



ANNUAL STATEMENT

For the Year Ended December 31, 2019

of the Condition and Affairs of the

MOTORISTS LIFE INSURANCE COMPANY

NAIC Group Code.....0291, 0291 (Current Period) (Prior Period)	NAIC Company Code..... 66311	Employer's ID Number..... 31-0717055
Organized under the Laws of OH	State of Domicile or Port of Entry OH	Country of Domicile US
Licensed as Business Type: Life, Accident & Health		
Incorporated/Organized..... October 27, 1965	Commenced Business..... January 24, 1967	
Statutory Home Office	471 East Broad Street .. Columbus .. OH .. US .. 43215 (Street and Number) (City or Town, State, Country and Zip Code)	
Main Administrative Office	471 East Broad Street .. Columbus .. OH .. US .. 43215 (Street and Number) (City or Town, State, Country and Zip Code)	614-225-8211 (Area Code) (Telephone Number)
Mail Address	471 East Broad Street .. Columbus .. OH .. US .. 43215 (Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)	
Primary Location of Books and Records	471 East Broad Street .. Columbus .. OH .. US .. 43215 (Street and Number) (City or Town, State, Country and Zip Code)	614-225-8211 (Area Code) (Telephone Number)
Internet Web Site Address	encova.com	
Statutory Statement Contact	Amy E Kuhlman (Name) accounting@encova.com (E-Mail Address)	614-225-8285 (Area Code) (Telephone Number) (Extension) 614-225-8330 (Fax Number)

OFFICERS

Name	Title	Name	Title
1. Thomas Joseph Obrokta, Jr #	Chief Executive Officer	2. Marchelle Elaine Moore	Secretary
3. James Christopher Howat	Treasurer	4. Michael Joseph Agan	President

OTHER

Gregory Arthur Burton	Executive Chair
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DIRECTORS OR TRUSTEES

Michael Joseph Agan	Gregory Arthur Burton	Yvette McGee Brown	Sandra Werth Harbecht
David Lynn Kaufman	Thomas Joseph Obrokta, Jr	Charles Donovan Stapleton	Michael Lee Wiseman

State of..... Ohio
County of.... Franklin

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

(Signature) Thomas Joseph Obrokta, Jr	(Signature) Marchelle Elaine Moore	(Signature) James Christopher Howat
1. (Printed Name) Chief Executive Officer	2. (Printed Name) Secretary	3. (Printed Name) Treasurer
(Title)	(Title)	(Title)

Subscribed and sworn to before me
This 7th 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 []



DIRECT BUSINESS IN Other Alien # 1 DURING THE YEAR

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	589				589
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	589	0	0	0	589
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	142				142
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	142	0	0	0	142
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	142	0	0	0	142
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					0
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	0	0	0	0	0

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	3	63,468	(a)						3	63,468
21. Issued during year.....									0	0
22. Other changes to in force (Net).....		27,377							0	27,377
23. In force December 31 of current year.....	3	90,845	0	(a)	0	0	0	0	3	90,845

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN Other Alien # 2 DURING THE YEAR

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	1,790				1,790
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	1,790	0	0	0	1,790
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	231				231
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	231	0	0	0	231
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	231	0	0	0	231
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					0
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	0	0	0	0	0

DETAILS OF WRITE-INS

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

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

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN Other Alien # 3 DURING THE YEAR

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

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

DETAILS OF WRITE-INS

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

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

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN Other Alien # 4 DURING THE YEAR

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

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

DETAILS OF WRITE-INS

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

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

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	8,593				8,593
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	8,593	0	0	0	8,593
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					0
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	0	0	0	0	0

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	10	917,108	(a)						10	917,108
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	1	1,044							1	1,044
23. In force December 31 of current year.....	11	918,152	0	(a)	0	0	0	0	11	918,152

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	55,533				55,533
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	55,533	0	0	0	55,533
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	223				223
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	223	0	0	0	223
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	223	0	0	0	223
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	13,019				13,019
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....	18,044				18,044
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	31,063	0	0	0	31,063

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....	4	63,019							4	63,019
Settled during current year:										
18.1 By payment in full.....	3	13,019							3	13,019
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	3	13,019	0	0	0	0	0	0	3	13,019
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	3	13,019	0	0	0	0	0	0	3	13,019
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	50,000	0	0	0	0	0	0	1	50,000
POLICY EXHIBIT										
20. In force December 31, prior year.....	104	5,054,836	(a)		No. of Pol.				104	5,054,836
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	2	(124,761)	0	(a)	0	0	0	0	2	(124,761)
23. In force December 31 of current year.....	106	4,930,075	0	(a)	0	0	0	0	106	4,930,075

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	8,173				8,173
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	8,173	0	0	0	8,173
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....		2,380			2,380
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	2,380	0	0	0	2,380
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	2,380	0	0	0	2,380
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	20,324				20,324
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....		5,068			5,068
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	25,393	0	0	0	25,393

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	93							1	93
17. Incurred during current year.....	3	20,324							3	20,324
Settled during current year:										
18.1 By payment in full.....	3	20,324							3	20,324
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	3	20,324	0	0	0	0	0	0	3	20,324
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	3	20,324	0	0	0	0	0	0	3	20,324
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	93	0	0	0	0	0	0	1	93
POLICY EXHIBIT										
20. In force December 31, prior year.....	30	1,363,321	(a)						30	1,363,321
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(3)	(16,264)							(3)	(16,264)
23. In force December 31 of current year.....	27	1,347,056	0	(a)	0	0	0	0	27	1,347,056

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	71,986				71,986
2. Annuity considerations.....	6,506				6,506
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	78,492	0	0	0	78,492
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	1,654				1,654
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,654	0	0	0	1,654
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	1,654	0	0	0	1,654
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	27,276				27,276
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....	22,154				22,154
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	49,431	0	0	0	49,431

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....	6	37,276							6	37,276
Settled during current year:										
18.1 By payment in full.....	5	27,276							5	27,276
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	5	27,276	0	0	0	0	0	0	5	27,276
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	5	27,276	0	0	0	0	0	0	5	27,276
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	10,000	0	0	0	0	0	0	1	10,000
POLICY EXHIBIT										
20. In force December 31, prior year.....	147	10,088,645	(a)						147	10,088,645
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(24)	407,903							(24)	407,903
23. In force December 31 of current year.....	123	10,496,549	0	(a)	0	0	0	0	123	10,496,549

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF CALIFORNIA DURING THE YEAR

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	68,523				68,523
2. Annuity considerations.....	5,500				5,500
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	74,023	0	0	0	74,023
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	1,532				1,532
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,532	0	0	0	1,532
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	1,532	0	0	0	1,532
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	10,119				10,119
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....	3,827				3,827
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	13,946	0	0	0	13,946

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	679							1	679
17. Incurred during current year.....	2	10,119							2	10,119
Settled during current year:										
18.1 By payment in full.....	2	10,119							2	10,119
18.2 By payment on compromised claims.....								0		0
18.3 Totals paid.....	2	10,119	0	0	0	0	0	2	10,119	
18.4 Reduction by compromise.....								0		0
18.5 Amount rejected.....								0		0
18.6 Total settlements.....	2	10,119	0	0	0	0	0	2	10,119	
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	679	0	0	0	0	0	1	679	
POLICY EXHIBIT										
20. In force December 31, prior year.....	158	12,733,595	(a)		No. of Pol.				158	12,733,595
21. Issued during year.....	1	5,000,000							1	5,000,000
22. Other changes to in force (Net).....	5	178,299	0	(a)	0	0	0	5	178,299	
23. In force December 31 of current year.....	164	17,911,894	0	(a)	0	0	0	164	17,911,894	

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	50,566				50,566
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	50,566	0	0	0	50,566
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					0
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....	100,474				100,474
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	100,474	0	0	0	100,474

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	7	79,645	(a)						7	79,645
21. Issued during year.....	1	115,653							1	115,653
22. Other changes to in force (Net).....									0	0
23. In force December 31 of current year.....	8	195,298	0	(a)	0	0	0	0	8	195,298

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



DIRECT BUSINESS IN THE STATE OF COLORADO DURING THE YEAR

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	26,759				26,759
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	26,759	0	0	0	26,759
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	165				165
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	165	0	0	0	165
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	165	0	0	0	165
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	541				541
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....	87,710				87,710
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	88,251	0	0	0	88,251

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....	1	541							1	541
Settled during current year:										
18.1 By payment in full.....	1	541							1	541
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	1	541	0	0	0	0	0	0	1	541
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	1	541	0	0	0	0	0	0	1	541
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	.71	4,829,385	(a)						.71	4,829,385
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(2)	956,218							(2)	956,218
23. In force December 31 of current year.....	.69	5,785,603	0	(a)	0	0	0	0	.69	5,785,603

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	13,167				13,167
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	13,167	0	0	0	13,167
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	1,424				1,424
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,424	0	0	0	1,424
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	1,424	0	0	0	1,424
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	25,000				25,000
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....	2,735				2,735
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	27,735	0	0	0	27,735

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....	1	25,000							1	25,000
Settled during current year:										
18.1 By payment in full.....	1	25,000							1	25,000
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	1	25,000	0	0	0	0	0	0	1	25,000
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	1	25,000	0	0	0	0	0	0	1	25,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	24	1,870,955	(a)						24	1,870,955
21. Issued during year.....									0	0
22. Other changes to in force (Net).....		(52,968)							0	(52,968)
23. In force December 31 of current year.....	24	1,817,988	0	(a)	0	0	0	0	24	1,817,988

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

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

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	10	159,731	(a)						10	159,731
21. Issued during year.....									0	0
22. Other changes to in force (Net).....		2,045,000							0	2,045,000
23. In force December 31 of current year.....	10	2,204,731	0	(a)	0	0	0	0	10	2,204,731

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	16,154				16,154
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	16,154	0	0	0	16,154
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	311				311
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	311	0	0	0	311
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	311	0	0	0	311
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	25,000				25,000
10. Matured endowments.....					0
11. Annuity benefits.....	5,929				5,929
12. Surrender values and withdrawals for life contracts.....	9,740				9,740
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	40,668	0	0	0	40,668

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....	2	25,000							2	25,000
Settled during current year:										
18.1 By payment in full.....	2	25,000							2	25,000
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	2	25,000	0	0	0	0	0	0	2	25,000
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	2	25,000	0	0	0	0	0	0	2	25,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	39	2,099,500	(a)						39	2,099,500
21. Issued during year.....									0	0
22. Other changes to in force (Net).....		228,551							0	228,551
23. In force December 31 of current year.....	39	2,328,051	0	(a)	0	0	0	0	39	2,328,051

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	979,942				979,942
2. Annuity considerations.....	109,394				109,394
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	1,089,336	0	0	0	1,089,336
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	535				535
6.2 Applied to pay renewal premiums.....	16,193				16,193
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	15,823				15,823
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	32,551	0	0	0	32,551
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....	0		0		0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	32,551	0	0	0	32,551
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	563,327				563,327
10. Matured endowments.....					0
11. Annuity benefits.....	17,870				17,870
12. Surrender values and withdrawals for life contracts.....	419,242				419,242
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	1,000,439	0	0	0	1,000,439

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	21	93,035							21	93,035
17. Incurred during current year.....	86	545,124							86	545,124
Settled during current year:										
18.1 By payment in full.....	88	563,327							88	563,327
18.2 By payment on compromised claims.....								0		0
18.3 Totals paid.....	88	563,327	0	0	0	0	0	88	563,327	
18.4 Reduction by compromise.....								0		0
18.5 Amount rejected.....	2	40,000						2		40,000
18.6 Total settlements.....	90	603,327	0	0	0	0	0	90		603,327
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	17	34,831	0	0	0	0	0	17		34,831
POLICY EXHIBIT										
20. In force December 31, prior year.....	1,862	90,927,061	(a)						1,862	90,927,061
21. Issued during year.....	17	625,000						17		625,000
22. Other changes to in force (Net).....	(117)	(1,142,829)						(117)		(1,142,829)
23. In force December 31 of current year.....	1,762	90,409,233	0	(a)	0	0	0	1,762		90,409,233

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	1,008,761				1,008,761
2. Annuity considerations.....	14,100				14,100
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	1,022,861	0	0	0	1,022,861
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	153				153
6.2 Applied to pay renewal premiums.....	953				953
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	8,639				8,639
6.4 Other.....	464				464
6.5 Totals (Sum of Lines 6.1 to 6.4).....	10,210	0	0	0	10,210
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	10,210	0	0	0	10,210
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	418,202				418,202
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....	129,151				129,151
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	547,353	0	0	0	547,353

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	.17	33,036							.17	33,036
17. Incurred during current year.....	.78	503,427							.78	503,427
Settled during current year:										
18.1 By payment in full.....	.73	418,202							.73	418,202
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	.73	418,202	0	0	0	0	0	0	.73	418,202
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....	.1	3,500							.1	3,500
18.6 Total settlements.....	.74	421,702	0	0	0	0	0	0	.74	421,702
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.21	114,761	0	0	0	0	0	0	.21	114,761
POLICY EXHIBIT										
20. In force December 31, prior year.....	2,088	81,283,708	(a)						2,088	81,283,708
21. Issued during year.....	.72	2,725,000							.72	2,725,000
22. Other changes to in force (Net).....	(159)	(3,840,800)							(159)	(3,840,800)
23. In force December 31 of current year.....	2,001	80,167,909	0	(a)	0	0	0	0	2,001	80,167,909

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN GRAND TOTAL DURING THE YEAR

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	50,173,351		1,011,992		51,185,342
2. Annuity considerations.....	5,548,761				5,548,761
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	55,722,112	0	1,011,992	0	56,734,104
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	23,686				23,686
6.2 Applied to pay renewal premiums.....	163,872				163,872
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	1,119,117				1,119,117
6.4 Other.....	3,904				3,904
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,310,579	0	0	0	1,310,579
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	1,310,579	0	0	0	1,310,579
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	28,405,573		107,822		28,513,395
10. Matured endowments.....	15,000				15,000
11. Annuity benefits.....	6,319,547				6,319,547
12. Surrender values and withdrawals for life contracts.....	26,559,087				26,559,087
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....	129,774		7,839		137,614
15. Totals.....	61,428,982	0	115,661	0	61,544,643

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	742	4,605,083			1	822			743	4,605,905
17. Incurred during current year.....	2,569	28,912,423			6	107,822			2,575	29,020,245
Settled during current year:										
18.1 By payment in full.....	2,587	28,420,573			9	173,822			2,596	28,594,395
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	2,587	28,420,573	0	0	9	173,822	0	0	2,596	28,594,395
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....	32	638,450							32	638,450
18.6 Total settlements.....	2,619	29,059,023	0	0	9	173,822	0	0	2,628	29,232,845
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	692	4,458,483	0	0	(2)	(65,178)	0	0	690	4,393,305
POLICY EXHIBIT										
20. In force December 31, prior year.....	87,467	6,531,565,411	(a)	3	281,158,557				87,470	6,812,723,968
21. Issued during year.....	3,109	428,036,618							3,109	428,036,618
22. Other changes to in force (Net).....	(5,844)	(398,141,687)				(4,560,822)			(5,844)	(402,702,509)
23. In force December 31 of current year.....	84,732	6,561,460,342	0	(a) 0	3	276,597,735	0	0	84,735	6,838,058,077

