



ANNUAL STATEMENT

For the Year Ended December 31, 2020

of the Condition and Affairs of the

Alliance Of Transylvanian Saxons

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

NAIC Company Code..... 56197

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

Organized under the Laws of OH

State of Domicile or Port of Entry OH

Country of Domicile US

Licensed as Business Type:

Fraternal Benefit Society

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

Commenced Business..... August 31, 1902

Statutory Home Office

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

Main Administrative Office

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

440-842-8442

(Area Code) (Telephone Number)

Mail Address

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

Primary Location of Books and Records

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

440-842-8442

(Area Code) (Telephone Number)

Internet Web Site Address

http://www.atsaxons.com

Statutory Statement Contact

Denise Aeling Crawford
(Name)
office@atsaxons.com
(E-Mail Address)

440-842-8442

(Area Code) (Telephone Number) (Extension)

440-842-5442

(Fax Number)

OFFICERS

Name
1. Denise Aeling Crawford #
3. Michael Teutsch Jr. #

Title
President
Treasurer

Name
2. Monica Frances Gilles
4. Miller & Newberg

Title
Secretary
Consulting Actuary

Robert Burns Cunningham, III
Randall B. Floyd

First Vice President
Third Vice President

Monica Marie Weber

Second Vice President

OTHER

Denise Aeling Crawford
Michael Teutsch Jr.
Monica Marie Weber

Robert Burns Cunningham III
Michael Bachinger #
Ingrid E. Weihs-Ferguson

Randall B. Floyd
Barbara A. Spack
Margarete I. Ziegler

Monica Frances Gilles
Jacob F. Spor

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

DIRECTORS OR TRUSTEES

Denise Aeling Crawford
Michael Teutsch Jr.
Monica Marie Weber

Robert Burns Cunningham III
Michael Bachinger #
Ingrid E. Weihs-Ferguson

Randall B. Floyd
Barbara A. Spack
Margarete I. Ziegler

Monica Frances Gilles
Jacob F. Spor

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) Denise Aeling Crawford	(Signature) Monica Frances Gilles	(Signature) Michael Teutsch Jr.
1. (Printed Name) President	2. (Printed Name) Secretary	3. (Printed Name) Treasurer
(Title)	(Title)	(Title)

Subscribed and sworn to before me

This _____ day of _____

2021

a. Is this an original filing?

Yes [X] No []

b. If no 1. State the amendment number

2. Date filed

3. Number of pages attached

Annual Statement for the year 2020 of the **Alliance Of Transylvanian Saxons**
ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D).....	85,318,147		85,318,147	83,307,563
2. Stocks (Schedule D):				
2.1 Preferred stocks.....			0	
2.2 Common stocks.....	1,216,142		1,216,142	1,100,411
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens.....			0	
3.2 Other than first liens.....			0	
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....	7,950		7,950	7,950
4.2 Properties held for the production of income (less \$.....0 encumbrances).....			0	
4.3 Properties held for sale (less \$.....0 encumbrances).....			0	
5. Cash (\$....5,594,390, Schedule E-Part 1), cash equivalents (\$....1,955,131, Schedule E-Part 2) and short-term investments (\$....0, Schedule DA).....	7,549,521		7,549,521	6,836,897
6. Contract loans (including \$.....0 premium notes).....	229,031		229,031	238,385
7. Derivatives (Schedule DB).....			0	
8. Other invested assets (Schedule BA).....	2,506,766		2,506,766	1,599,791
9. Receivables for securities.....			0	
10. Securities lending reinvested collateral assets (Schedule DL).....			0	
11. Aggregate write-ins for invested assets.....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	96,827,557	0	96,827,557	93,090,997
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	1,264,853		1,264,853	1,173,127
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....			0	
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....	4,896		4,896	5,171
15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0).....			0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....			0	
16.2 Funds held by or deposited with reinsured companies.....			0	
16.3 Other amounts receivable under reinsurance contracts.....			0	
17. Amounts receivable relating to uninsured plans.....			0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0	
18.2 Net deferred tax asset.....			0	
19. Guaranty funds receivable or on deposit.....			0	
20. Electronic data processing equipment and software.....	9,977		9,977	14,654
21. Furniture and equipment, including health care delivery assets (\$.....0).....			0	
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0	
23. Receivables from parent, subsidiaries and affiliates.....			0	
24. Health care (\$.....0) and other amounts receivable.....			0	
25. Aggregate write-ins for other-than-invested assets.....	652,608	652,608	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	98,759,891	652,608	98,107,283	94,283,949
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. TOTAL (Lines 26 and 27).....	98,759,891	652,608	98,107,283	94,283,949

DETAILS OF WRITE-INS

1101.....			0	
1102.....			0	
1103.....			0	
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501. Retirement Funds.....	652,608	652,608	0	
2502. Deposit.....			0	
2503.....			0	
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	652,608	652,608	0	0

