qualified or accredited reinsurer..... 0

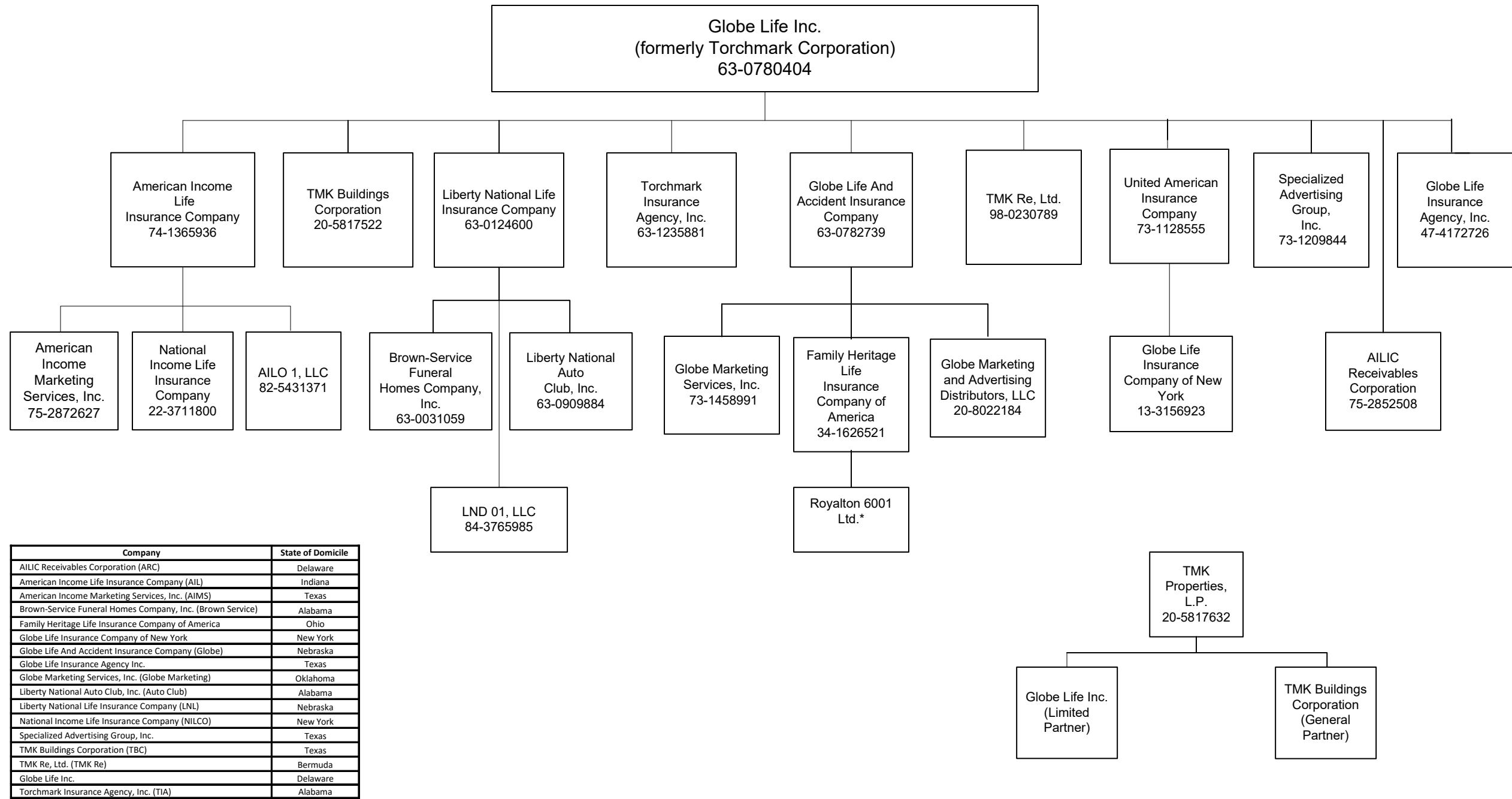
N - None of the above - Not allowed to write business in the state..... 6

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

Allocation based on residence of the policyholder

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

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America



\*Limited liability company, in which Family Heritage has a 50% interest, which leases home office property to Family Heritage; remaining 50% interest held by an unaffiliated entity.

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Family Heritage Life Insurance Company of America  
**OVERFLOW PAGE FOR WRITE-INS**

Additional Write-ins for Exhibit 2 Line 9.3

	Insurance				5 Investment	6 Fraternal	7 Total			
	1 Life	Accident and Health		4 All Other Lines of Business						
		2 Cost Containment	3 All Other							
09.304. Consultant Fees .....			160,260				.160,260			
09.305. Donations .....			81,978				81,978			
09.306. Office Services .....			50,605				50,605			
09.307. Seminars .....			29,475				29,475			
09.397. Summary of remaining write-ins for Line 9.3 from overflow page	0	0	322,318	0	0	0	322,318			

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