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF HAWAII DURING THE YEAR

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	2,091				2,091
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	2,091	0	0	0	2,091
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					0
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	0	0	0	0	0

DETAILS OF WRITE-INS

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

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

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	69,306				69,306
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	69,306	0	0	0	69,306
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....	208				208
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	10,676				10,676
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	10,884	0	0	0	10,884
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	10,884	0	0	0	10,884
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	959		66,000		66,959
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....	5,370				5,370
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	6,329	0	66,000	0	72,329

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....	1	959			3	66,000			4	66,959
Settled during current year:										
18.1 By payment in full.....	1	959			3	66,000			4	66,959
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	1	959	0	0	3	66,000	0	0	4	66,959
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	1	959	0	0	3	66,000	0	0	4	66,959
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	88	16,822,660	(a)		No. of Pol.				88	16,822,660
21. Issued during year.....	27	5,898,100							27	5,898,100
22. Other changes to in force (Net).....	(4)	(1,244,830)							(4)	(1,244,830)
23. In force December 31 of current year.....	111	21,475,930	0	(a)	0	0	0	0	111	21,475,930

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	1,441				1,441
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	1,441	0	0	0	1,441
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	105				105
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	105	0	0	0	105
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	105	0	0	0	105
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					0
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	0	0	0	0	0

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	3	123,305	(a)						3	123,305
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	1	25,152							1	25,152
23. In force December 31 of current year.....	4	148,458	0	(a)	0	0	0	0	4	148,458

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	255,181				255,181
2. Annuity considerations.....	600				600
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	255,781	0	0	0	255,781
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	417				417
6.2 Applied to pay renewal premiums.....	367				367
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	2,775				2,775
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	3,559	0	0	0	3,559
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	3,559	0	0	0	3,559
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	124,029				124,029
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....	53,348				53,348
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	177,376	0	0	0	177,376

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	3	3,413							3	3,413
17. Incurred during current year.....	21	120,994							21	120,994
Settled during current year:										
18.1 By payment in full.....	21	124,029							21	124,029
18.2 By payment on compromised claims.....								0		0
18.3 Totals paid.....	21	124,029	0	0	0	0	0	21	124,029	
18.4 Reduction by compromise.....								0		0
18.5 Amount rejected.....								0		0
18.6 Total settlements.....	21	124,029	0	0	0	0	0	21	124,029	
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	3	378	0	0	0	0	0	3	378	
POLICY EXHIBIT										
20. In force December 31, prior year.....	583	20,462,038	(a)					583	20,462,038	
21. Issued during year.....	22	1,201,500						22	1,201,500	
22. Other changes to in force (Net).....	(43)	1,266,751						(43)	1,266,751	
23. In force December 31 of current year.....	562	22,930,288	0	(a)	0	0	0	562	22,930,288	

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	3,284,907				3,284,907
2. Annuity considerations.....	1,255,831				1,255,831
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	4,540,738	0	0	0	4,540,738
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	3,328				3,328
6.2 Applied to pay renewal premiums.....	6,100				6,100
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	42,960				42,960
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	52,388	0	0	0	52,388
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	52,388	0	0	0	52,388
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	2,379,073				2,379,073
10. Matured endowments.....	10,000				10,000
11. Annuity benefits.....	805,143				805,143
12. Surrender values and withdrawals for life contracts.....	2,435,108				2,435,108
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....	2,440				2,440
15. Totals.....	5,631,764	0	0	0	5,631,764

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	56	620,530							56	620,530
17. Incurred during current year.....	219	2,029,211							219	2,029,211
Settled during current year:										
18.1 By payment in full.....	223	2,389,073							223	2,389,073
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	223	2,389,073	0	0	0	0	0	223	2,389,073	
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	223	2,389,073	0	0	0	0	0	223	2,389,073	
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	52	260,668	0	0	0	0	0	52	260,668	
POLICY EXHIBIT										
20. In force December 31, prior year.....	6,334	473,606,428		(a)					6,334	473,606,428
21. Issued during year.....	165	27,133,989							165	27,133,989
22. Other changes to in force (Net).....	(422)	(26,046,499)							(422)	(26,046,499)
23. In force December 31 of current year.....	6,077	474,693,919	0	(a)	0	0	0	6,077	474,693,919	

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	10,853				10,853
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	10,853	0	0	0	10,853
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	49				49
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	49	0	0	0	49
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	49	0	0	0	49
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....		5,000			5,000
10. Matured endowments.....					0
11. Annuity benefits.....		38,199			38,199
12. Surrender values and withdrawals for life contracts.....		3,321			3,321
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	46,520	0	0	0	46,520

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....	1	5,000							1	5,000
Settled during current year:										
18.1 By payment in full.....	1	5,000							1	5,000
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	1	5,000	0	0	0	0	0	0	1	5,000
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	1	5,000	0	0	0	0	0	0	1	5,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	25	3,055,895	(a)						25	3,055,895
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(3)	456,646							(3)	456,646
23. In force December 31 of current year.....	22	3,512,541	0	(a)	0	0	0	0	22	3,512,541

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	3,990,254				3,990,254
2. Annuity considerations.....	461,134				461,134
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	4,451,388	0	0	0	4,451,388
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	292				292
6.2 Applied to pay renewal premiums.....	6,068				6,068
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	58,396				58,396
6.4 Other.....	259				259
6.5 Totals (Sum of Lines 6.1 to 6.4).....	65,015	0	0	0	65,015
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	65,015	0	0	0	65,015
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	3,368,904				3,368,904
10. Matured endowments.....					0
11. Annuity benefits.....	189,357				189,357
12. Surrender values and withdrawals for life contracts.....	1,135,061				1,135,061
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....	21,403				21,403
15. Totals.....	4,714,725	0	0	0	4,714,725

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	55	594,399							55	594,399
17. Incurred during current year.....	212	3,795,390							212	3,795,390
Settled during current year:										
18.1 By payment in full.....	221	3,368,904							221	3,368,904
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	221	3,368,904	0	0	0	0	0	221	3,368,904	
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....	1	5,000							1	5,000
18.6 Total settlements.....	222	3,373,904	0	0	0	0	0	222	3,373,904	
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	45	1,015,885	0	0	0	0	0	45	1,015,885	
POLICY EXHIBIT										
20. In force December 31, prior year.....	8,015	611,544,569		(a)					8,015	611,544,569
21. Issued during year.....	155	26,510,994							155	26,510,994
22. Other changes to in force (Net).....	(480)	(36,603,407)							(480)	(36,603,407)
23. In force December 31 of current year.....	7,690	601,452,156	0	(a)	0	0	0	0	7,690	601,452,156

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF LOUISIANA DURING THE YEAR

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	11,839				11,839
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	11,839	0	0	0	11,839
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	3,558				3,558
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....	138,523				138,523
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	142,081	0	0	0	142,081

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	18							1	18
17. Incurred during current year.....	1	3,558							1	3,558
Settled during current year:										
18.1 By payment in full.....	1	3,558							1	3,558
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	1	3,558	0	0	0	0	0	0	1	3,558
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	1	3,558	0	0	0	0	0	0	1	3,558
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	18	0	0	0	0	0	0	1	18
POLICY EXHIBIT										
20. In force December 31, prior year.....	27	1,226,500	(a)						27	1,226,500
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(2)	(326,005)							(2)	(326,005)
23. In force December 31 of current year.....	25	900,496	0	(a)	0	0	0	0	25	900,496

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



DIRECT BUSINESS IN THE STATE OF MASSACHUSETTS DURING THE YEAR

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	22,540				22,540
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	22,540	0	0	0	22,540
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	88				88
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	88	0	0	0	88
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	88	0	0	0	88
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					0
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	0	0	0	0	0

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	38	12,008,324	(a)						38	12,008,324
21. Issued during year.....									0	0
22. Other changes to in force (Net).....		376,065							0	376,065
23. In force December 31 of current year.....	38	12,384,389	0	(a)	0	0	0	0	38	12,384,389

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	76,865				76,865
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	76,865	0	0	0	76,865
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....	1,144				1,144
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	1,294				1,294
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	2,438	0	0	0	2,438
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	2,438	0	0	0	2,438
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	880				880
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....	17,378				17,378
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	18,257	0	0	0	18,257

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	153							1	153
17. Incurred during current year.....	3	880							3	880
Settled during current year:										
18.1 By payment in full.....	3	880							3	880
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	3	880	0	0	0	0	0	0	3	880
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	3	880	0	0	0	0	0	0	3	880
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	153	0	0	0	0	0	0	1	153
POLICY EXHIBIT										
20. In force December 31, prior year.....	131	8,488,316	(a)		No. of Pol.				131	8,488,316
21. Issued during year.....	1	100,000							1	100,000
22. Other changes to in force (Net).....	(1)	(151,536)							(1)	(151,536)
23. In force December 31 of current year.....	131	8,436,780	0	(a)	0	0	0	0	131	8,436,780

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	5,035				5,035
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	5,035	0	0	0	5,035
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	167				167
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	167	0	0	0	167
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	167	0	0	0	167
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	20,800				20,800
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	20,800	0	0	0	20,800

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....	1	20,800							1	20,800
Settled during current year:										
18.1 By payment in full.....	1	20,800							1	20,800
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	1	20,800	0	0	0	0	0	0	1	20,800
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	1	20,800	0	0	0	0	0	0	1	20,800
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	11	285,647	(a)						11	285,647
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(1)	(6,512)							(1)	(6,512)
23. In force December 31 of current year.....	10	279,134	0	(a)	0	0	0	0	10	279,134

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	4,553,592				4,553,592
2. Annuity considerations.....	33,178				33,178
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	4,586,770	0	0	0	4,586,770
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	59				59
6.2 Applied to pay renewal premiums.....	6,369				6,369
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	12,396				12,396
6.4 Other.....	30				30
6.5 Totals (Sum of Lines 6.1 to 6.4).....	18,854	0	0	0	18,854
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	18,854	0	0	0	18,854
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	2,203,620				2,203,620
10. Matured endowments.....					0
11. Annuity benefits.....	12,986				12,986
12. Surrender values and withdrawals for life contracts.....	1,159,578				1,159,578
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....	926				926
15. Totals.....	3,377,110	0	0	0	3,377,110

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	179	377,197							179	377,197
17. Incurred during current year.....	380	2,314,387							380	2,314,387
Settled during current year:										
18.1 By payment in full.....	384	2,203,620							384	2,203,620
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	384	2,203,620	0	0	0	0	0	0	384	2,203,620
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....	9	80,150							9	80,150
18.6 Total settlements.....	393	2,283,770	0	0	0	0	0	0	393	2,283,770
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	166	407,813	0	0	0	0	0	0	166	407,813
POLICY EXHIBIT										
20. In force December 31, prior year.....	8,665	255,949,106		(a)					8,665	255,949,106
21. Issued during year.....	404	21,875,155							404	21,875,155
22. Other changes to in force (Net).....	(776)	(18,180,762)							(776)	(18,180,762)
23. In force December 31 of current year.....	8,293	259,643,499	0	(a)	0	0	0	0	8,293	259,643,499

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	110,214				110,214
2. Annuity considerations.....	5,000				5,000
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	115,214	0	0	0	115,214
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	277				277
6.2 Applied to pay renewal premiums.....	255				255
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	3,672				3,672
6.4 Other.....	116				116
6.5 Totals (Sum of Lines 6.1 to 6.4).....	4,320	0	0	0	4,320
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	4,320	0	0	0	4,320
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	12,615				12,615
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....	29,366				29,366
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	41,981	0	0	0	41,981

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	2	10,130							2	10,130
17. Incurred during current year.....	3	12,615							3	12,615
Settled during current year:										
18.1 By payment in full.....	3	12,615							3	12,615
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	3	12,615	0	0	0	0	0	0	3	12,615
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....	1	10,000							1	10,000
18.6 Total settlements.....	4	22,615	0	0	0	0	0	0	4	22,615
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	130	0	0	0	0	0	0	1	130
POLICY EXHIBIT										
20. In force December 31, prior year.....	120	18,632,987	(a)						120	18,632,987
21. Issued during year.....	5	1,219,140							5	1,219,140
22. Other changes to in force (Net).....	(8)	(2,407,386)							(8)	(2,407,386)
23. In force December 31 of current year.....	117	17,444,741	0	(a)	0	0	0	0	117	17,444,741

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	40,748				40,748
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	40,748	0	0	0	40,748
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	465				465
6.4 Other.....	133				133
6.5 Totals (Sum of Lines 6.1 to 6.4).....	598	0	0	0	598
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....	0				0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	598	0	0	0	598
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	23,370				23,370
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	23,370	0	0	0	23,370

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....	6	23,370							6	23,370
Settled during current year:										
18.1 By payment in full.....	6	23,370							6	23,370
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	6	23,370	0	0	0	0	0	0	6	23,370
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	6	23,370	0	0	0	0	0	0	6	23,370
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	65	6,562,490	(a)						65	6,562,490
21. Issued during year.....	1	50,000							1	50,000
22. Other changes to in force (Net).....	4	139,192							4	139,192
23. In force December 31 of current year.....	70	6,751,682	0	(a)	0	0	0	0	70	6,751,682

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	38,755				38,755
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	38,755	0	0	0	38,755
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	196				196
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	196	0	0	0	196
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	196	0	0	0	196
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	6,266				6,266
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....	9,451				9,451
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	15,717	0	0	0	15,717

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....	5	7,818							5	7,818
Settled during current year:										
18.1 By payment in full.....	4	6,266							4	6,266
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	4	6,266	0	0	0	0	0	0	4	6,266
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	4	6,266	0	0	0	0	0	0	4	6,266
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	1,553	0	0	0	0	0	0	1	1,553
POLICY EXHIBIT										
20. In force December 31, prior year.....	107	4,942,300	(a)						107	4,942,300
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(8)	(45,213)							(8)	(45,213)
23. In force December 31 of current year.....	99	4,897,087	0	(a)	0	0	0	0	99	4,897,087

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	6,845				6,845
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	6,845	0	0	0	6,845
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					0
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	0	0	0	0	0

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	8	1,205,852	(a)						8	1,205,852
21. Issued during year.....									0	0
22. Other changes to in force (Net).....		4,282							0	4,282
23. In force December 31 of current year.....	8	1,210,134	0	(a)	0	0	0	0	8	1,210,134