LIABILITIES, SURPLUS AND OTHER FUNDS

		1 Current Year	2 Prior Year
1. Aggregate reserve for life contracts \$....72,164,703 (Exhibit 5, Line 9999999) less \$.....0 included in Line 6.3 (including \$.....0 Modco Reserve).....		72,164,703	70,050,007
2. Aggregate reserve for accident and health contracts (including \$.....0 Modco Reserve).....			
3. Liability for deposit-type contracts (Exhibit 7, Line 14, Col. 1) (including \$.....0 Modco Reserve).....		9,593,204	8,995,312
4. Contract claims:			
4.1 Life (Exhibit 8, Part 1, Line 4.4, Col. 1 less sum of Cols. 9, 10 and 11).....		1,878,770	1,421,602
4.2 Accident and health (Exhibit 8, Part 1, Line 4.4, sum of Cols. 9, 10 and 11).....			
5. Policyholders' dividends/refunds to members \$.....0 and coupons \$.....0 due and unpaid (Exhibit 4, Line 10).....			
6. Provision for policyholders' dividends, refunds to members and coupons payable in following calendar year - estimated amounts:			
6.1 Policyholders' dividends and refunds to members apportioned for payment (including \$.....0 Modco).....			
6.2 Policyholders' dividends and refunds to members not yet apportioned (including \$.....0 Modco).....		55,000	55,000
6.3 Coupons and similar benefits (including \$.....0 Modco).....			
7. Amount provisionally held for deferred dividend policies not included in Line 6.....			
8. Premiums and annuity considerations for life and accident and health contracts received in advance less \$.....0 discount; including \$.....0 accident and health premiums (Exhibit 1, Part 1, Col. 1, sum of Lines 4 and 14).....		1,595	1,491
9. Contract liabilities not included elsewhere:			
9.1 Surrender values on canceled contracts.....			
9.2 Provision for experience rating refunds, including the liability of \$.....0 accident and health experience rating refunds of which \$.....0 is for medical loss ratio rebate per the Public Health Service Act.....			
9.3 Other amounts payable on reinsurance, including \$.....0 assumed and \$.....0 ceded.....			
9.4 Interest Maintenance Reserve (IMR, Line 6).....		229,542	283,998
10. Commissions to agents due or accrued - life and annuity contracts \$.....0, accident and health \$.....0 and deposit-type contract funds \$.....0.....		20	104
11. Commissions and expense allowances payable on reinsurance assumed.....			
12. General expenses due or accrued (Exhibit 2, Line 12, Col. 7).....		13,427	29,438
13. Transfers to Separate Accounts due or accrued (net) (including \$.....0 accrued for expense allowances recognized in reserves, net of reinsured allowances).....			
14. Taxes, licenses and fees due or accrued, excluding federal income taxes (Exhibit 3, Line 9, Col. 6).....		3,640	3,564
15.1 Current federal and foreign income taxes, including \$.....0 on realized capital gains (losses).....			
15.2 Net deferred tax liability.....			
16. Unearned investment income.....			
17. Amounts withheld or retained by reporting entity as agent or trustee.....			
18. Amounts held for agents' account, including \$.....0 agents' credit balances.....			
19. Remittances and items not allocated.....			
20. Net adjustment in assets and liabilities due to foreign exchange rates.....			
21. Liability for benefits for employees and agents if not included above.....			
22. Borrowed money \$.....0 and interest thereon \$.....0.....			
23. Dividends to stockholders declared and unpaid.....			
24. Miscellaneous liabilities:			
24.01 Asset valuation reserve (AVR Line 16, Col. 7).....		670,029	479,526
24.02 Reinsurance in unauthorized and certified (\$.....0) companies.....			
24.03 Funds held under reinsurance treaties with unauthorized and certified (\$.....0) reinsurers.....			
24.04 Payable to parent, subsidiaries and affiliates.....			
24.05 Drafts outstanding.....			
24.06 Liability for amounts held under uninsured plans.....			
24.07 Funds held under coinsurance.....			
24.08 Derivatives.....			
24.09 Payable for securities.....			
24.10 Payable for securities lending.....			
24.11 Capital notes \$.....0 and interest thereon \$.....0.....			
25. Aggregate write-ins for liabilities.....		532,258	519,640
26. Total liabilities excluding Separate Accounts business (Lines 1 to 25).....		85,142,188	81,839,682
27. From Separate Accounts Statement.....			
28. Total liabilities (Line 26 and 27).....		85,142,188	81,839,682
29. Common capital stock.....			
30. Preferred capital stock.....			0
31. Aggregate write-ins for other-than-special surplus funds.....		0	0
32. Surplus notes.....			
33. Gross paid in and contributed surplus (Page 3, Line 33, Col. 2 plus Page 4, Line 51.1, Col. 1).....			
34. Aggregate write-ins for special surplus funds.....		0	0
35. Unassigned funds (surplus).....		12,965,095	12,444,267
36. Less treasury stock, at cost:			
36.1 .....0.000 shares common (value included in Line 29 \$.....0).....			
36.2 .....0.000 shares preferred (value included in Line 30 \$.....0).....			
37. Surplus (Total Lines 31 + 32 + 33 + 34 + 35 - 36) (including \$.....0 in Separate Accounts Statement).....		12,965,095	12,444,267
38. Totals of Lines 29, 30 and 37 (Page 4, Line 55).....		12,965,095	12,444,267
39. Totals of Lines 28 and 38 (Page 2, Line 28, Col. 3).....		98,107,283	94,283,949

DETAILS OF WRITE-INS

2501. Scholarship Fund.....		.525,435	517,218
2502. Payroll Withholdings.....		6,823	2,422
2503.			
2598. Summary of remaining write-ins for Line 25 from overflow page.....		0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....		.532,258	519,640
3101.			
3102.			
3103.			
3198. Summary of remaining write-ins for Line 31 from overflow page.....		0	0
3199. Totals (Lines 3101 through 3103 plus 3198) (Line 31 above).....		0	0
3401.			
3402.			
3403.			
3498. Summary of remaining write-ins for Line 34 from overflow page.....		0	0
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....		0	0

Annual Statement for the year 2020 of the **Alliance Of Transylvanian Saxons**
SUMMARY OF OPERATIONS