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



DIRECT BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	150,231				150,231
2. Annuity considerations.....	4,159				4,159
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	154,390	0	0	0	154,390
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	2,530				2,530
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	2,530	0	0	0	2,530
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	2,530	0	0	0	2,530
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	76,865				76,865
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....	151,969				151,969
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....	679				679
15. Totals.....	229,513	0	0	0	229,513

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	5,000							1	5,000
17. Incurred during current year.....	7	121,865							7	121,865
Settled during current year:										
18.1 By payment in full.....	7	76,865							7	76,865
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	7	76,865	0	0	0	0	0	0	7	76,865
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	7	76,865	0	0	0	0	0	0	7	76,865
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	50,000	0	0	0	0	0	0	1	50,000
POLICY EXHIBIT										
20. In force December 31, prior year.....	288	26,333,092	(a)						288	26,333,092
21. Issued during year.....	1	90,000							1	90,000
22. Other changes to in force (Net).....	22	1,821,750							22	1,821,750
23. In force December 31 of current year.....	311	28,244,842	0	(a)	0	0	0	0	311	28,244,842

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN THE STATE OF NORTH DAKOTA DURING THE YEAR

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	4,905				4,905
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	4,905	0	0	0	4,905
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					0
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	0	0	0	0	0

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	8	672,487	(a)						8	672,487
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(1)	(19,270)							(1)	(19,270)
23. In force December 31 of current year.....	7	653,217	0	(a)	0	0	0	0	7	653,217

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	23,746				23,746
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	23,746	0	0	0	23,746
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	28				28
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	28	0	0	0	28
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	28	0	0	0	28
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					0
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	0	0	0	0	0

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	46	6,941,598	(a)						46	6,941,598
21. Issued during year.....	5	1,710,000							5	1,710,000
22. Other changes to in force (Net).....	(5)	(213,619)							(5)	(213,619)
23. In force December 31 of current year.....	46	8,437,978	0	(a)	0	0	0	0	46	8,437,978

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	12,226				12,226
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	12,226	0	0	0	12,226
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					0
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	0	0	0	0	0

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	16	1,390,000	(a)						16	1,390,000
21. Issued during year.....	1	25,000							1	25,000
22. Other changes to in force (Net).....		(85,000)							0	(85,000)
23. In force December 31 of current year.....	17	1,330,000	0	(a)	0	0	0	0	17	1,330,000

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	45,065				45,065
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	45,065	0	0	0	45,065
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	4,113				4,113
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	4,113	0	0	0	4,113
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	4,113	0	0	0	4,113
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	35,000				35,000
10. Matured endowments.....					0
11. Annuity benefits.....	7,368				7,368
12. Surrender values and withdrawals for life contracts.....	831				831
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....	556				556
15. Totals.....	43,755	0	0	0	43,755

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....	2	35,000							2	35,000
Settled during current year:										
18.1 By payment in full.....	2	35,000							2	35,000
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	2	35,000	0	0	0	0	0	0	2	35,000
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	2	35,000	0	0	0	0	0	0	2	35,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	80	4,753,515	(a)						80	4,753,515
21. Issued during year.....	2	500,000							2	500,000
22. Other changes to in force (Net).....	(6)	(1,755,471)							(6)	(1,755,471)
23. In force December 31 of current year.....	76	3,498,044	0	(a)	0	0	0	0	76	3,498,044

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	13,287				13,287
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	13,287	0	0	0	13,287
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	56				56
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	56	0	0	0	56
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	56	0	0	0	56
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	28,000				28,000
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....	5,000				5,000
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	33,000	0	0	0	33,000

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	2	25,000							2	25,000
17. Incurred during current year.....	1	3,000							1	3,000
Settled during current year:										
18.1 By payment in full.....	3	28,000							3	28,000
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	3	28,000	0	0	0	0	0	0	3	28,000
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	3	28,000	0	0	0	0	0	0	3	28,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	34	2,478,243	(a)		No. of Pol.				34	2,478,243
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(1)	(22,111)							(1)	(22,111)
23. In force December 31 of current year.....	33	2,456,133	0	(a)	0	0	0	0	33	2,456,133

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



* 6 6 3 1 1 2 0 1 9 4 3 0 2 9 1 0 0 *

DIRECT BUSINESS IN THE STATE OF NEVADA DURING THE YEAR

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	26,757				26,757
2. Annuity considerations.....	25,000				25,000
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	51,757	0	0	0	51,757
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	236				236
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	334				334
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	570	0	0	0	570
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	570	0	0	0	570
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	5,000				5,000
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....	10,859				10,859
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....	953				953
15. Totals.....	16,811	0	0	0	16,811

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....	2	15,000							2	15,000
Settled during current year:										
18.1 By payment in full.....	1	5,000							1	5,000
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	1	5,000	0	0	0	0	0	0	1	5,000
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	1	5,000	0	0	0	0	0	0	1	5,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	10,000	0	0	0	0	0	0	1	10,000
POLICY EXHIBIT										
20. In force December 31, prior year.....	51	1,843,849	(a)						51	1,843,849
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(2)	80,238							(2)	80,238
23. In force December 31 of current year.....	49	1,924,087	0	(a)	0	0	0	0	49	1,924,087

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	67,767				67,767
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	67,767	0	0	0	67,767
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....	384				384
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	1,441				1,441
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,825	0	0	0	1,825
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	1,825	0	0	0	1,825
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	25,636				25,636
10. Matured endowments.....					0
11. Annuity benefits.....	5,624				5,624
12. Surrender values and withdrawals for life contracts.....	2,219				2,219
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	33,480	0	0	0	33,480

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....	3	30,636							3	30,636
Settled during current year:										
18.1 By payment in full.....	2	25,636							2	25,636
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	2	25,636	0	0	0	0	0	0	2	25,636
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	2	25,636	0	0	0	0	0	0	2	25,636
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	5,000	0	0	0	0	0	0	1	5,000
POLICY EXHIBIT										
20. In force December 31, prior year.....	131	11,330,916	(a)						131	11,330,916
21. Issued during year.....	4	1,223,604							4	1,223,604
22. Other changes to in force (Net).....		1,038,071							0	1,038,071
23. In force December 31 of current year.....	135	13,592,591	0	(a)	0	0	0	0	135	13,592,591

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



DIRECT BUSINESS IN THE STATE OF OHIO DURING THE YEAR

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	20,708,185			1,011,992	21,720,176
2. Annuity considerations.....	2,309,750				2,309,750
3. Deposit-type contract funds.....		XXX			0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	23,017,934	0	1,011,992	0	24,029,926
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	7,680				7,680
6.2 Applied to pay renewal premiums.....	72,807				72,807
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	529,634				529,634
6.4 Other.....	689				689
6.5 Totals (Sum of Lines 6.1 to 6.4).....	610,811	0	0	0	610,811
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	610,811	0	0	0	610,811
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	12,933,438			16,000	12,949,438
10. Matured endowments.....	5,000				5,000
11. Annuity benefits.....	3,317,077				3,317,077
12. Surrender values and withdrawals for life contracts.....	13,946,772				13,946,772
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....	43,332		7,839		51,172
15. Totals.....	30,245,619	0	23,839	0	30,269,458

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	203	1,946,830							203	1,946,830
17. Incurred during current year.....	876	12,854,211			1	16,000			877	12,870,211
Settled during current year:										
18.1 By payment in full.....	883	12,938,438			1	16,000			884	12,954,438
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	883	12,938,438	0	0	1	16,000	0	0	884	12,954,438
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....	9	332,550							9	332,550
18.6 Total settlements.....	892	13,270,988	0	0	1	16,000	0	0	893	13,286,988
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	187	1,530,053	0	0	0	0	0	0	187	1,530,053
POLICY EXHIBIT										
20. In force December 31, prior year.....	32,743	3,135,257,238	(a)		3	281,158,557			32,746	3,416,415,795
21. Issued during year.....	1,075	180,689,855							1,075	180,689,855
22. Other changes to in force (Net).....	(2,194)	(195,759,545)				(4,560,822)			(2,194)	(200,320,367)
23. In force December 31 of current year.....	31,624	3,120,187,548	0	(a)	0	276,597,735	0	0	31,627	3,396,785,283

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	22,157				22,157
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	22,157	0	0	0	22,157
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	197				197
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	197	0	0	0	197
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	197	0	0	0	197
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					0
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....	13,953				13,953
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	13,953	0	0	0	13,953

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	525							1	525
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	525	0	0	0	0	0	0	1	525
POLICY EXHIBIT										
20. In force December 31, prior year.....	32	4,862,888	(a)						32	4,862,888
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(1)	(665,128)							(1)	(665,128)
23. In force December 31 of current year.....	31	4,197,760	0	(a)	0	0	0	0	31	4,197,760

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	10,006				10,006
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	10,006	0	0	0	10,006
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	81				81
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	304				304
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	385	0	0	0	385
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	385	0	0	0	385
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					0
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	0	0	0	0	0

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	25	1,519,430	(a)						25	1,519,430
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(1)	308,331							(1)	308,331
23. In force December 31 of current year.....	24	1,827,760	0	(a)	0	0	0	0	24	1,827,760

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN OTHER ALIEN GRAND TOTAL DURING THE YEAR

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	2,379				2,379
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	2,379	0	0	0	2,379
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	373				373
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	373	0	0	0	373
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	373	0	0	0	373
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					0
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	0	0	0	0	0

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	8	363,468	(a)						8	363,468
21. Issued during year.....									0	0
22. Other changes to in force (Net).....		27,377							0	27,377
23. In force December 31 of current year.....	8	390,845	0	(a)	0	0	0	0	8	390,845

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	7,704,610				7,704,610
2. Annuity considerations.....	1,162,677				1,162,677
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	8,867,287	0	0	0	8,867,287
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	9,421				9,421
6.2 Applied to pay renewal premiums.....	42,663				42,663
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	290,725				290,725
6.4 Other.....	1,362				1,362
6.5 Totals (Sum of Lines 6.1 to 6.4).....	344,171	0	0	0	344,171
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	344,171	0	0	0	344,171
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	2,939,014				2,939,014
10. Matured endowments.....					0
11. Annuity benefits.....	1,206,553				1,206,553
12. Surrender values and withdrawals for life contracts.....	4,906,097				4,906,097
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....	28,526				28,526
15. Totals.....	9,080,190	0	0	0	9,080,190

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	.78	526,741							.78	526,741
17. Incurred during current year.....	.290	2,871,954							.290	2,871,954
Settled during current year:										
18.1 By payment in full.....	.285	2,939,014							.285	2,939,014
18.2 By payment on compromised claims.....	.285	2,939,014							0	0
18.3 Totals paid.....	.285	2,939,014	0	0	0	0	0	0	.285	2,939,014
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....	.4	23,750							4	23,750
18.6 Total settlements.....	.289	2,962,764	0	0	0	0	0	0	.289	2,962,764
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.79	435,931	0	0	0	0	0	0	.79	435,931
POLICY EXHIBIT										
20. In force December 31, prior year.....	14,024	982,625,291		(a)					.14,024	982,625,291
21. Issued during year.....	.581	76,799,016							.581	76,799,016
22. Other changes to in force (Net).....	(832)	(58,340,993)							(832)	(58,340,993)
23. In force December 31 of current year.....	13,773	1,001,083,313	0	(a)	0	0	0	0	13,773	1,001,083,313

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



DIRECT BUSINESS IN PUERTO RICO DURING THE YEAR

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	1,069				1,069
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	1,069	0	0	0	1,069
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					0
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	0	0	0	0	0

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	41							1	41
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	41	0	0	0	0	0	0	1	41
POLICY EXHIBIT										
20. In force December 31, prior year.....	5	32,818	(a)		No. of Pol.				5	32,818
21. Issued during year.....									0	0
22. Other changes to in force (Net).....									0	0
23. In force December 31 of current year.....	5	32,818	0 (a)	0	0	0	0	0	5	32,818

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

DIRECT BUSINESS IN THE STATE OF **RHODE ISLAND** DURING THE YEAR

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	.....885				.....885
2. Annuity considerations.....					.....0
3. Deposit-type contract funds.....		.....XXX		.....XXX	.....0
4. Other considerations.....					.....0
5. Totals (Sum of Lines 1 to 4).....	.....885	.....0	.....0	.....0	.....885
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					.....0
6.2 Applied to pay renewal premiums.....					.....0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					.....0
6.4 Other.....					.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	.....0	.....0	.....0	.....0	.....0
Annuities:					
7.1 Paid in cash or left on deposit.....					.....0
7.2 Applied to provide paid-up annuities.....					.....0
7.3 Other.....					.....0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.....0	.....0	.....0	.....0	.....0
8. Grand Totals (Lines 6.5 + 7.4).....	.....0	.....0	.....0	.....0	.....0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					.....0
10. Matured endowments.....					.....0
11. Annuity benefits.....					.....0
12. Surrender values and withdrawals for life contracts.....					.....0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	.....0	.....0	.....0	.....0	.....0
14. All other benefits, except accident and health.....					.....0
15. Totals.....	.....0	.....0	.....0	.....0	.....0

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									.....0	.....0
17. Incurred during current year.....									.....0	.....0
Settled during current year:										
18.1 By payment in full.....									.....0	.....0
18.2 By payment on compromised claims.....									.....0	.....0
18.3 Totals paid.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.4 Reduction by compromise.....									.....0	.....0
18.5 Amount rejected.....									.....0	.....0
18.6 Total settlements.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
POLICY EXHIBIT										
20. In force December 31, prior year.....	.....2	.....47,900		(a)					.....2	.....47,900
21. Issued during year.....									.....0	.....0
22. Other changes to in force (Net).....									.....0	.....0
23. In force December 31 of current year.....	.....2	.....47,900	.....0	(a)	.....0	.....0	.....0	.....0	.....2	.....47,900

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	571,260				571,260
2. Annuity considerations.....	56,751				56,751
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	628,011	0	0	0	628,011
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	250				250
6.2 Applied to pay renewal premiums.....	2,843				2,843
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	8,735				8,735
6.4 Other.....	18				18
6.5 Totals (Sum of Lines 6.1 to 6.4).....	11,847	0	0	0	11,847
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	11,847	0	0	0	11,847
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	444,977				444,977
10. Matured endowments.....					0
11. Annuity benefits.....	7,946				7,946
12. Surrender values and withdrawals for life contracts.....	183,724				183,724
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....	5,202				5,202
15. Totals.....	641,849	0	0	0	641,849

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	14	42,798							14	42,798
17. Incurred during current year.....	46	612,308							46	612,308
Settled during current year:										
18.1 By payment in full.....	44	444,977							44	444,977
18.2 By payment on compromised claims.....								0		0
18.3 Totals paid.....	44	444,977	0	0	0	0	0	44	444,977	
18.4 Reduction by compromise.....								0		0
18.5 Amount rejected.....	2	103,500						2		103,500
18.6 Total settlements.....	46	548,477	0	0	0	0	0	46	548,477	
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	14	106,629	0	0	0	0	0	14		106,629
POLICY EXHIBIT										
20. In force December 31, prior year.....	1,317	67,831,144	(a)					1,317	67,831,144	
21. Issued during year.....	37	3,203,097						37	3,203,097	
22. Other changes to in force (Net).....	(112)	(18,416,558)						(112)	(18,416,558)	
23. In force December 31 of current year.....	1,242	52,617,683	0	(a)	0	0	0	1,242	52,617,683	

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	3,319				3,319
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	3,319	0	0	0	3,319
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....				822	822
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	0	0	822	0	822

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....					1	822			1	822
17. Incurred during current year.....					1	822			1	822
Settled during current year:										
18.1 By payment in full.....					.4	.66,822			.4	.66,822
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	.4	.66,822	0	0	4	.66,822
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	.4	.66,822	0	0	4	.66,822
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	(2)	(65,178)	0	0	(2)	(65,178)
POLICY EXHIBIT										
20. In force December 31, prior year.....	6	175,767	(a)		No. of Pol.				6	175,767
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	3	507,412							3	507,412
23. In force December 31 of current year.....	9	683,178	0	(a)	0	0	0	0	9	683,178

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	1,411,341				1,411,341
2. Annuity considerations.....	1,200				1,200
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	1,412,541	0	0	0	1,412,541
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	35				35
6.2 Applied to pay renewal premiums.....	342				342
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	8,127				8,127
6.4 Other.....	687				687
6.5 Totals (Sum of Lines 6.1 to 6.4).....	9,191	0	0	0	9,191
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....	0				0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	9,191	0	0	0	9,191
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	1,237,065		25,000		1,262,065
10. Matured endowments.....					0
11. Annuity benefits.....	3,708				3,708
12. Surrender values and withdrawals for life contracts.....	130,946				130,946
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....	10,065				10,065
15. Totals.....	1,381,784	0	25,000	0	1,406,784

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	60	173,150							60	173,150
17. Incurred during current year.....	159	1,186,428			1	.25,000			160	1,211,428
Settled during current year:										
18.1 By payment in full.....	170	1,237,065			1	.25,000			171	1,262,065
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	170	1,237,065	0	0	1	.25,000	0		171	1,262,065
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....	2	.25,000							2	.25,000
18.6 Total settlements.....	172	1,262,065	0	0	1	.25,000	0		173	1,287,065
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	47	.97,513	0	0	0	0	0		47	.97,513
POLICY EXHIBIT										
20. In force December 31, prior year.....	3,163	108,707,089		(a)					3,163	108,707,089
21. Issued during year.....	163	6,072,856							163	6,072,856
22. Other changes to in force (Net).....	(289)	(7,164,903)							(289)	(7,164,903)
23. In force December 31 of current year.....	3,037	107,615,043	0	(a)	0	0	0	0	3,037	107,615,043

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	101,601				101,601
2. Annuity considerations.....	7,900				7,900
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	109,501	0	0	0	109,501
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	2,619				2,619
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	2,619	0	0	0	2,619
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	2,619	0	0	0	2,619
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	5,714				5,714
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....	79,938				79,938
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....	197				197
15. Totals.....	85,850	0	0	0	85,850

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	4	2,266							4	2,266
17. Incurred during current year.....	6	25,714							6	25,714
Settled during current year:										
18.1 By payment in full.....	4	5,714							4	5,714
18.2 By payment on compromised claims.....								0		0
18.3 Totals paid.....	4	5,714	0	0	0	0	0	4		5,714
18.4 Reduction by compromise.....								0		0
18.5 Amount rejected.....								0		0
18.6 Total settlements.....	4	5,714	0	0	0	0	0	4		5,714
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	6	22,266	0	0	0	0	0	6		22,266
POLICY EXHIBIT										
20. In force December 31, prior year.....	223	17,017,510	(a)						223	17,017,510
21. Issued during year.....	4	235,000						4		235,000
22. Other changes to in force (Net).....	16	1,091,736						16		1,091,736
23. In force December 31 of current year.....	243	18,344,246	0	(a)	0	0	0	243		18,344,246

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	4,335				4,335
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	4,335	0	0	0	4,335
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					0
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....	6,023				6,023
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	6,023	0	0	0	6,023

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	9	834,015	(a)						9	834,015
21. Issued during year.....									0	0
22. Other changes to in force (Net).....		(5,946)							0	(5,946)
23. In force December 31 of current year.....	9	828,070	0	(a)	0	0	0	0	9	828,070

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	506,255				506,255
2. Annuity considerations.....	30,710				30,710
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	536,964	0	0	0	536,964
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	145				145
6.2 Applied to pay renewal premiums.....	812				812
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	5,151				5,151
6.4 Other.....	45				45
6.5 Totals (Sum of Lines 6.1 to 6.4).....	6,153	0	0	0	6,153
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	6,153	0	0	0	6,153
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	315,587				315,587
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....	57,011				57,011
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....	2,921				2,921
15. Totals.....	375,519	0	0	0	375,519

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	3	7,326							3	7,326
17. Incurred during current year.....	23	494,972							23	494,972
Settled during current year:										
18.1 By payment in full.....	22	315,587							22	315,587
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	22	315,587	0	0	0	0	0	0	22	315,587
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	22	315,587	0	0	0	0	0	0	22	315,587
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	4	186,712	0	0	0	0	0	0	4	186,712
POLICY EXHIBIT										
20. In force December 31, prior year.....	850	43,481,693	(a)		No. of Pol.				850	43,481,693
21. Issued during year.....	50	2,601,388							50	2,601,388
22. Other changes to in force (Net).....	(37)	(3,759,613)							(37)	(3,759,613)
23. In force December 31 of current year.....	863	42,323,468	0	(a)	0	0	0	0	863	42,323,468

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	407				407
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	407	0	0	0	407
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					0
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	0	0	0	0	0

DETAILS OF WRITE-INS

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

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

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

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

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....									0	0
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20. In force December 31, prior year.....	5	192,200	(a)						5	192,200
21. Issued during year.....									0	0
22. Other changes to in force (Net).....		(14,800)							0	(14,800)
23. In force December 31 of current year.....	5	177,400	0	(a)	0	0	0	0	5	177,400

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	20,362				20,362
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	20,362	0	0	0	20,362
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....	429				429
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	627				627
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,056	0	0	0	1,056
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	1,056	0	0	0	1,056
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					0
10. Matured endowments.....					0
11. Annuity benefits.....	4,845				4,845
12. Surrender values and withdrawals for life contracts.....	23,502				23,502
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	28,347	0	0	0	28,347

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	2,674							1	2,674
17. Incurred during current year.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	2,674	0	0	0	0	0	0	1	2,674
POLICY EXHIBIT										
20. In force December 31, prior year.....	44	3,257,951	(a)		No. of Pol.				44	3,257,951
21. Issued during year.....									0	0
22. Other changes to in force (Net).....	(1)	717,924	0	(a)	0	0	0	0	(1)	717,924
23. In force December 31 of current year.....	43	3,975,875	0	(a)	0	0	0	0	43	3,975,875

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	1,612,667				1,612,667
2. Annuity considerations.....	37,588				37,588
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	1,650,255	0	0	0	1,650,255
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	778				778
6.2 Applied to pay renewal premiums.....	2,421				2,421
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	30,189				30,189
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	33,389	0	0	0	33,389
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	33,389	0	0	0	33,389
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	299,144				299,144
10. Matured endowments.....					0
11. Annuity benefits.....	160,932				160,932
12. Surrender values and withdrawals for life contracts.....	261,647				261,647
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....	765				765
15. Totals.....	722,488	0	0	0	722,488

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	12	31,847							12	31,847
17. Incurred during current year.....	30	323,532							30	323,532
Settled during current year:										
18.1 By payment in full.....	28	299,144							28	299,144
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	28	299,144	0	0	0	0	0	28	299,144	
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....	1	15,000						1	15,000	
18.6 Total settlements.....	29	314,144	0	0	0	0	0	29	314,144	
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	13	41,235	0	0	0	0	0	13	41,235	
POLICY EXHIBIT										
20. In force December 31, prior year.....	2,168	193,837,815	(a)						2,168	193,837,815
21. Issued during year.....	118	21,673,588							118	21,673,588
22. Other changes to in force (Net).....	(121)	(10,051,383)							(121)	(10,051,383)
23. In force December 31 of current year.....	2,165	205,460,021	0	(a)	0	0	0	0	2,165	205,460,021

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	2,353,499				2,353,499
2. Annuity considerations.....	21,784				21,784
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	2,375,283	0	0	0	2,375,283
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....	1,135				1,135
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	70,921				70,921
6.4 Other.....	99				99
6.5 Totals (Sum of Lines 6.1 to 6.4).....	72,155	0	0	0	72,155
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	72,155	0	0	0	72,155
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	808,250				808,250
10. Matured endowments.....					0
11. Annuity benefits.....	536,010				536,010
12. Surrender values and withdrawals for life contracts.....	993,949				993,949
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....	11,809				11,809
15. Totals.....	2,350,018	0	0	0	2,350,018

DETAILS OF WRITE-INS

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

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	25	108,203							25	108,203
17. Incurred during current year.....	88	772,990							88	772,990
Settled during current year:										
18.1 By payment in full.....	89	808,250							89	808,250
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	89	808,250	0	0	0	0	0	0	89	808,250
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	89	808,250	0	0	0	0	0	0	89	808,250
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	24	72,943	0	0	0	0	0	0	24	72,943
POLICY EXHIBIT										
20. In force December 31, prior year.....	3,406	268,395,586	(a)						3,406	268,395,586
21. Issued during year.....	197	40,758,682							197	40,758,682
22. Other changes to in force (Net).....	(242)	(23,355,516)							(242)	(23,355,516)
23. In force December 31 of current year.....	3,361	285,798,752	0	(a)	0	0	0	0	3,361	285,798,752

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

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

NAIC Group Code.....0291

NAIC Company Code.....66311

LIFE INSURANCE

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	2,781				2,781
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	2,781	0	0	0	2,781
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....					0
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	0	0	0	0	0

DETAILS OF WRITE-INS

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

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

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE

MOTORISTS LIFE INSURANCE COMPANY
FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

Interest Maintenance Reserve

	1 Amount
1. Reserve as of December 31, prior year.....	3,692,401
2. Current year's realized pre-tax capital gains/(losses) of \$....1,236,868 transferred into the reserve net of taxes of \$....259,742.....	977,126
3. Adjustment for current year's liability gains/(losses) released from the reserve.....	0
4. Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3).....	4,669,527
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4).....	454,643
6. Reserve as of December 31, current year (Line 4 minus Line 5).....	4,214,883

Amortization

Year of Amortization	1 Reserve as of December 31, Prior Year	2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3 Adjustment for Current Year's Liability Gains/(Losses) Released from the Reserve	4 Balance Before Reduction for the Current Year's Amortization (Cols. 1 + 2 + 3)
1. 2019.....	97,597	357,047		454,643
2. 2020.....	31,125	157,668		188,793
3. 2021.....	(24,237)	120,296		96,059
4. 2022.....	(25,787)	105,669		79,882
5. 2023.....	(3,994)	90,985		86,990
6. 2024.....	25,186	76,404		101,591
7. 2025.....	65,862	60,800		126,662
8. 2026.....	131,486	47,380		178,866
9. 2027.....	175,840	32,661		208,500
10. 2028.....	215,882	17,581		233,464
11. 2029.....	237,075	1,182		238,256
12. 2030.....	236,563	(6,473)		230,090
13. 2031.....	228,797	(6,408)		222,389
14. 2032.....	216,699	(6,256)		210,443
15. 2033.....	215,421	(5,957)		209,464
16. 2034.....	217,082	(5,931)		211,151
17. 2035.....	207,234	(6,001)		201,232
18. 2036.....	201,957	(6,588)		195,369
19. 2037.....	196,354	(7,346)		189,008
20. 2038.....	191,869	(7,977)		183,892
21. 2039.....	183,983	(8,586)		175,397
22. 2040.....	165,427	(8,021)		157,406
23. 2041.....	142,442	(6,536)		135,906
24. 2042.....	112,842	(4,605)		108,237
25. 2043.....	94,024	(2,822)		91,201
26. 2044.....	70,648	(1,040)		69,608
27. 2045.....	42,911			42,911
28. 2046.....	31,342			31,342
29. 2047.....	10,773			10,773
30. 2048.....				0
31. 2049 and Later.....				0
32. Total (Lines 1 to 31).....	3,692,401	977,126	0	4,669,527

ASSET VALUATION RESERVE

	Default Component			Equity Component			7 Total Amount (Cols. 3 + 6)
	1 Other Than Mortgage Loans	2 Mortgage Loans	3 Total (Cols. 1 + 2)	4 Common Stock	5 Real Estate and Other Invested Assets	6 Total (Cols. 4 + 5)	
1. Reserve as of December 31, prior year.....	2,404,117		2,404,117	1,636,939		1,636,939	4,041,056
2. Realized capital gains/(losses) net of taxes - General Account.....	(24,955)		(24,955)	6,032,181		6,032,181	6,007,226
3. Realized capital gains/(losses) net of taxes - Separate Accounts.....			.0			.0	.0
4. Unrealized capital gains/(losses) - net of deferred taxes - General Account.....			.0	(6,243,705)		(6,243,705)	(6,243,705)
5. Unrealized capital gains/(losses) - net of deferred taxes - Separate Accounts.....			.0			.0	.0
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves.....			.0			.0	.0
7. Basic contribution.....	530,977		530,977			.0	530,977
8. Accumulated balances (Lines 1 through 5, minus 6 plus 7).....	2,910,139	.0	2,910,139	1,425,415	.0	1,425,415	4,335,554
9. Maximum reserve.....	2,691,296		2,691,296			.0	2,691,296
10. Reserve objective.....	1,533,812		1,533,812			.0	1,533,812
11. 20% of (Line 10 minus Line 8).....	(275,265)	.0	(275,265)	(285,083)	.0	(285,083)	(560,348)
12. Balance before transfers (Lines 8 + 11).....	2,634,874	.0	2,634,874	1,140,332	.0	1,140,332	3,775,206
13. Transfers.....			.0			.0	.0
14. Voluntary contribution.....			.0			.0	.0
15. Adjustment down to maximum/up to zero.....			.0	(1,140,333)		(1,140,333)	(1,140,333)
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15).....	2,634,874	.0	2,634,874	(0)	.0	(0)	2,634,873

ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
LONG-TERM BONDS												
1		Exempt obligations.....	18,804,364	XXX.....	XXX.....	18,804,364	0.0000	0	0.0000	0	0.0000	
2	1	Highest quality.....	432,561,012	XXX.....	XXX.....	432,561,012	0.0005	216,281	0.0016	692,098	0.0033	
3	2	High quality.....	41,897,134	XXX.....	XXX.....	41,897,134	0.0021	87,984	0.0064	268,142	0.0106	
4	3	Medium quality.....	13,892,302	XXX.....	XXX.....	13,892,302	0.0099	137,534	0.0263	365,368	0.0376	
5	4	Low quality.....	3,639,953	XXX.....	XXX.....	3,639,953	0.0245	89,179	0.0572	208,205	0.0817	
6	5	Lower quality.....		XXX.....	XXX.....	0	0.0630	0	0.1128	0	0.1880	
7	6	In or near default.....		XXX.....	XXX.....	0	0.0000	0	0.2370	0	0.2370	
8		Total unrated multi-class securities acquired by conversion.....		XXX.....	XXX.....	0	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	
9		Total long-term bonds (sum of Lines 1 through 8).....	510,794,765	XXX.....	XXX.....	510,794,765	XXX.....	530,977	XXX.....	1,533,812	XXX.....	
PREFERRED STOCKS												
10	1	Highest quality.....		XXX.....	XXX.....	0	0.0005	0	0.0016	0	0.0033	
11	2	High quality.....		XXX.....	XXX.....	0	0.0021	0	0.0064	0	0.0106	
12	3	Medium quality.....		XXX.....	XXX.....	0	0.0099	0	0.0263	0	0.0376	
13	4	Low quality.....		XXX.....	XXX.....	0	0.0245	0	0.0572	0	0.0817	
14	5	Lower quality.....		XXX.....	XXX.....	0	0.0630	0	0.1128	0	0.1880	
15	6	In or near default.....		XXX.....	XXX.....	0	0.0000	0	0.2370	0	0.2370	
16		Affiliated life with AVR.....		XXX.....	XXX.....	0	0.0000	0	0.0000	0	0.0000	
17		Total preferred stocks (sum of Lines 10 through 16).....	0	XXX.....	XXX.....	0	XXX.....	0	XXX.....	0	XXX.....	
SHORT-TERM BONDS												
18		Exempt obligations.....		XXX.....	XXX.....	0	0.0000	0	0.0000	0	0.0000	
19	1	Highest quality.....		XXX.....	XXX.....	0	0.0005	0	0.0016	0	0.0033	
20	2	High quality.....		XXX.....	XXX.....	0	0.0021	0	0.0064	0	0.0106	
21	3	Medium quality.....		XXX.....	XXX.....	0	0.0099	0	0.0263	0	0.0376	
22	4	Low quality.....		XXX.....	XXX.....	0	0.0245	0	0.0572	0	0.0817	
23	5	Lower quality.....		XXX.....	XXX.....	0	0.0630	0	0.1128	0	0.1880	
24	6	In or near default.....		XXX.....	XXX.....	0	0.0000	0	0.2370	0	0.2370	
25		Total short-term bonds (sum of Lines 18 through 24).....	0	XXX.....	XXX.....	0	XXX.....	0	XXX.....	0	XXX.....	
DERIVATIVE INSTRUMENTS												
26		Exchange traded.....		XXX.....	XXX.....	0	0.0005	0	0.0016	0	0.0033	
27	1	Highest quality.....		XXX.....	XXX.....	0	0.0005	0	0.0016	0	0.0033	
28	2	High quality.....		XXX.....	XXX.....	0	0.0021	0	0.0064	0	0.0106	
29	3	Medium quality.....		XXX.....	XXX.....	0	0.0099	0	0.0263	0	0.0376	
30	4	Low quality.....		XXX.....	XXX.....	0	0.0245	0	0.0572	0	0.0817	
31	5	Lower quality.....		XXX.....	XXX.....	0	0.0630	0	0.1128	0	0.1880	
32	6	In or near default.....		XXX.....	XXX.....	0	0.0000	0	0.2370	0	0.2370	
33		Total derivative instruments.....	0	XXX.....	XXX.....	0	XXX.....	0	XXX.....	0	XXX.....	
34		Total (Lines 9 + 17 + 25 + 33).....	510,794,765	XXX.....	XXX.....	510,794,765	XXX.....	530,977	XXX.....	1,533,812	XXX.....	

Asset Valuation Reserve - Default
NONE

Asset Valuation Reserve - Equity
NONE

Asset Valuation Reserve - Equity
NONE

ASSET VALUATION RESERVE (continued)

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Equity and Other Invested Asset Component

Line Number	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK										
65		Unaffiliated public.....		XXX.....	XXX.....	0	0.0000	0	(a).....0	0	(a).....0	
66		Unaffiliated private.....		XXX.....	XXX.....	0	0.0000	0	0.1945	0	0.1945	
67		Affiliated life with AVR.....		XXX.....	XXX.....	0	0.0000	0	0.0000	0	0.0000	
68		Affiliated certain other (see SVO Purposes and Procedures Manual).....		XXX.....	XXX.....	0	0.0000	0	0.1580	0	0.1580	
69		Affiliated other - all other.....		XXX.....	XXX.....	0	0.0000	0	0.1945	0	0.1945	
70		Total with Common Stock Characteristics (Sum of Lines 65 through 69).....	0	XXX.....	XXX.....	0	XXX.....	0	XXX.....	0	XXX.....0	
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE										
71		Home office property (general account only).....				0	0.0000	0	0.0912	0	0.0912	
72		Investment properties.....				0	0.0000	0	0.0912	0	0.0912	
73		Properties acquired in satisfaction of debt.....				0	0.0000	0	0.1337	0	0.1337	
74		Total with Real Estate Characteristics (Sum of Lines 71 through 73).....	0	0	0	0	XXX.....	0	XXX.....	0	XXX.....0	
		LOW INCOME HOUSING TAX CREDIT INVESTMENTS										
75		Guaranteed federal low income housing tax credit.....				0	0.0003	0	0.0006	0	0.0010	
76		Non-guaranteed federal low income housing tax credit.....				0	0.0063	0	0.0120	0	0.0190	
77		Guaranteed state low income housing tax credit.....				0	0.0003	0	0.0006	0	0.0010	
78		Non-guaranteed state low income housing tax credit.....				0	0.0063	0	0.0120	0	0.0190	
79		All other low income housing tax credit.....				0	0.0273	0	0.0600	0	0.0975	
80		Total LIHTC (Sum of Lines 75 through 79).....	0	0	0	0	XXX.....	0	XXX.....	0	XXX.....0	
		ALL OTHER INVESTMENTS										
81		NAIC 1 working capital finance investments.....		XXX.....		0	0.0000	0	0.0042	0	0.0042	
82		NAIC 2 working capital finance investments.....		XXX.....		0	0.0000	0	0.0137	0	0.0137	
83		Other invested assets - Schedule BA.....	9,000,000	XXX.....		9,000,000	0.0000	0	0.1580	1,422,000	0.1580	1,422,000
84		Other short-term invested assets - Schedule DA.....		XXX.....		0	0.0000	0	0.1580	0	0.1580	
85		Total All Other (sum of Lines 81, 82, 83 and 84).....	9,000,000	XXX.....	0	9,000,000	XXX.....	0	XXX.....	1,422,000	XXX.....	1,422,000
86		Total Other Invested Assets - Schedule BA & DA (Sum of Lines 29, 37, 64, 70, 74, 80 and 85).....	9,000,000	0	0	9,000,000	XXX.....	0	XXX.....	1,422,000	XXX.....	1,422,000

(a) Times the company's weighted average portfolio beta (Minimum .1215, Maximum .2431).

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

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

ASSET VALUATION RESERVE (continued)Basic Contributions, Reserve Objective and Maximum Reserve Calculations
Replications (Synthetic) Assets

1 RSAT Number	2 Type	3 CUSIP	4 Description of Asset(s)	5 NAIC Designation or Other Description of Asset	6 Value of Asset	7 AVR Basic Contribution	8 AVR Reserve Objective	9 AVR Maximum Reserve
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NONE

MOTORISTS LIFE INSURANCE COMPANY
SCHEDULE F

Showing all claims for death losses and all other contract claims resisted or compromised during the year,
and all claims for death losses and all other contract claims resisted December 31 of current year

1 Contract Numbers	2 Claim Numbers	3 State of Residence of Claimant	4 Year of Claim for Death or Disability	5 Amount Claimed	6 Amount Paid During the Year	7 Amount Resisted Dec. 31 of Current Year	8 Why Compromised or Resisted
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CLAIMS DISPOSED OF DURING CURRENT YEAR**Death Claims - Ordinary**

9146685170.....	20676B.....	FL.....	2017.....	20,000.....	1,828.....		Denied;Refund Premium plus Applicable Interest.....
9147116850.....	20676A.....	FL.....	2017.....	20,000.....	.201.....		Denied;Refund Premium plus Applicable Interest.....
9147286550.....	190000000729.....	GA.....	2019.....	3,500.....	.752.....		Denied;Refund Premium plus Applicable Interest.....
9146195390.....	18918A.....	KY.....	2016.....	5,000.....	.883.....		Denied;Refund Premium plus Applicable Interest.....
9147284100.....	190000001195.....	MI.....	2019.....	5,250.....	1,147.....		Denied;Refund Premium plus Applicable Interest.....
9147200550.....	190000000961.....	MI.....	2019.....	3,500.....	.630.....		Denied;Refund Premium plus Applicable Interest.....
9147123970.....	21636A.....	MI.....	2017.....	15,000.....	.560.....		Denied;Refund Premium plus Applicable Interest.....
9147233360.....	180000000299.....	MI.....	2018.....	5,000.....	.49.....		Denied;Refund Premium plus Applicable Interest.....
9146605740.....	190000000168.....	MI.....	2019.....	5,000.....	.332.....		Denied;Refund Premium plus Applicable Interest.....
9146183920.....	18716A.....	MI.....	2016.....	10,000.....	.478.....		Denied;Refund Premium plus Applicable Interest.....
9146572360.....	18689A.....	MI.....	2016.....	1,400.....	.275.....		Denied;Refund Premium plus Applicable Interest.....
9146686990.....	19213A.....	MI.....	2016.....	10,000.....	.863.....		Denied;Refund Premium plus Applicable Interest.....
9147045060.....	20825A.....	MI.....	2017.....	25,000.....	.461.....		Denied;Refund Premium plus Applicable Interest.....
9147135840.....	21982A.....	MN.....	2017.....	10,000.....	.290.....		Denied;Refund Premium plus Applicable Interest.....
9147183500.....	190000000807.....	OH.....	2019.....	15,000.....	1,038.....		Denied;Refund Premium plus Applicable Interest.....
9147238620.....	190000000933.....	OH.....	2019.....	25,000.....	1,348.....		Denied;Refund Premium plus Applicable Interest.....
9178796190.....	180000001288.....	OH.....	2018.....	240,000.....	.338.....		Denied;Refund Premium plus Applicable Interest.....
9146768910.....	22385A.....	OH.....	2017.....	10,000.....	.935.....		Denied;Refund Premium plus Applicable Interest.....
9144479330.....	11037B.....	OH.....	2011.....	3,150.....	1,750.....		Denied;Refund Premium plus Applicable Interest.....
9177764760.....	18662A.....	OH.....	2016.....	20,000.....	.72.....		Denied;Refund Premium plus Applicable Interest.....
9146635050.....	180000000085.....	OH.....	2018.....	4,400.....	1,688.....		Denied;Refund Premium plus Applicable Interest.....
9147132180.....	180000001463.....	OH.....	2018.....	5,000.....	.763.....		Denied;Refund Premium plus Applicable Interest.....
9145644510.....	15675A.....	OH.....	2014.....	10,000.....	.462.....		Denied;Refund Premium plus Applicable Interest.....
9144983510.....	12666A.....	PA.....	2012.....	1,750.....	.222.....		Denied;Refund Premium plus Applicable Interest.....
9145572940.....	14392A.....	PA.....	2013.....	7,000.....	.796.....		Denied;Refund Premium plus Applicable Interest.....
9146955580.....	21965A.....	PA.....	2017.....	5,000.....	.715.....		Denied;Refund Premium plus Applicable Interest.....
9178446860.....	190000000298.....	PA.....	2019.....	10,000.....	.779.....		Denied;Refund Premium plus Applicable Interest.....
9147056990.....	21884A.....	SC.....	2017.....	3,500.....	-		Denied;Policy Out of Grace Period.....
9178697520.....	190000000035.....	SC.....	2019.....	100,000.....	1,492.....		Denied;Refund Premium plus Applicable Interest.....
9147171630.....	22226A.....	TN.....	2017.....	10,000.....	.237.....		Denied;Refund Premium plus Applicable Interest.....
9178324150.....	180000001620.....	TN.....	2018.....	15,000.....	1,078.....		Denied;Refund Premium plus Applicable Interest.....
9147075800.....	180000000662.....	WI.....	2018.....	15,000.....	.441.....		Denied;Refund Premium plus Applicable Interest.....
0199999. Death Claims - Ordinary.....				638,450.....	22,902.....	0.....	XXX.....
0599999. Subtotal - Disposed Death Claims.....				638,450.....	22,902.....	0.....	XXX.....
2699999. Subtotal - Claims Disposed of During Current Year.....				638,450.....	22,902.....	0.....	XXX.....
5399999. Totals.....				638,450.....	22,902.....	0.....	XXX.....