		1 Current Year	2 Prior Year
1. Premiums and annuity considerations for life and accident and health contracts (Exhibit 1, Part 1, Line 20.4, Col. 1, less Col. 11)	.....	4,665,230	1,973,635
2. Considerations for supplementary contracts with life contingencies.....	.....	
3. Net investment income (Exhibit of Net Investment Income, Line 17).....	.....	4,383,205	4,631,536
4. Amortization of Interest Maintenance Reserve (IMR) (Line 5).....	.....	.95,506	.97,290
5. Separate Accounts net gain from operations excluding unrealized gains or losses.....	.....	
6. Commissions and expense allowances on reinsurance ceded (Exhibit 1, Part 2, Line 26.1, Col. 1).....	.....	
7. Reserve adjustments on reinsurance ceded.....	.....	
8. Miscellaneous Income:			
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts.....	.....	
8.2 Charges and fees for deposit-type contracts.....	.....	
8.3 Aggregate write-ins for miscellaneous income.....	.....	19,653	.68,709
9. Totals (Lines 1 to 8.3).....	.....	9,163,594	6,771,170
10. Death benefits.....	.....	248,955	114,244
11. Matured endowments (excluding guaranteed annual pure endowments).....	.....	10,604	.487
12. Annuity benefits (Exhibit 8, Part 2, Line 6.4, Cols. 4 + 8).....	.....	4,967,153	5,478,451
13. Disability benefits and benefits under accident and health contracts.....	.....	
14. Coupons, guaranteed annual pure endowments and similar benefits.....	.....	
15. Surrender benefits and withdrawals for life contracts.....	.....	.39,025	.39,327
16. Group conversions.....	.....	
17. Interest and adjustments on contract or deposit-type contract funds.....	.....	340,871	324,013
18. Payments on supplementary contracts with life contingencies.....	.....	
19. Increase in aggregate reserves for life and accident and health contracts.....	.....	2,114,698	(1,131,336)
20. Totals (Lines 10 to 19).....	.....	7,721,306	4,825,186
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) (Exhibit 1, Part 2, Line 31, Col. 1).....	.....	5,080	.5,418
22. Commissions and expense allowances on reinsurance assumed (Exhibit 1, Part 2, Line 26.2, Col. 1).....	.....	
23. General insurance expenses and fraternal expenses (Exhibit 2, Line 10, Columns 1, 2, 3, 4 and 6).....	.....	768,902	852,445
24. Insurance taxes, licenses and fees, excluding federal income taxes (Exhibit 3, Line 7, Cols. 1 + 2 + 3 + 5).....	.....	20,909	.22,046
25. Increase in loading on deferred and uncollected premiums.....	.....	(89)	(481)
26. Net transfers to or (from) Separate Accounts net of reinsurance.....	.....	
27. Aggregate write-ins for deductions.....	.....	0	0
28. Totals (Lines 20 to 27).....	.....	8,516,108	5,704,614
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28).....	.....	647,486	1,066,556
30. Dividends to policyholders and refunds to members.....	.....	.51,887	.51,821
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30).....	.....	595,599	1,014,735
32. Federal and foreign income taxes incurred (excluding tax on capital gains).....	.....	
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32).....	.....	595,599	1,014,735
34. Net realized capital gains (losses) (excluding gains (losses) transferred to the IMR) less capital gains tax of \$.....0 (excluding taxes of \$.....0 transferred to the IMR).....	.....	595,599	(28,813)
35. Net income (Line 33 plus Line 34).....	.....	595,599	.985,922
CAPITAL AND SURPLUS ACCOUNT			
36. Capital and surplus, December 31, prior year (Page 3, Line 38, Col. 2).....	.....	12,444,267	11,378,750
37. Net income (Line 35).....	.....	595,599	985,922
38. Change in net unrealized capital gains (losses) less capital gains tax of \$.....0.....	.....	115,731	262,317
39. Change in net unrealized foreign exchange capital gain (loss).....	.....	
40. Change in net deferred income tax.....	.....	
41. Change in nonadmitted assets.....	.....	(22,768)	(25,219)
42. Change in liability for reinsurance in unauthorized and certified companies.....	.....	
43. Change in reserve on account of change in valuation basis (increase) or decrease.....	.....	
44. Change in asset valuation reserve.....	.....	(190,503)	(182,720)
45. Change in treasury stock, (Page 3, Lines 36.1 and 36.2 Col. 2 minus Col. 1).....	.....	
46. Surplus (contributed to) withdrawn from Separate Accounts during period.....	.....	
47. Other changes in surplus in Separate Accounts Statement.....	.....	
48. Change in surplus notes.....	.....	
49. Cumulative effect of changes in accounting principles.....	.....	
50. Capital changes:			
50.1 Paid in.....	.....	
50.2 Transferred from surplus (Stock Dividend).....	.....	
50.3 Transferred to surplus.....	.....	
51. Surplus adjustment:			
51.1 Paid in.....	.....	
51.2 Transferred to capital (Stock Dividend).....	.....	
51.3 Transferred from capital.....	.....	
51.4 Change in surplus as a result of reinsurance.....	.....	
52. Dividends to stockholders.....	.....	
53. Aggregate write-ins for gains and losses in surplus.....	.....	.22,768	.25,217
54. Net change in capital and surplus for the year (Lines 37 through 53).....	.....	520,827	1,065,517
55. Capital and surplus, December 31, current year (Lines 36 + 54) (Page 3, Line 38).....	.....	12,965,094	12,444,267

DETAILS OF WRITE-INS

08.301. Miscellaneous Income.....	.....	19,653	.68,709
08.302. .....	.....	
08.303. .....	.....	
08.398. Summary of remaining write-ins for Line 8.3 from overflow page.....	.....	0	0
08.399. Totals (Lines 08.301 through 08.303 plus 08.398) (Line 8.3 above).....	.....	19,653	.68,709
2701. .....	.....	
2702. .....	.....	
2703. .....	.....	
2798. Summary of remaining write-ins for Line 27 from overflow page.....	.....	0	0
2799. Totals (Lines 2701 through 2703 plus 2798) (Line 27 above).....	.....	0	0
5301. Retirement Funds Adjustment.....	.....	.22,768	.25,217
5302. .....	.....	
5303. .....	.....	
5398. Summary of remaining write-ins for Line 53 from overflow page.....	.....	0	0
5399. Totals (Lines 5301 through 5303 plus 5398) (Line 53 above).....	.....	.22,768	.25,217

CASH FLOW

	1 Current Year	2 Prior Year
CASH FROM OPERATIONS		
1. Premiums collected net of reinsurance.....	4,665,697	1,975,340
2. Net investment income.....	4,295,905	4,542,361
3. Miscellaneous income.....	19,652	68,709
4. Total (Lines 1 through 3).....	8,981,254	6,586,410
5. Benefit and loss related payments.....	4,277,244	5,337,715
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....		
7. Commissions, expenses paid and aggregate write-ins for deductions.....	814,806	871,814
8. Dividends paid to policyholders.....	51,887	51,821
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....		
10. Total (Lines 5 through 9).....	5,143,937	6,261,350
11. Net cash from operations (Line 4 minus Line 10).....	3,837,317	325,060
CASH FROM INVESTMENTS		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds.....	19,564,231	11,059,193
12.2 Stocks.....		1,604
12.3 Mortgage loans.....		
12.4 Real estate.....		
12.5 Other invested assets.....		42,106
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....		
12.7 Miscellaneous proceeds.....		
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	19,564,231	11,102,903
13. Cost of investments acquired (long-term only):		
13.1 Bonds.....	21,840,440	20,169,768
13.2 Stocks.....		397
13.3 Mortgage loans.....		
13.4 Real estate.....		
13.5 Other invested assets.....	906,975	
13.6 Miscellaneous applications.....		
13.7 Total investments acquired (Lines 13.1 to 13.6).....	22,747,415	20,170,165
14. Net increase (decrease) in contract loans and premium notes.....	(9,354)	26,983
15. Net cash from investments (Line 12.8 minus Lines 13.7 minus Line 14).....	(3,173,830)	(9,094,245)
CASH FROM FINANCING AND MISCELLANEOUS SOURCES		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes.....		
16.2 Capital and paid in surplus, less treasury stock.....		
16.3 Borrowed funds.....		
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....		
16.5 Dividends to stockholders.....		
16.6 Other cash provided (applied).....	49,136	591,761
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6).....	49,136	591,761
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17).....	712,623	(8,177,424)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year.....	6,836,897	15,014,321
19.2 End of year (Line 18 plus Line 19.1).....	7,549,520	6,836,897