Sch. H - Pt. 1
NONE

Sch. H - Pt. 2
NONE

Sch. H - Pt. 3
NONE

Sch. H - Pt. 4
NONE

Sch. H - Pt. 5
NONE

SCHEDULE S - PART 1 - SECTION 1

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

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Type of Business Assumed	8 Amount of In Force at End of Year	9 Reserve	10 Premiums	11 Reinsurance Payable on Paid and Unpaid Losses	12 Modified Coinsurance Reserve	13 Funds Withheld under Coinsurance
General Account - Non-Affiliates - U.S. Non-Affiliates												
65056.....	38-1659835....	10/02/1996	Jackson National Lfe Insurance Company.....	MI.....	YRT/I.....	OL.....	.....25,000	.....2,398				
65056.....	38-1659835....	10/02/1996	Jackson National Lfe Insurance Company.....	MI.....	CO/G.....	DIS.....	.....15,500	.....1,287				
0899999.	Total - General Account - Non-Affiliates - U.S. Non-Affiliates.....					.....40,500	.....3,685	.....0	.....0	.....0	.....0	.....0
1099999.	Total - General Account - Non-Affiliates.....					.....40,500	.....3,685	.....0	.....0	.....0	.....0	.....0
1199999.	Total - General Account.....					.....40,500	.....3,685	.....0	.....0	.....0	.....0	.....0
2399999.	Total U.S.....					.....40,500	.....3,685	.....0	.....0	.....0	.....0	.....0
9999999.	Total.....					.....40,500	.....3,685	.....0	.....0	.....0	.....0	.....0

SCHEDULE S - PART 1 - SECTION 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Type of Business Assumed	8 Premiums	9 Unearned Premiums	10 Reserve Liability Other than for Unearned Premiums	11 Reinsurance Payable on Paid and Unpaid Losses	12 Modified Coinsurance Reserve	13 Funds Withheld under Coinsurance
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NONE

MOTORISTS LIFE INSURANCE COMPANY
SCHEDULE S - PART 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 Unpaid Losses
Life and Annuity - Non-Affiliates - U.S. Non-Affiliates						
88099.....	75-1608507....	06/01/1966	Optimum Re Insurance Company.....	TX.....	13,000	
86231.....	39-0989781....	05/01/2003	Transamerica Life Insurance Company.....	IA.....		27,000
86231.....	39-0989781....	05/01/2003	Transamerica Life Insurance Company.....	IA.....		5,532
86231.....	39-0989781....	05/01/2003	Transamerica Life Insurance Company.....	IA.....	5,682	
86231.....	39-0989781....	06/01/2007	Transamerica Life Insurance Company.....	IA.....	450,000	517,500
86231.....	39-0989781....	06/01/2007	Transamerica Life Insurance Company.....	IA.....	180,000	
86231.....	39-0989781....	06/01/2007	Transamerica Life Insurance Company.....	IA.....		45,000
86231.....	39-0989781....	06/01/2007	Transamerica Life Insurance Company.....	IA.....		45,000
86231.....	39-0989781....	10/01/1984	Transamerica Life Insurance Company.....	IA.....		1,042
82627.....	06-0839705....	06/15/2000	Swiss Re Life & Health America.....	NY.....	199,120	218,800
82627.....	06-0839705....	01/01/1987	Swiss Re Life & Health America.....	NY.....	26,000	
66346.....	58-0828824....	05/01/2003	Munich American Reassurance Company.....	GA.....		27,000
66346.....	58-0828824....	05/01/2003	Munich American Reassurance Company.....	GA.....		5,532
66346.....	58-0828824....	03/01/2005	Munich American Reassurance Company.....	GA.....		388,828
66346.....	58-0828824....	04/01/2006	Munich American Reassurance Company.....	GA.....	11,490	49,576
66346.....	58-0828824....	01/01/2008	Munich American Reassurance Company.....	GA.....	5,682	
87572.....	23-2038295....	07/01/2005	Scottish RE (U.S.), Inc.....	DE.....	109,350	
87572.....	23-2038295....	07/01/2005	Scottish RE (U.S.), Inc.....	DE.....	15,706	
88099.....	75-1608507....	06/01/1966	Optimum Re Insurance Company.....	TX.....	27,000	7,000
88099.....	75-1608507....	06/01/1966	Optimum Re Insurance Company.....	TX.....		25,000
93572.....	43-1235868....	07/01/2011	RGA Reinsurance Company.....	MO.....	42,000	100,702
93572.....	43-1235868....	07/01/2011	RGA Reinsurance Company.....	MO.....		11,000
93572.....	43-1235868....	07/01/2012	RGA Reinsurance Company.....	MO.....		36,000
93572.....	43-1235868....	11/02/2013	RGA Reinsurance Company.....	MO.....	193,824	
64688.....	75-6020048....	09/01/2012	SCOR Global Life Americas.....	DE.....	22,500	
64688.....	75-6020048....	09/01/2012	SCOR Global Life Americas.....	DE.....		54,000
0899999.	Total - Life and Annuity Non-Affiliates - U.S. Non-Affiliates				1,301,353	1,564,512
1099999.	Total - Life and Annuity Non-Affiliates				1,301,353	1,564,512
1199999.	Total - Life and Annuity				1,301,353	1,564,512
2399999.	Total U.S.				1,301,353	1,564,512
9999999.	Total				1,301,353	1,564,512

SCHEDULE S - PART 3 - SECTION 1

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

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount in Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Ccoinsurance Reserve	15 Funds Withheld Under Ccoinsurance
								9 Current Year	10 Prior Year		12 Current Year	13 Prior Year		
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates														
60895.....	35-0145825....	08/13/1984	AMERICAN UNITED LIFE INSURANCE COMPANY.....	IN.....	CO/I.....	OL.....	7,267,055	.....50,136	.....63,099	.....56,468	.....	.....	.....	.....
60895.....	35-0145825....	08/13/1984	AMERICAN UNITED LIFE INSURANCE COMPANY.....	IN.....	CO/I.....	DIS.....	20,000	.....330	.....309	.....	.....	.....	.....	.....
66346.....	58-0828824....	11/01/1999	MUNICH AMERICAN REASSURANCE COMPANY.....	GA.....	CO/I.....	XXXL.....	117,171,299	.....1,362,274	.....1,927,443	.....194,776	.....	.....	.....	.....
66346.....	58-0828824....	01/01/2002	MUNICH AMERICAN REASSURANCE COMPANY.....	GA.....	YRT/I.....	OL.....	1,376,750	.....3,722	.....3,961	.....3,857	.....	.....	.....	.....
66346.....	58-0828824....	05/01/2003	MUNICH AMERICAN REASSURANCE COMPANY.....	GA.....	CO/I.....	XXXL.....	214,501,541	.....7,674,866	.....7,940,091	.....364,603	.....	.....	.....	.....
66346.....	58-0828824....	05/01/2003	MUNICH AMERICAN REASSURANCE COMPANY.....	GA.....	CO/I.....	DIS.....	28,186,865	.....65,240	.....73,107	.....6,792	.....	.....	.....	.....
66346.....	58-0828824....	03/01/2005	MUNICH AMERICAN REASSURANCE COMPANY.....	GA.....	YRT/I.....	OL.....	28,894,529	.....10,905	.....10,516	.....601,138	.....	.....	.....	.....
66346.....	58-0828824....	04/01/2006	MUNICH AMERICAN REASSURANCE COMPANY.....	GA.....	YRT/I.....	OL.....	165,378,971	.....443,460	.....407,269	.....547,098	.....	.....	.....	.....
66346.....	58-0828824....	04/01/2006	MUNICH AMERICAN REASSURANCE COMPANY.....	GA.....	CO/I.....	DIS.....	728,198	.....5,201	.....4,933	.....	.....	.....	.....	.....
66346.....	58-0828824....	01/01/2008	MUNICH AMERICAN REASSURANCE COMPANY.....	GA.....	YRT/I.....	OL.....	64,519,964	.....166,098	.....154,647	.....117,423	.....	.....	.....	.....
86231.....	39-0989781....	05/01/1972	TRANSAMERICA LIFE INSURANCE COMPANY.....	IA.....	YRT/I.....	OL.....	10,786	.....137	.....133	.....	.....	.....	.....	.....
86231.....	39-0989781....	10/01/1984	TRANSAMERICA LIFE INSURANCE COMPANY.....	IA.....	YRT/I.....	OL.....	689,571	.....1,187	.....1,243	.....4,421	.....	.....	.....	.....
86231.....	39-0989781....	10/01/1984	TRANSAMERICA LIFE INSURANCE COMPANY.....	IA.....	CO/I.....	OL.....	5,160,714	.....24,998	.....24,319	.....42,055	.....	.....	.....	.....
86231.....	39-0989781....	01/01/1986	TRANSAMERICA LIFE INSURANCE COMPANY.....	IA.....	YRT/I.....	OL.....	11,876,496	.....6,209	.....6,394	.....272,531	.....	.....	.....	.....
86231.....	39-0989781....	01/01/1986	TRANSAMERICA LIFE INSURANCE COMPANY.....	IA.....	CO/I.....	DIS.....	.....	.....	.....5	.....25	.....	.....	.....	.....
86231.....	39-0989781....	05/01/2003	TRANSAMERICA LIFE INSURANCE COMPANY.....	IA.....	CO/I.....	XXXL.....	497,639,941	.....15,446,445	.....15,824,828	.....828,878	.....	.....	.....	.....
86231.....	39-0989781....	05/01/2003	TRANSAMERICA LIFE INSURANCE COMPANY.....	IA.....	CO/I.....	DIS.....	69,533,955	.....156,145	.....164,336	.....16,779	.....	.....	.....	.....
86231.....	39-0989781....	06/01/2007	TRANSAMERICA LIFE INSURANCE COMPANY.....	IA.....	CO/I.....	XXXL.....	1,154,982,006	.....29,679,352	.....28,973,848	.....2,557,327	.....	.....	.....	.....
86231.....	39-0989781....	06/01/2007	TRANSAMERICA LIFE INSURANCE COMPANY.....	IA.....	CO/I.....	DIS.....	104,877,250	.....191,555	.....187,373	.....30,260	.....	.....	.....	.....
82627.....	06-0839705....	01/01/1986	SWISS RE LIFE & HEALTH AMERICA.....	MO.....	YRT/I.....	OL.....	451,874	.....261	.....244	.....5,520	.....	.....	.....	.....
82627.....	06-0839705....	01/01/1987	SWISS RE LIFE & HEALTH AMERICA.....	MO.....	YRT/G.....	OL.....	238,980,735	.....697,859	.....711,870	.....592,010	.....	.....	.....	.....
82627.....	06-0839705....	01/01/1987	SWISS RE LIFE & HEALTH AMERICA.....	MO.....	YRT/I.....	XXXL.....	1,583,450	.....56,848	.....51,476	.....61,720	.....	.....	.....	.....
82627.....	06-0839705....	01/01/1996	SWISS RE LIFE & HEALTH AMERICA.....	MO.....	CAT/I.....	OL.....	.....	.....	.....	.....23,494	.....	.....	.....	.....
82627.....	06-0839705....	04/15/1994	SWISS RE LIFE & HEALTH AMERICA.....	MO.....	YRT/I.....	OL.....	8,644,548	.....35,450	.....33,879	.....50,720	.....	.....	.....	.....
82627.....	06-0839705....	03/15/1996	SWISS RE LIFE & HEALTH AMERICA.....	MO.....	YRT/I.....	OL.....	335,740	.....3,288	.....4,331	.....7,208	.....	.....	.....	.....
82627.....	06-0839705....	03/15/1996	SWISS RE LIFE & HEALTH AMERICA.....	MO.....	CO/I.....	OL.....	5,581,779	.....41,470	.....55,974	.....97,392	.....	.....	.....	.....
82627.....	06-0839705....	11/01/1999	SWISS RE LIFE & HEALTH AMERICA.....	MO.....	CO/I.....	XXXL.....	120,384,972	.....1,447,091	.....2,000,403	.....209,169	.....	.....	.....	.....
82627.....	06-0839705....	06/15/2000	SWISS RE LIFE & HEALTH AMERICA.....	MO.....	CO/I.....	OL.....	22,850,870	.....9,398,694	.....9,750,279	.....632,542	.....	.....	.....	.....
82627.....	06-0839705....	06/15/2000	SWISS RE LIFE & HEALTH AMERICA.....	MO.....	CO/I.....	ADB.....	71,366,243	.....73,268	.....74,029	.....54,807	.....	.....	.....	.....
82627.....	06-0839705....	10/01/2004	SWISS RE LIFE & HEALTH AMERICA.....	MO.....	CO/I.....	ADB.....	55,675,000	.....70,727	.....73,112	.....18,150	.....	.....	.....	.....
86258.....	13-2572994....	04/01/1994	GENERAL RE LIFE CORP.....	CT.....	YRT/I.....	OL.....	5,699,460	.....22,894	.....22,795	.....33,500	.....	.....	.....	.....
88099.....	75-1608507....	06/01/1966	OPTIMUM RE INSURANCE COMPANY.....	TX.....	YRT/I.....	OL.....	286,705	.....1,925	.....2,289	.....13,453	.....	.....	.....	.....
88099.....	75-1608507....	06/01/1966	OPTIMUM RE INSURANCE COMPANY.....	TX.....	CO/I.....	DIS.....	2,000	.....5	.....6	.....	.....	.....	.....	.....
88099.....	75-1608507....	06/01/1966	OPTIMUM RE INSURANCE COMPANY.....	TX.....	CO/I.....	ADB.....	139,386,154	.....1,547,097	.....1,554,446	.....115,591	.....	.....	.....	.....
88099.....	75-1608507....	09/01/1980	OPTIMUM RE INSURANCE COMPANY.....	TX.....	CO/I.....	OL.....	149,000	.....2,292	.....2,097	.....	.....	.....	.....	.....
88099.....	75-1608507....	10/01/1984	OPTIMUM RE INSURANCE COMPANY.....	TX.....	CO/I.....	OL.....	186,485	.....3,138	.....2,965	.....10,368	.....	.....	.....	.....
87572.....	23-2038295....	07/01/2005	SCOTTISH RE (U.S), INC.....	DE.....	CO/I.....	XXXL.....	124,298,462	.....3,607,032	.....3,655,023	.....229,898	.....	.....	.....	.....

SCHEDULE S - PART 3 - SECTION 1

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

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount in Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9 Current Year	10 Prior Year		12 Current Year	13 Prior Year		
87572.....	23-2038295....	07/01/2005	SCOTTISH RE (U.S.), INC.....	DE.....	CO/I.....	DIS.....	.....16,412,134	.....36,106	.....37,079	.....4,012				
66133.....	41-1760577....	07/01/2005	WILTON REASSURANCE COMPANY.....	MN.....	CO/I.....	XXXL.....	.....105,850,233	.....3,072,422	.....3,113,538	.....196,198				
66133.....	41-1760577....	07/01/2005	WILTON REASSURANCE COMPANY.....	MN.....	CO/I.....	DIS.....	.....13,980,707	.....30,757	.....31,586	.....3,418				
93572.....	43-1235868....	07/01/2011	RGA REINSURANCE COMPANY.....	MO.....	CO/I.....	OL.....	.....37,221,153	.....4,736,104	.....4,084,871	.....1,861,260				
93572.....	43-1235868....	05/01/2012	RGA REINSURANCE COMPANY.....	MO.....	CO/I.....	XXXL.....	.....573,436,443	.....6,378,230	.....4,628,626	.....1,401,176				
93572.....	43-1235868....	05/01/2012	RGA REINSURANCE COMPANY.....	MO.....	CO/I.....	DIS.....	.....41,048,443	.....23,466	.....17,472	.....13,005				
93572.....	43-1235868....	11/02/2013	RGA REINSURANCE COMPANY.....	MO.....	YRT/I.....	OL.....	.....14,048,836	.....45,856	.....45,297	.....148,416				
64688.....	75-6020048....	09/01/2012	SCOR GLOBAL LIFE AMERICAS.....	DE.....	CO/I.....	XXXL.....	.....465,086,769	.....7,403,399	.....6,595,967	.....1,395,639				
64688.....	75-6020048....	09/01/2012	SCOR GLOBAL LIFE AMERICAS.....	DE.....	CO/I.....	DIS.....	.....51,609,645	.....43,437	.....35,823	.....15,710				
64688.....	75-6020048....	12/15/2015	SCOR GLOBAL LIFE AMERICAS.....	DE.....	CO/I.....	XXXL.....	.....21,811,483	.....119,387	.....76,375	.....88,158				
64688.....	75-6020048....	02/21/2017	SCOR GLOBAL LIFE AMERICAS.....	DE.....	CO/I.....	XXXL.....	.....461,072,977	.....3,832,518	.....2,302,646	.....1,067,460				
64688.....	75-6020048....	02/21/2017	SCOR GLOBAL LIFE AMERICAS.....	DE.....	CO/I.....	DIS.....	.....31,891,211	.....8,494	.....3,997	.....10,090				
0899999.	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates.....						.....5,102,149,400	.....98,027,774	.....94,736,346	.....14,004,514	.....0	.....0	.....0	.....0
1099999.	Total - General Account - Authorized - Non-Affiliates.....						.....5,102,149,400	.....98,027,774	.....94,736,346	.....14,004,514	.....0	.....0	.....0	.....0
1199999.	Total - General Account - Authorized.....						.....5,102,149,400	.....98,027,774	.....94,736,346	.....14,004,514	.....0	.....0	.....0	.....0
3499999.	Total - General Account - Authorized, Unauthorized and Certified.....						.....5,102,149,400	.....98,027,774	.....94,736,346	.....14,004,514	.....0	.....0	.....0	.....0
6999999.	Total U.S.....						.....5,102,149,400	.....98,027,774	.....94,736,346	.....14,004,514	.....0	.....0	.....0	.....0
9999999.	Total.....						.....5,102,149,400	.....98,027,774	.....94,736,346	.....14,004,514	.....0	.....0	.....0	.....0

Sch. S - Pt. 3 - Sn. 2
NONE

Sch. S - Pt. 4
NONE

Sch. S - Pt. 5
NONE

MOTORISTS LIFE INSURANCE COMPANY
SCHEDULE S - PART 6

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

	1 2019	2 2018	3 2017	4 2016	5 2015
A. OPERATIONS ITEMS					
1. Premiums and annuity considerations for life and accident and health contracts.....	14,005	(93,125)	27,995	13,785	119,193
2. Commissions and reinsurance expense allowances.....	2,785	4,646	6,176	3,143	3,492
3. Contract claims.....	8,801	15,202	10,243	9,138	9,410
4. Surrender benefits and withdrawals for life contracts.....					
5. Dividends to policyholders and refunds to members.....					
6. Reserve adjustments on reinsurance ceded.....					
7. Increase in aggregate reserves for life and accident and health contracts.....	3,291	(112,633)	21,106	2,521	111,492
B. BALANCE SHEET ITEMS					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected.....	1,301	1,226	1,234	1,189	1,193
9. Aggregate reserves for life and accident and health contracts.....	98,028	94,736	207,370	188,785	186,264
10. Liability for deposit-type contracts.....					
11. Contract claims unpaid.....	1,565	1,420	1,622	407	1,788
12. Amounts recoverable on reinsurance.....	1,171	1,234	1,774	2,533	588
13. Experience rating refunds due or unpaid.....					
14. Policyholders' dividends and refunds to members (not included in Line 10).....					
15. Commissions and reinsurance expense allowances due.....	223	230	238	252	259
16. Unauthorized reinsurance offset.....					
17. Offset for reinsurance with certified reinsurers.....					
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
18. Funds deposited by and withheld from (F).....					
19. Letters of credit (L).....					
20. Trust agreements (T).....				108,808	60,307
21. Other (O).....					52,014
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
22. Multiple beneficiary trust.....					
23. Funds deposited by and withheld from (F).....					
24. Letters of credit (L).....					
25. Trust agreements (T).....					
26. Other (O).....					

MOTORISTS LIFE INSURANCE COMPANY
SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12).....	.565,555,983		.565,555,983
2. Reinsurance (Line 16).....	1,394,358	(1,394,358)	(0)
3. Premiums and considerations (Line 15).....	16,916,003	1,300,852	18,216,856
4. Net credit for ceded reinsurance.....	XXX.....	99,685,792	99,685,792
5. All other admitted assets (balance).....	11,640,689		11,640,689
6. Total assets excluding Separate Accounts (Line 26).....	595,507,034	99,592,287	695,099,321
7. Separate Account assets (Line 27).....			0
8. Total assets (Line 28).....	595,507,034	99,592,287	695,099,321
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9. Contract reserves (Lines 1 and 2).....	500,732,497	98,027,775	598,760,272
10. Liability for deposit-type contracts (Line 3).....	768,699		768,699
11. Claim reserves (Line 4).....	3,724,047	1,564,512	5,288,559
12. Policyholder dividends/member refunds/reserves (Lines 5 through 7).....	1,417,637		1,417,637
13. Premium & annuity considerations received in advance (Line 8).....	145,688		145,688
14. Other contract liabilities (Line 9).....	4,214,884		4,214,884
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount).....			0
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount).....			0
17. Reinsurance with certified reinsurers (Line 24.02 inset amount).....			0
18. Funds held under reinsurance treaties with certified reinsurers (Line 24.03 inset amount).....			0
19. All other liabilities (balance).....	11,162,204		11,162,204
20. Total liabilities excluding Separate Accounts (Line 26).....	522,165,656	99,592,287	621,757,943
21. Separate Account liabilities (Line 27).....			0
22. Total liabilities (Line 28).....	522,165,656	99,592,287	621,757,943
23. Capital & surplus (Line 38).....	73,341,378	XXX.....	73,341,378
24. Total liabilities, capital & surplus (Line 39).....	595,507,034	99,592,287	695,099,320
NET CREDIT FOR CEDED REINSURANCE			
25. Contract reserves.....	98,027,775		
26. Claim reserves.....	1,564,512		
27. Policyholder dividends/reserves.....	0		
28. Premium & annuity considerations received in advance.....	0		
29. Liability for deposit-type contracts.....	0		
30. Other contract liabilities.....	0		
31. Reinsurance ceded assets.....	1,394,358		
32. Other ceded reinsurance recoverables.....	0		
33. Total ceded reinsurance recoverables.....	100,986,645		
34. Premiums and considerations.....	1,300,852		
35. Reinsurance in unauthorized companies.....	0		
36. Funds held under reinsurance treaties with unauthorized reinsurers.....	0		
37. Reinsurance with certified reinsurers.....	0		
38. Funds held under reinsurance treaties with certified reinsurers.....	0		
39. Other ceded reinsurance payables/offsets.....	0		
40. Total ceded reinsurance payables/offsets.....	1,300,852		
41. Total net credit for ceded reinsurance.....	99,685,792		

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.	Direct Business Only					
	1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1. Alabama.....AL	55,533					55,533
2. Alaska.....AK	8,593					8,593
3. Arizona.....AZ	71,986	6,506				78,492
4. Arkansas.....AR	8,173					8,173
5. California.....CA	68,523	5,500				74,023
6. Colorado.....CO	26,759					26,759
7. Connecticut.....CT	13,167					13,167
8. Delaware.....DE	16,154					16,154
9. District of Columbia.....DC	3,075					3,075
10. Florida.....FL	979,942	109,394				1,089,336
11. Georgia.....GA	1,008,761	14,100				1,022,861
12. Hawaii.....HI	2,091					2,091
13. Idaho.....ID	1,441					1,441
14. Illinois.....IL	255,181	600				255,781
15. Indiana.....IN	3,284,907	1,255,831				4,540,738
16. Iowa.....IA	69,306					69,306
17. Kansas.....KS	10,853					10,853
18. Kentucky.....KY	3,990,254	461,134				4,451,388
19. Louisiana.....LA	11,839					11,839
20. Maine.....ME	5,035					5,035
21. Maryland.....MD	76,865					76,865
22. Massachusetts.....MA	22,540					22,540
23. Michigan.....MI	4,553,592	33,178				4,586,770
24. Minnesota.....MN	110,214	5,000				115,214
25. Mississippi.....MS	38,755					38,755
26. Missouri.....MO	40,748					40,748
27. Montana.....MT	6,845					6,845
28. Nebraska.....NE	23,746					23,746
29. Nevada.....NV	26,757	25,000				51,757
30. New Hampshire.....NH	12,226					12,226
31. New Jersey.....NJ	45,065					45,065
32. New Mexico.....NM	13,287					13,287
33. New York.....NY	67,767					67,767
34. North Carolina.....NC	150,231	4,159				154,390
35. North Dakota.....ND	4,905					4,905
36. Ohio.....OH	21,720,176	2,309,750				24,029,926
37. Oklahoma.....OK	22,157					22,157
38. Oregon.....OR	10,006					10,006
39. Pennsylvania.....PA	7,704,610	1,162,677				8,867,287
40. Rhode Island.....RI	885					885
41. South Carolina.....SC	571,260	56,751				628,011
42. South Dakota.....SD	3,319					3,319
43. Tennessee.....TN	1,411,341	1,200				1,412,541
44. Texas.....TX	101,601	7,900				109,501
45. Utah.....UT	4,335					4,335
46. Vermont.....VT	549					549
47. Virginia.....VA	506,255	30,710				536,964
48. Washington.....WA	20,362					20,362
49. West Virginia.....WV	2,353,499	21,784				2,375,283
50. Wisconsin.....WI	1,612,667	37,588				1,650,255
51. Wyoming.....WY	2,781					2,781
52. American Samoa.....AS						0
53. Guam.....GU						0
54. Puerto Rico.....PR	1,069					1,069
55. US Virgin Islands.....VI	407					407
56. Northern Mariana Islands.....MP						0
57. Canada.....CAN	50,566					50,566
58. Aggregate Other Alien.....OT	2,379					2,379
59. Totals.....	51,185,342	5,548,761	0	0	0	56,734,104

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
Members															
0291	MOTORISTS INSURANCE GROUP	10204...	31-1783451...	62-1590861...			BROAD STREET BROKERAGE INSURANCE AGENCY, LLC	OH.....	DS.....	MOTORISTS LIFE INSURANCE COMPANY..	OWNERSHIP....	....100.000	MOTORISTS MUTUAL INSURANCE COMPANY	....N....	2.....
0291	MOTORISTS INSURANCE GROUP	31577...	42-1496478...	42-1019089...			CONSUMERS INSURANCE USA, INC.....	TN.....	IA.....	MOTORISTS MUTUAL INSURANCE COMPANY	OWNERSHIP....	....100.000	MOTORISTS MUTUAL INSURANCE COMPANY	....N....	2.....
0291	MOTORISTS INSURANCE GROUP	14338...	42-0333120...				IMARC, LLC.....	IA.....	NIA.....	IOWA MUTUAL INSURANCE COMPANY.....	OWNERSHIP....	....90.000	MOTORISTS MUTUAL INSURANCE COMPANY	....N....	2.....
0291	MOTORISTS INSURANCE GROUP	41563134...					IOWA AMERICAN INSURANCE COMPANY....	OH.....	IA.....	IOWA MUTUAL INSURANCE COMPANY.....	OWNERSHIP....	....100.000	MOTORISTS MUTUAL INSURANCE COMPANY	....N....	2.....
0291	MOTORISTS INSURANCE GROUP	40932...	31-1022150...				IOWA MUTUAL INSURANCE COMPANY.....	OH.....	IA.....				MOTORISTS MUTUAL INSURANCE COMPANY	....N....	1.....
0291	MOTORISTS INSURANCE GROUP	13331...	41-0299900...				MCM INSURANCE AGENCY, INC.....	MN.....	NIA.....	MOTORISTS COMMERCIAL MUTUAL INSURANCE COMPANY	OWNERSHIP....	....100.000	MOTORISTS MUTUAL INSURANCE COMPANY	....N....	2.....
0291	MOTORISTS INSURANCE GROUP	66311...	31-0717055...				MICO INSURANCE COMPANY.....	OH.....	IA.....	MOTORISTS MUTUAL INSURANCE COMPANY	OWNERSHIP....	....100.000	MOTORISTS MUTUAL INSURANCE COMPANY	....N....	2.....
0291	MOTORISTS INSURANCE GROUP	14621...	31-4259550...				MOTORISTS COMMERCIAL MUTUAL INSURANCE COMPANY	OH.....	UDP.....				MOTORISTS MUTUAL INSURANCE COMPANY	....N....	1.....
0291	MOTORISTS INSURANCE GROUP	23175...	31-0851906...				MOTORISTS LIFE INSURANCE COMPANY....	OH.....	RE.....	MOTORISTS MUTUAL INSURANCE COMPANY	OWNERSHIP....	....70.000	MOTORISTS MUTUAL INSURANCE COMPANY	....N....	2.....
0291	MOTORISTS INSURANCE GROUP	19950...	39-0739760...				MOTORISTS MUTUAL INSURANCE COMPANY	OH.....	UDP.....				MOTORISTS MUTUAL INSURANCE COMPANY	....N....	1.....
0291	MOTORISTS INSURANCE GROUP	81-4951462...					ENCובה SERVICE CORPORATION.....	OH.....	NIA.....	MOTORISTS MUTUAL INSURANCE COMPANY	OWNERSHIP....	....100.000	MOTORISTS MUTUAL INSURANCE COMPANY	....N....	2.....
0291	MOTORISTS INSURANCE GROUP	31-1712343...					PHENIX MUTUAL FIRE INSURANCE COMPANY	OH.....	IA.....				MOTORISTS MUTUAL INSURANCE COMPANY	....N....	1.....
0291	MOTORISTS INSURANCE GROUP						WILSON MUTUAL INSURANCE COMPANY....	OH.....	IA.....				MOTORISTS MUTUAL INSURANCE COMPANY	....N....	1.....
0291	BRICKSTREET MUTUAL GROUP	12372...	20-2394166...				ENCובה REALTY, LLC.....	OH.....	NIA.....	MOTORISTS MUTUAL INSURANCE COMPANY	OWNERSHIP....	....100.000	MOTORISTS MUTUAL INSURANCE COMPANY	....N....	2.....
0291	BRICKSTREET MUTUAL GROUP	15137...	46-1783383...				ENCובה FOUNDATION OF OHIO.....	OH.....	NIA.....	MOTORISTS MUTUAL INSURANCE COMPANY	BOARD.....		MOTORISTS MUTUAL INSURANCE COMPANY	....N....	3.....
0291	BRICKSTREET MUTUAL GROUP	13045...	26-0818900...				BRICKSTREET MUTUAL INSURANCE COMPANY	WV.....	IA.....				MOTORISTS MUTUAL INSURANCE COMPANY	....N....	1.....
0291	BRICKSTREET MUTUAL GROUP						PINNACLEPOINT INSURANCE COMPANY....	WV.....	IA.....	BRICKSTREET MUTUAL INSURANCE COMPANY	OWNERSHIP....	....100.000	MOTORISTS MUTUAL INSURANCE COMPANY	....N....	2.....
0291	BRICKSTREET MUTUAL GROUP						NORTHSTONE INSURANCE COMPANY.....	PA.....	IA.....	BRICKSTREET MUTUAL INSURANCE COMPANY	OWNERSHIP....	....100.000	MOTORISTS MUTUAL INSURANCE COMPANY	....N....	2.....