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

20.0001
---------------	-------	-------

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - SUMMARY

	1 Total	2 Individual Life	3 Group Life	4 Individual Annuities	5 Group Annuities	6 Accident and Health	7 Fraternal	8 Other Lines of Business	9 YRT Mortality Risk Only
1. Premiums and annuity considerations for life and accident and health contracts.....	4,665,230	71,764		4,593,466					
2. Considerations for supplementary contracts with life contingencies.....	0	XXX	XXX			XXX	XXX		XXX
3. Net investment income.....	4,383,205	670,882		3,522,712					
4. Amortization of Interest Maintenance Reserve (IMR).....	95,506	11,066		84,440					
5. Separate Accounts net gain from operations excluding unrealized gains or losses.....	0						XXX		
6. Commissions and expense allowances on reinsurance ceded.....	0						XXX		
7. Reserve adjustments on reinsurance ceded.....	0						XXX		
8. Miscellaneous Income:									
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts.....	0						XXX		
8.2 Charges and fees for deposit-type contracts.....	0					XXX	XXX		
8.3 Aggregate write-ins for miscellaneous income.....	19,653	19,653	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3).....	9,163,594	773,365	0	8,200,618	0	0	189,611	0	0
10. Death benefits.....	248,955	248,955				XXX	XXX		
11. Matured endowments (excluding guaranteed annual pure endowments).....	10,604	10,604				XXX	XXX		
12. Annuity benefits.....	4,967,153	XXX	XXX	4,967,153		XXX	XXX		XXX
13. Disability benefits and benefits under accident and health contracts.....	0						XXX		
14. Coupons, guaranteed annual pure endowments and similar benefits.....	0						XXX		
15. Surrender benefits and withdrawals for life contracts.....	39,025	39,025				XXX	XXX		
16. Group conversions.....	0						XXX		
17. Interest and adjustments on contract or deposit-type contract funds.....	340,871	46,128		294,743			XXX		
18. Payments on supplementary contracts with life contingencies.....	0					XXX	XXX		
19. Increase in aggregate reserves for life and accident and health contracts.....	2,114,697	(874)		2,115,571			XXX		
20. Totals (Lines 10 to 19).....	7,721,305	343,838	0	7,377,467	0	0	XXX	0	0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only).....	5,080	771		4,309					XXX
22. Commissions and expense allowances on reinsurance assumed.....	0						XXX		
23. General insurance expenses and fraternal expenses.....	768,902	296,302		282,989			189,611		
24. Insurance taxes, licenses and fees, excluding federal income taxes.....	20,910	10,455		10,455					
25. Increase in loading on deferred and uncollected premiums.....	(89)	(89)					XXX		
26. Net transfers to or (from) Separate Accounts net of reinsurance.....	0						XXX		
27. Aggregate write-ins for deductions.....	0	0	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27).....	8,516,108	651,277	0	7,675,220	0	0	189,611	0	0
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28).....	647,486	122,088	0	525,398	0	0	0	0	0
30. Dividends to policyholders and refunds to members.....	51,887	51,887					XXX		
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30).....	595,599	70,201	0	525,398	0	0	0	0	0
32. Federal income taxes incurred (excluding tax on capital gains).....	0								
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32).....	595,599	70,201	0	525,398	0	0	0	0	0
34. Policies/certificates in force end of year.....	7,716	5,338		2,378			XXX		

DETAILS OF WRITE-IN

DETAILS OF WRITE-INS									
08.301.	19,653	19,653							
08.302.	0								
08.303.	0								
08.398. Summary of remaining write-ins for Line 8.3 from overflow page....	0	0	0						0
08.399. Total (Lines 08.301 through 08.303 plus 08.398) (Line 8.3 above)....	19,653	19,653	0						0
2701.	0								
2702.	0								
2703.	0								
2798. Summary of remaining write-ins for Line 27 from overflow page....	0	0	0						0
2799. Total (Lines 2701 through 2703 plus 2798) (Line 27 above)....	0	0	0						0

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

	1	2	3	4	5	6	7	8	9	10	11	12
	Total	Industrial Life	Whole Life	Term Life	Indexed Life	Universal Life	Universal Life with Secondary Guarantees	Variable Life	Variable Universal Life	Credit Life (c)	Other Individual Life	YRT Mortality Risk Only
1. Premiums for life contracts (a).....	71,764		71,764									
2. Considerations for supplementary contracts with life contingencies.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Net investment income.....	670,882		670,882									
4. Amortization of Interest Maintenance Reserve (IMR).....	11,066		11,066									
5. Separate Accounts net gain from operations excluding unrealized gains or losses.....	0											
6. Commissions and expense allowances on reinsurance ceded.....	0											
7. Reserve adjustments on reinsurance ceded.....	0											
8. Miscellaneous Income:												
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts.....	0											
8.2 Charges and fees for deposit-type contracts.....	0											
8.3 Aggregate write-ins for miscellaneous income.....	19,653	0	19,653	.0	0	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3).....	773,365	0	773,365	.0	0	0	0	0	0	0	0	0
10. Death benefits.....	248,955		248,955									
11. Matured endowments (excluding guaranteed annual pure endowments).....	10,604		10,604									
12. Annuity benefits.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Disability benefits and benefits under accident and health contracts.....	0											
14. Coupons, guaranteed annual pure endowments and similar benefits.....	0											
15. Surrender benefits and withdrawals for life contracts.....	39,025		39,025									
16. Group conversions.....	0											
17. Interest and adjustments on contract or deposit-type contract funds.....	46,128		46,128									
18. Payments on supplementary contracts with life contingencies.....	0											
19. Increase in aggregate reserves for life and accident and health contracts.....	(874)		(874)									
20. Totals (Lines 10 to 19).....	343,838	0	343,838	.0	0	0	0	0	0	0	0	0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only).....	771		771									XXX
22. Commissions and expense allowances on reinsurance assumed.....	0											
23. General insurance expenses.....	296,302		296,302									
24. Insurance taxes, licenses and fees, excluding federal income taxes.....	10,455		10,455									
25. Increase in loading on deferred and uncollected premiums.....	(89)		(89)									
26. Net transfers to or (from) Separate Accounts net of reinsurance.....	0											
27. Aggregate write-ins for deductions.....	0	0	0	.0	0	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27).....	651,277	0	651,277	.0	0	0	0	0	0	0	0	0
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28).....	122,088	0	122,088	.0	0	0	0	0	0	0	0	0
30. Dividends to policyholders and refunds to members.....	51,887		51,887									
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30).....	70,201	0	70,201	.0	0	0	0	0	0	0	0	0
32. Federal income taxes incurred (excluding tax on capital gains).....	0											
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32).....	70,201	0	70,201	.0	0	0	0	0	0	0	0	0
34. Policies/certificates in force end of year.....	5,338		5,338									

DETAILS OF WRITE-INS

08.301. Miscellaneous Income.....	19,653		19,653									
08.302.	0											
08.303.	0											
08.398. Summary of remaining write-ins for Line 8.3 from overflow page.....	0	0	0	.0	0	0	0	0	0	0	0	0
08.399. Total (Lines 08.301 through 08.303 plus 08.398) (Line 8.3 above).....	19,653	0	19,653	.0	0	0	0	0	0	0	0	0
2701.	0											
2702.	0											
2703.	0											
2798. Summary of remaining write-ins for Line 27 from overflow page.....	0	0	0	.0	0	0	0	0	0	0	0	0
2799. Total (Lines 2701 through 2703 plus 2798) (Line 27 above).....	0	0	0	.0	0	0	0	0	0	0	0	0

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

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

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

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

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

NONE**DETAILS OF WRITE-INS**

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

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

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

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

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

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

	1 Total	2 Fixed Annuities	3 Indexed Annuities	Deferred		6 Life Contingent Payout (Immediate and Annuitizations)	7 Other Annuities
				4 Variable Annuities with Guarantees	5 Variable Annuities without Guarantees		
1. Premiums for individual annuity contracts.....	4,593,466	4,593,466					
2. Considerations for supplementary contracts with life contingencies.....	0	XXX	XXX	XXX	XXX		XXX
3. Net investment income.....	3,522,712	3,522,712					
4. Amortization of Interest Maintenance Reserve (IMR).....	84,440	84,440					
5. Separate Accounts net gain from operations excluding unrealized gains or losses.....	0						
6. Commissions and expense allowances on reinsurance ceded.....	0						
7. Reserve adjustments on reinsurance ceded.....	0						
8. Miscellaneous Income:							
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts.....	0						
8.2 Charges and fees for deposit-type contracts.....	0						
8.3 Aggregate write-ins for miscellaneous income.....	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3).....	8,200,618	8,200,618	0	0	0	0	0
10. Death benefits.....	0						
11. Matured endowments (excluding guaranteed annual pure endowments).....	0						
12. Annuity benefits.....	4,967,153	4,967,153					
13. Disability benefits and benefits under accident and health contracts.....	0						
14. Coupons, guaranteed annual pure endowments and similar benefits.....	0						
15. Surrender benefits and withdrawals for life contracts.....	0						
16. Group conversions.....	0						
17. Interest and adjustments on contract or deposit-type contract funds.....	294,743	294,743					
18. Payments on supplementary contracts with life contingencies.....	0						
19. Increase in aggregate reserves for life and accident and health contracts.....	2,115,571	2,115,571					
20. Totals (Lines 10 to 19).....	7,377,467	7,377,467	0	0	0	0	0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only).....	4,309	4,309					
22. Commissions and expense allowances on reinsurance assumed.....	0						
23. General insurance expenses.....	282,989	282,989					
24. Insurance taxes, licenses and fees, excluding federal income taxes.....	10,455	10,455					
25. Increase in loading on deferred and uncollected premiums.....	0						
26. Net transfers to or (from) Separate Accounts net of reinsurance.....	0	0	0	0	0	0	0
27. Aggregate write-ins for deductions.....	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27).....	7,675,220	7,675,220	0	0	0	0	0
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28).....	525,398	525,398	0	0	0	0	0
30. Dividends to policyholders and refunds to members.....	0						
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30).....	525,398	525,398	0	0	0	0	0
32. Federal income taxes incurred (excluding tax on capital gains).....	0						
33. Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32).....	525,398	525,398	0	0	0	0	0
34. Policies/certificates in force end of year.....	2,378	2,378					

DETAILS OF WRITE-INS

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

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

Analysis of Operations by Lines of Business-Group Annuities
NONE

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

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

	1 Total	2 Industrial Life	3 Whole Life	4 Term Life	5 Indexed Life	6 Universal Life	7 Universal Life with Secondary Guarantees	8 Variable Life	9 Variable Universal Life	10 Credit Life (b) (N/A Fraternal)	11 Other Individual Life	12 YRT Mortality Risk Only
Involving Life or Disability Contingencies (Reserves) (Net of Reinsurance Ceded)												
1. Reserve December 31, prior year.....	8,045,746			8,045,746								
2. Tabular net premiums or considerations.....	68,022			.68,022								
3. Present value of disability claims incurred.....	0											
4. Tabular interest.....	324,061			.324,061								
5. Tabular less actual reserve released.....	0											
6. Increase in reserve on account of change in valuation basis.....	0											
6.1 Change in excess of VM-20 deterministic/stochastic reserve over net premium reserve.....	0	XXX								XXX		
7. Other increases (net).....	0											
8. Totals (Lines 1 to 7).....	8,437,829	0	8,437,829	0	0	0	0	0	0	0	0	0
9. Tabular cost.....	152,745			152,745								
10. Reserves released by death.....	161,174			161,174								
11. Reserves released by other terminations (net).....	78,874			.78,874								
12. Annuity, supplementary contract, and disability payments involving life contingencies.....	163			163								
13. Net transfers to or (from) Separate Accounts.....	0											
14. Total deductions (Lines 9 to 13).....	392,956	0	392,956	0	0	0	0	0	0	0	0	0
15. Reserve December 31, current year.....	8,044,873	0	8,044,873	0	0	0	0	0	0	0	0	0
Cash Surrender Value and Policy Loans												
16. CSA ending balance December 31, current year.....	0											
17. Amount available for policy loans based upon Line 16 CSV.....	0											