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

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Y/N)	16 *
0291	BRICKSTREET MUTUAL GROUP	15136...	46-1795752..	.....	.....	.....	SUMMITPOINT INSURANCE COMPANY.....	WV.....	IA.....	BRICKSTREET MUTUAL INSURANCE COMPANY	OWNERSHIP....	....100.000	MOTORISTS MUTUAL INSURANCE COMPANY	.....N.....	2.....
0291	BRICKSTREET MUTUAL GROUP	13016...	87-0807723..	.....	.....	.....	ALLEGHENYPOINT INSURANCE COMPANY.	PA.....	IA.....	BRICKSTREET MUTUAL INSURANCE COMPANY	OWNERSHIP....	....100.000	MOTORISTS MUTUAL INSURANCE COMPANY	.....N.....	2.....
		.....	80-0772825..	.....	.....	.....	ENCOVA FOUNDATION OF WEST VIRGINIA.	WV.....	NIA.....	BRICKSTREET MUTUAL INSURANCE COMPANY	BOARD.....	.....	MOTORISTS MUTUAL INSURANCE COMPANY	.....N.....	4.....

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
Affiliated Transactions												
13331	41-1563134	MCM Insurance Agency, Inc.						(265,975)				(265,975)
	41-0299900	Motorists Commercial Mutual Insurance Co.						(37,451,573)	*			(37,451,573)
	31-1783451	Broad Street Brokerage Ins. Agency, LLC.						(68,822)				(68,822)
10204	62-1590891	Consumers Insurance USA, Inc.						(1,900,478)	*			(1,900,478)
	42-1496478	IMARC, LLC.	(45,000)									(45,000)
31577	42-1019089	Iowa American Insurance Company		4,500				(1,116,202)	*			(1,111,702)
14338	42-0333120	Iowa Mutual Insurance Company		40,500				(6,536,510)	*			(6,496,010)
40932	31-1022150	MICO Insurance Company						(61,450)	*			(61,450)
66311	31-0717055	Motorists Life Insurance Company						(2,095,093)	*			(2,095,093)
14621	31-4259550	Motorists Mutual Insurance Company			(175,000)			195,161,152	*			230,903,370
	31-0851906	Encova Service Corporation			175,000			(160,901,196)				(186,966,186)
23175	02-0178290	Phenix Mutual Fire Insurance Company						(3,333,662)	*			(3,333,662)
19950	39-0739760	Wilson Mutual Insurance Company						(11,809,517)	*			(11,809,517)
	81-4951462	Encova Realty, LLC										(9,677,228)
12372	20-2394166	BrickStreet Mutual Insurance Company						95,472,059	*			95,472,059
15136	46-1795752	SummitPoint Insurance Company						(12,606,535)	*			(12,606,535)
15137	46-1783383	PinnaclePoint Insurance Company						(27,695,169)	*			(27,695,169)
13045	26-0818900	NorthStone Insurance Company						(21,161,953)	*			(21,161,953)
13016	87-0807723	AlleghenyPoint Insurance Company						(3,629,076)	*			(3,629,076)
9999999	Control Totals		0	0	0	0	0	0	0	XXX	(0)	0

Pooling Information

NAIC Code	Name of Insurer	Pooling %	NAIC Code	Name of Insurer	Pooling %
12372	BrickStreet Mutual Insurance Company	48.00%	15136	SummitPoint Insurance Company	0.80%
14621	Motorists Mutual Insurance Company	32.40%	15137	PinnaclePoint Insurance Company	0.80%
13331	Motorists Commercial Mutual Insurance Company	10.30%	31577	Iowa American Insurance Company	0.60%
10204	Consumers Insurance Company	2.10%	40932	MICO Insurance Company	
19950	Wilson Mutual Insurance Company	1.70%	13045	NorthStone Insurance Company	
14338	Iowa Mutual Insurance Company	1.70%	13016	AlleghenyPoint Insurance Company	
23175	Phenix Mutual Fire Insurance Company	1.60%			

Detailed Explanation

Motorists Mutual Insurance Company has committed to finance a real estate project being undertaken by MIG Realty. The project is estimated to cost approximately \$30 million. By year end, there was a transfer of funds under the loan agreement in the amount of approximately \$9.6 million.

Encova Service Corporation holds certain IT assets which are used by Motorists Mutual Insurance Company. A service fee of approximately \$4.5 million is charged/paid between these two companies.

Encova Service Corporation provides payroll services to Motorists Mutual Insurance Company and BrickStreet Mutual Insurance Company. Total service revenue charged/paid related to these services was approximately \$161 million.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

MARCH FILING

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

Responses
YES
YES
YES
YES

APRIL FILING

5. Will Management's Discussion and Analysis be filed by April 1?
6. Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies)
7. Will the Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit (if required) be filed with state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies)
8. Will the Supplemental Investment Risk Interrogatories be filed by April 1?

YES
YES
YES
YES

JUNE FILING

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

YES
YES

AUGUST FILING

11. Will regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1?

YES

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

If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING

12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? (Not applicable to fraternal benefit societies)
13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?
14. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?
15. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?
16. Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?
17. Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?
18. Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1?
19. Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1?
20. Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?
21. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?
22. Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1?
23. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?
24. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?
25. Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?
26. Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?
27. Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1?
28. Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1?
29. Will the Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?
30. Will the Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?
31. Will the Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?
32. Will the Actuarial Certification Related to the Reserves required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?
33. Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1?
34. Will the Workers' Compensation Carve-Out Supplement be filed by March 1? (Not applicable to fraternal benefit societies)
35. Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1?
36. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?
37. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?
38. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?
39. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?
40. Will the VM-20 Reserves Supplement be filed with the state of domicile and the NAIC by March 1?

APRIL FILING

41. Will the confidential Regulatory Asset Adequacy Issues Summary (RAAIS) required by the Valuation Manual be filed with the state of domicile by April 1?
42. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?
43. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies)
44. Will the Accident and Health Policy Experience Exhibit be filed by April 1?
45. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?
46. Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?
47. Will the confidential Actuarial Memorandum required by Actuarial Guideline XXXVIII 8D be filed with the state of domicile by April 30?
48. Will the Supplemental Term and Universal Life Insurance Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1?
49. Will the Variable Annuities Supplement be filed with the state of domicile and the NAIC by April 1?

YES
NO
YES
NO
YES
NO

AUGUST FILING

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

YES

EXPLANATIONS:**BAR CODE:**

MOTORISTS LIFE INSURANCE COMPANY

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

1.

2.

3.

4.

5.

6.

7.

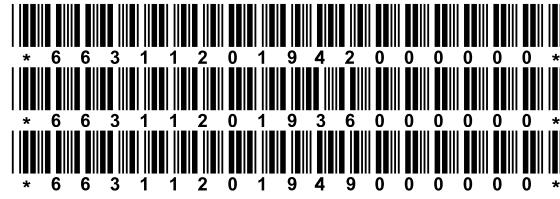
8.

9.

10.

11.

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



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

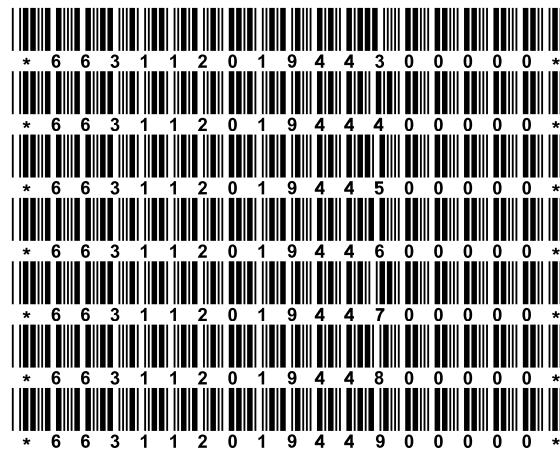
14. The data for this supplement is not required to be filed.

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17.

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



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

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

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

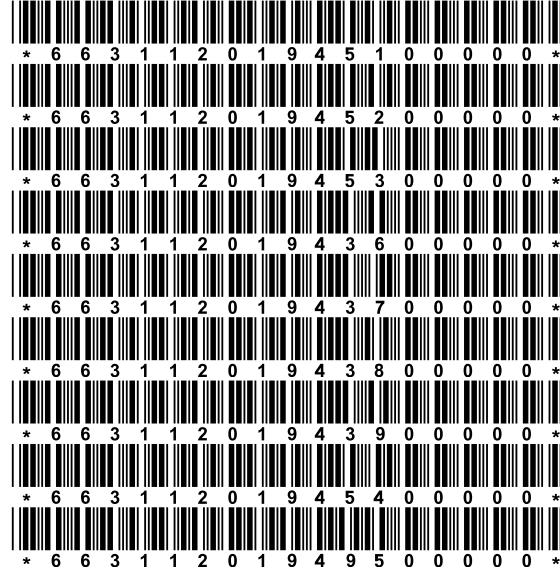
22. The data for this supplement is not required to be filed.

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

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

25.

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



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

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

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

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

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

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

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

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

35.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

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



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



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



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



40.

41.

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



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



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



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



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



47.

48.

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



50.



**Overflow Page
NONE**

**Overflow Page
NONE**

VM-20 RESERVES SUPPLEMENT - PART 1

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

For the Year Ended December, 31, 2019

(To Be Filed by March 1)

NAIC Group Code: 0291

NAIC Company Code: 66311

(\$000 Omitted Except for Number of Policies)

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

DETAILS OF WRITE-INS

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

MOTORISTS LIFE INSURANCE COMPANY

VM-20 RESERVES SUPPLEMENT - PART 2

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

For the Year Ended December 31, 2019

(To Be filed by March 1)

(\$000 Omitted Except for Number of Policies)

	Three Transition Period					
	Prior Year		Current Year			
	1 Gross Reserve	2 Net Reserve	3 Gross Reserve	4 Net Reserve	5 Number of Policies	6 Face Amount
1. Life Insurance Reserves						
1.1 Term Life.....	1,308	228	2,877	492	2,640	999,833
1.2 Universal Life with Secondary Guarantee.....	89	89	225	225	149	7,636
1.3 Non-participating Whole Life.....	4,550	4,308	7,591	7,126	5,388	148,211
1.4 Participating Whole Life.....	3,311	3,276	5,898	5,846	1,380	70,364
1.5 Universal Life without Secondary Guarantee.....	24	24	49	49	54	3,406
1.6 Variable Universal Life.....						
1.7 Variable Life.....						
1.8 Indexed Life.....						
1.9 Aggregate write-ins for other products.....	0	0	0	0	0	0
2. Total Life Insurance Reserves						
(Sum of Lines 1.1 through 1.9).....	9,282	7,925	16,640	13,738	9,611	1,229,450

DETAILS OF WRITE-INS

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

VM-20 RESERVES SUPPLEMENT - PART 3

Life PBR Exemption

For the Year Ended December 31, 2019

(To be Filed by March 1)

Life PBR Exemption as Defined in the NAIC Adopted Valuation Manual (VM)

1. Has the company filed and been granted a Life PBR Exemption from the reserve requirements of VM-20 of the Valuation Manual by their state of domicile? Yes [] No []
2. If the response to Question 1 is "Yes", then check the source of the granted "Life PBR Exemption" definition. (Check either 2.1, 2.2 or 2.3)
 - 2.1 NAIC Adopted VM []
 - 2.2 State Statute SVL [] Complete items "a" and "b", as appropriate.
 - a. Is the criteria in the State Statute (SVL) different from the NAIC adopted VM? Yes [] No []
 - b. If the answer to "a" above is yes, provide the criteria the state has used to grant the Life PBR Exemption (e.g., Group/Legal Entity criteria) and the minimum reserve requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS NAIC VM): **NONE**
- 2.3 State Regulation [] Complete items "a" and "b", as appropriate.
 - a. Is the criteria in the State Regulation different from the NAIC adopted VM? Yes [] No []
 - b. If the answer to "a" above is yes, provide the criteria the state has used to grant the Life PBR Exemption (e.g., Group/Legal Entity criteria) and the minimum reserve requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS NAIC VM):

VM-20 RESERVES SUPPLEMENT - PART 4

Other Exclusions from Life PBR

For the Year Ended December 31, 2019

(To be Filed by March 1)

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

If the answer to question 1 is "Yes" please discuss any business not covered under the Single Exemption.
2. If the answer to question 1 is "Yes", does the company have risks for policies issued outside its state of domicile? Yes [] No []

If the answer to question 2 is "Yes" please discuss the risks for policies issued outside the state of domicile, how those risks came to be a responsibility of the company, and why the company would still be considered a Single State Company with such risks.
3. Is all of the company's individual life insurance business excluded from the requirements of VM-20 pursuant to Section II.B of the Valuation Manual? Yes [] No []

Sch. O-Heading and Barcode
NONE

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

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

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

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

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

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

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

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

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

MOTORISTS LIFE INSURANCE COMPANY
SCHEDULE O SUPPLEMENT
SUPPLEMENTAL SCHEDULE O - PART 4

Development of Incurred Losses
 (\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at End of Year				
	1 2015	2 2016	3 2017	4 2018	5 2019
1. 2015.....					
2. 2016.....	XXX.....				
3. 2017.....	XXX.....	XXX.....			
4. 2018.....	XXX.....	XXX.....	XXX.....		
5. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	

Section B - Other Accident and Health

1. 2015.....					
2. 2016.....	XXX.....				
3. 2017.....	XXX.....	XXX.....			
4. 2018.....	XXX.....	XXX.....	XXX.....		
5. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	

Section C - Credit Accident and Health

1. 2015.....					
2. 2016.....	XXX.....				
3. 2017.....	XXX.....	XXX.....			
4. 2018.....	XXX.....	XXX.....	XXX.....		
5. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	

SUPPLEMENTAL SCHEDULE O - PART 5

(\$000 OMITTED)

Reserve and Liability Methodology - Exhibits 6 and 8

Line of Business	1 Methodology	2 Amount
1. Industrial life.....		
2. Ordinary life.....	Other.....	3,724
3. Individual annuity.....		
4. Supplementary contracts.....		
5. Credit life.....		
6. Group life.....		
7. Group annuities.....		
8. Group accident and health.....		
9. Credit accident and health.....		
10. Other accident and health.....		
11. Total.....		3,724

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

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

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

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

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

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

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

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

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

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

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

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

Sch. O - Pt. 4 - Sn. D
NONE

Sch. O - Pt. 4 - Sn. E
NONE

Sch. O - Pt. 4 - Sn. F
NONE

Sch. O - Pt. 4 - Sn. G
NONE

2019 ALPHABETICAL INDEX
LIFE ANNUAL STATEMENT BLANK

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