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

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

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

(N/A Fraternal)

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

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

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

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

	1	Deferred				6	7
		2	3	4	5		
	Total	Fixed Annuities	Indexed Annuities	Variable Annuities with Guarantees	Variable Annuities without Guarantees	Life Contingent Payout (Immediate and Annuitizations)	Other Annuities
Involving Life or Disability Contingencies (Reserves) (Net of Reinsurance Ceded)							
1. Reserve December 31, prior year.....	62,004,260	62,004,260					
2. Tabular net premiums or considerations.....	4,593,466	4,593,466					
3. Present value of disability claims incurred.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4. Tabular interest.....	2,299,092	2,299,092					
5. Tabular less actual reserve released.....	(380,250)	(380,250)					
6. Increase in reserve on account of change in valuation basis.....	0						
7. Other increases (net).....	0						
8. Totals (Lines 1 to 7).....	68,516,568	68,516,568	0	0	0	0	0
9. Tabular cost.....	0						
10. Reserves released by death.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX
11. Reserves released by other terminations (net).....	4,396,737	4,396,737					
12. Annuity, supplementary contract, and disability payments involving life contingencies.....	0						
13. Net transfers to or (from) Separate Accounts.....	0						
14. Total deductions (Lines 9 to 13).....	4,396,737	4,396,737	0	0	0	0	0
15. Reserve December 31, current year.....	64,119,831	64,119,831	0	0	0	0	0
Cash Surrender Value and Policy Loans							
16. CSV ending balance, December 31, current year.....	61,412,327	61,412,327					
17. Amount available for policy loans based upon Line 16 CSV.....	0						

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

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

(N/A Fraternal)

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

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

7.4
NONE

EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. Government bonds.....	(a).....	.....
1.1 Bonds exempt from U.S. tax.....	(a).....	.....
1.2 Other bonds (unaffiliated).....	(a).....	4,197,922.....
1.3 Bonds of affiliates.....	(a).....	4,288,137.....
2.1 Preferred stocks (unaffiliated).....	(b).....	.....
2.11 Preferred stocks of affiliates.....	(b).....	.....
2.2 Common stocks (unaffiliated).....	.....	26,397.....
2.21 Common stocks of affiliates.....	.....	26,397.....
3. Mortgage loans.....	(c).....	.....
4. Real estate.....	(d).....	6,000.....
5. Contract loans.....	.....	13,477.....
6. Cash, cash equivalents and short-term investments.....	(e).....	35,824.....
7. Derivative instruments.....	(f).....	.....
8. Other invested assets.....	.....	104,284.....
9. Aggregate write-ins for investment income.....	.....	0.....
10. Total gross investment income.....	.....	4,383,904.....
11. Investment expenses.....	.....	(g).....88,683
12. Investment taxes, licenses and fees, excluding federal income taxes.....	.....	(g).....3,390
13. Interest expense.....	.....	(h).....
14. Depreciation on real estate and other invested assets.....	.....	(i).....0
15. Aggregate write-ins for deductions from investment income.....	.....	.....0
16. Total deductions (Lines 11 through 15).....	.....	92,073.....
17. Net investment income (Line 10 minus Line 16).....	.....	4,383,207.....

DETAILS OF WRITE-INS

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

- (a) Includes \$....36,939 accrual of discount less \$....343,614 amortization of premium and less \$....186,091 paid for accrued interest on purchases.
- (b) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued dividends on purchases.
- (c) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.
- (d) Includes \$.....0 for company's occupancy of its own buildings; and excludes \$.....0 interest on encumbrances.
- (e) Includes \$.....0 accrual of discount less \$....7,065 amortization of premium and less \$....6,944 paid for accrued interest on purchases.
- (f) Includes \$.....0 accrual of discount less \$.....0 amortization of premium.
- (g) Includes \$.....0 investment expenses and \$.....0 investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$.....0 interest on surplus notes and \$.....0 interest on capital notes.
- (i) Includes \$.....0 depreciation on real estate and \$.....0 depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1 Realized Gain (Loss) on Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds.....0	.....	.....
1.1 Bonds exempt from U.S. tax.....0	.....	.....
1.2 Other bonds (unaffiliated).....	41,050	.....	41,050.....	.....	.....
1.3 Bonds of affiliates.....0	.....	.....
2.1 Preferred stocks (unaffiliated).....0	.....	.....
2.11 Preferred stocks of affiliates.....0	.....	.....
2.2 Common stocks (unaffiliated).....0	115,731.....	.....
2.21 Common stocks of affiliates.....0	.....	.....
3. Mortgage loans.....0	.....	.....
4. Real estate.....0	.....	.....
5. Contract loans.....0	.....	.....
6. Cash, cash equivalents and short-term investments.....0	.....	.....
7. Derivative instruments.....0	.....	.....
8. Other invested assets.....0	.....	.....
9. Aggregate write-ins for capital gains (losses).....	0.....	0.....	0.....	0.....	0.....
10. Total capital gains (losses).....	41,050.....	0.....	41,050.....	115,731.....	0.....

DETAILS OF WRITE-INS

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

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

	1 Total	2 Industrial Life	Insurance									12 Fraternal (Fraternal Benefit Societies Only)	
			Group			Accident and Health			11 Aggregate of All Other Lines of Business				
			3 Life Insurance	4 Individual Annuities	5 Credit Life (Group and Individual)	6 Life Insurance	7 Annuities	8 Group	9 Credit (Group & Individual)	10 Other			
FIRST YEAR (other than single)													
1. Uncollected.....	0												
2. Deferred and accrued.....	138			138									
3. Deferred, accrued and uncollected:													
3.1 Direct.....	138			138									
3.2 Reinsurance assumed.....	0												
3.3 Reinsurance ceded.....	0												
3.4 Net (Line 1 + Line 2).....	138	0	138	0	0	0	0	0	0	0	0	0	
4. Advance.....	0												
5. Line 3.4 - Line 4.....	138	0	138	0	0	0	0	0	0	0	0	0	
6. Collected during year:													
6.1 Direct.....	46,272			821	45,451								
6.2 Reinsurance assumed.....	0												
6.3 Reinsurance ceded.....	0												
6.4 Net.....	46,272	0	821	45,451	0	0	0	0	0	0	0	0	
7. Line 5 + Line 6.4.....	46,410	0	959	45,451	0	0	0	0	0	0	0	0	
8. Prior year (uncollected + deferred and accrued - advance).....	0												
9. First year premiums and considerations:													
9.1 Direct.....	46,410			959	45,451								
9.2 Reinsurance assumed.....	0												
9.3 Reinsurance ceded.....	0												
9.4 Net (Line 7 - Line 8).....	46,410	0	959	45,451	0	0	0	0	0	0	0	0	
SINGLE													
10. Single premiums and considerations:													
10.1 Direct.....	516,824			47,055	469,769								
10.2 Reinsurance assumed.....	0												
10.3 Reinsurance ceded.....	0												
10.4 Net.....	516,824	0	47,055	469,769	0	0	0	0	0	0	0	0	
RENEWAL													
11. Uncollected.....	5,817			5,817									
12. Deferred and accrued.....	0												
13. Deferred, accrued and uncollected:													
13.1 Direct.....	5,817			5,817									
13.2 Reinsurance assumed.....	0												
13.3 Reinsurance ceded.....	0												
13.4 Net (Line 11 + Line 12).....	5,817	0	5,817	0	0	0	0	0	0	0	0	0	
14. Advance.....	1,595			1,595									
15. Line 13.4 - Line 14.....	4,222	0	4,222	0	0	0	0	0	0	0	0	0	
16. Collected during year:													
16.1 Direct.....	4,105,163			26,917	4,078,246								
16.2 Reinsurance assumed.....	0												
16.3 Reinsurance ceded.....	2,562			2,562									
16.4 Net.....	4,102,601	0	24,355	4,078,246	0	0	0	0	0	0	0	0	
17. Line 15 + Line 16.4.....	4,106,823	0	28,577	4,078,246	0	0	0	0	0	0	0	0	
18. Prior year (uncollected + deferred and accrued - advance).....	4,827			4,827									
19. Renewal premiums and considerations:													
19.1 Direct.....	4,104,558			26,312	4,078,246								
19.2 Reinsurance assumed.....	0												
19.3 Reinsurance ceded.....	2,562			2,562									
19.4 Net (Line 17 - Line 18).....	4,101,996	0	23,750	4,078,246	0	0	0	0	0	0	0	0	
TOTAL													
20. Total premiums and annuity considerations:													
20.1 Direct.....	4,667,792	0	74,326	4,593,466	0	0	0	0	0	0	0	0	
20.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0	0	0	
20.3 Reinsurance ceded.....	2,562	0	2,562	0	0	0	0	0	0	0	0	0	
20.4 Net (Lines 9.4 + 10.4 + 19.4).....	4,665,230	0	71,764	4,593,466	0	0	0	0	0	0	0	0	

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

	1	2	Insurance					11		12	
			3	4	5	6	7	8	9	10	
	Total	Industrial Life	Life Insurance	Individual Annuities	Credit Life (Group and Individual)	Life Insurance	Annuities	Group	Credit (Group & Individual)	Other	Aggregate of All Other Lines of Business
POLICYHOLDERS' DIVIDENDS, REFUNDS TO MEMBERS AND COUPONS APPLIED (included in Part 1)											
21. To pay renewal premiums.....	0										
22. All other.....	40,125		40,125								
REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES INCURRED											
23. First year (other than single):											
23.1 Reinsurance ceded.....	0										
23.2 Reinsurance assumed.....	0										
23.3 Net ceded less assumed.....	0	0	0	0	0	0	0	0	0	0	0
24. Single:											
24.1 Reinsurance ceded.....	0										
24.2 Reinsurance assumed.....	0										
24.3 Net ceded less assumed.....	0	0	0	0	0	0	0	0	0	0	0
25. Renewal:											
25.1 Reinsurance ceded.....	0										
25.2 Reinsurance assumed.....	0										
25.3 Net ceded less assumed.....	0	0	0	0	0	0	0	0	0	0	0
26. Totals:											
26.1 Reinsurance ceded (Page 6, Line 6).....	0	0	0	0	0	0	0	0	0	0	0
26.2 Reinsurance assumed (Page 6, Line 22).....	0	0	0	0	0	0	0	0	0	0	0
26.3 Net ceded less assumed.....	0	0	0	0	0	0	0	0	0	0	0
COMMISSIONS INCURRED (direct business only)											
27. First year (other than single).....	4,717		408	4,309							
28. Single.....	363		363								
29. Renewal.....	0										
30. Deposit-type contract funds.....	0										
31. Totals (to agree with Page 6, Line 21).....	5,080	0	771	4,309	0	0	0	0	0	0	0

Annual Statement for the year 2020 of the **Alliance Of Transylvanian Saxons**
EXHIBIT 2 - GENERAL EXPENSES

	Insurance			5	6	7	
	1 Life	Accident and Health			6	7	
		2 Cost Containment	3 All Other				
1. Rent.....	6,000					6,000	
2. Salaries and wages.....	237,345					237,345	
3.11 Contributions for benefit plans for employees.....	71,705					71,705	
3.12 Contributions for benefit plans for agents.....						0	
3.21 Payments to employees under non-funded benefit plans.....						0	
3.22 Payments to agents under non-funded benefit plans.....						0	
3.31 Other employee welfare.....						0	
3.32 Other agent welfare.....						0	
4.1 Legal fees and expenses.....						0	
4.2 Medical examination fees.....	240					240	
4.3 Inspection report fees.....						0	
4.4 Fees of public accountants and consulting actuaries.....	101,748					101,748	
4.5 Expense of investigation and settlement of policy claims.....						0	
5.1 Traveling expenses.....						0	
5.2 Advertising.....	26,787					26,787	
5.3 Postage, express, telegraph and telephone.....	23,682					23,682	
5.4 Printing and stationery.....	2,346					2,346	
5.5 Cost or depreciation of furniture and equipment.....						0	
5.6 Rental of equipment.....						0	
5.7 Cost or depreciation of EDP equipment and software.....	5,805					5,805	
6.1 Books and periodicals.....						0	
6.2 Bureau and association fees.....	625					625	
6.3 Insurance, except on real estate.....	20,199					20,199	
6.4 Miscellaneous losses.....	3,078					3,078	
6.5 Collection and bank service charges.....	53,989					53,989	
6.6 Sundry general expenses.....						0	
6.7 Group service and administration fees.....						0	
6.8 Reimbursements by uninsured plans.....						0	
7.1 Agency expense allowance.....						0	
7.2 Agents' balances charged off (less \$.....0 recovered).....						0	
7.3 Agency conferences other than local meetings.....						0	
8.1 Official publication (Fraternal Benefit Societies Only).....	XXX	XXX	XXX	XXX	XXX	74,719	
8.2 Expenses of supreme lodge meetings (Fraternal Benefit Soc. Only).....	XXX	XXX	XXX	XXX	XXX	0	
9.1 Real estate expenses.....					17,332	17,332	
9.2 Investment expenses not included elsewhere.....					71,351	71,351	
9.3 Aggregate write-ins for expenses.....	25,741	0	0	0	0	114,337	
10. General expenses Incurred.....	579,291	0	0	0	88,683	(b) 189,611	
11. General expenses unpaid December 31, prior year.....	29,438					29,438	
12. General expenses unpaid December 31, current year.....	9,427				4,000	13,427	
13. Amounts receivable relating to uninsured plans, prior year.....						0	
14. Amounts receivable relating to uninsured plans, current year.....						0	
15. General expenses paid during year (Lines 10+11-12-13+14).....	599,302	0	0	0	84,683	189,611	
DETAILS OF WRITE-INS							
09.301. Cultural Funds and Scholarships - net.....						114,337	
09.302. Branch sharing.....	10,341					10,341	
09.303. Per diem.....	15,400					15,400	
09.398. Summary of remaining write-ins for Line 9.3 from overflow page.....	0	0	0	0	0	0	
09.399. Totals (Lines 09.301 through 09.303 plus 09.398)(Line 9.3 above).....	25,741	0	0	0	0	114,337	
(a) Includes management fees of \$.....0 to affiliates and \$.....0 to non-affiliates.						114,337	
(b) Show the distribution of this amount in the following categories (Fraternal Benefit Societies Only):							
1. Charitable \$.....0; 2. Institutional \$.....0; 3. Recreational and Health \$.....0; 4. Educational \$.....0							
5. Religious \$.....0; 6. Membership \$.....0; 7. Other \$.....0; 8. Total \$.....0							

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

	Insurance			4	5	6
	1 Life	2 Accident and Health	3 All Other Lines of Business			
1. Real estate taxes.....				3,390		3,390
2. State insurance department licenses and fees.....	2,260					2,260
3. State taxes on premiums.....						0
4. Other state taxes, including \$.....0 for employee benefits.....	470					470
5. U.S. Social Security taxes.....	18,157					18,157
6. All other taxes.....	22					22
7. Taxes, licenses and fees incurred.....	20,909	0	0	3,390	0	24,299
8. Taxes, licenses and fees unpaid December 31, prior year.....	250			3,314		3,564
9. Taxes, licenses and fees unpaid December 31, current year.....	250			3,390		3,640
10. Taxes, licenses and fees paid during year (Lines 7 + 8 - 9).....	20,909	0	0	3,314	0	24,223

EXHIBIT 4 - DIVIDENDS OR REFUNDS

	1 Life	2 Accident and Health
1. Applied to pay renewal premiums.....		
2. Applied to shorten the endowment or premium-paying period.....		
3. Applied to provide paid-up additions.....	40,125	
4. Applied to provide paid-up annuities.....		
5. Total Lines 1 through 4.....	40,125	0
6. Paid-in cash.....	3,082	
7. Left on deposit.....	8,680	
8. Aggregate write-ins for dividend or refund options.....	0	0
9. Total Lines 5 through 8.....	51,887	0
10. Amount due and unpaid.....		
11. Provision for dividends or refunds payable in the following calendar year.....	55,000	
12. Terminal dividends.....		
13. Provision for deferred dividend contracts.....		
14. Amount provisionally held for deferred dividend contracts not included in Line 13.....		
15. Total Lines 10 through 14.....	55,000	0
16. Total from prior year.....	55,000	
17. Total dividends or refunds (Lines 9 + 15 - 16).....	51,887	0
DETAILS OF WRITE-INS		
0801.		
0802.		
0803.		
0898. Summary of remaining write-ins for Line 8 from overflow page.....	0	0
0899. Totals (Line 0801 through 0803 plus 0898) (Line 8 above).....	0	0

EXHIBIT 5 - AGGREGATE RESERVE FOR LIFE CONTRACTS

1	2	3	4	5 Credit (Group and Individual)	6 Group
Valuation Standard	Total (a)	Industrial	Ordinary		
Life Insurance:					
0100001. 1902-1947 AE 3.5% & 4% AE 2.5% & 3%.....	57,524			57,524	
0100002. 1948-1966 AM 2.5%.....	677,791			677,791	
0100003. 1958-1965 41 CSO 3%.....	12,059			12,059	
0100004. 1966-1988 58 CSO 3%.....	1,597,606			1,597,606	
0100005. 2006-2008 80 CSO 4.00%.....	243,381			243,381	
0100006. 1995-2005 80 CSO 4.50%.....	2,548,489			2,548,489	
0100007. 1987-1994 80 CSO 4.75%.....	2,239,063			2,239,063	
0100008. 1993-1994 80 CSO 5%.....	7,021			7,021	
0100009. 1987-1992 80 CSO 5.5%.....	291,012			291,012	
0100010. 2009-2012 01 CSO 4.0%.....	151,182			151,182	
0100011. 2012-2019 01 CSO 3.5%.....	129,686			129,686	
0100012. 2020- 17 CSO 3.5%.....	7,147			7,147	
0100013. 1966-1988 58 CET 3%.....	50,261			50,261	
0100014. 1995-2005 80 CET 4.5%.....	4,351			4,351	
0100015. 1993-1994 80 CET 5%.....	382			382	
0100016. 1987-1992 80 CET 5.5%.....	14,525			14,525	
0199997. Totals (Gross).....	8,031,480	0		8,031,480	0
0199998. Reinsurance ceded.....	1,084			1,084	
0199999. Totals (Net).....	8,030,396	0		8,030,396	0

Annuities (excluding supplementary contracts with life contingencies):

0200001. FPDA (accumulation) (4.50% Guar).....	32,625,006	XXX	32,625,006	XXX	
0200002. FPDA (accumulation) (3.00% Guar).....	24,876,180	XXX	24,876,180	XXX	
0200003. FPDA (accumulation) (1.75% Guar).....	1,154,532	XXX	1,154,532	XXX	
0200004. FPDA (accumulation) (1.50% Guar).....	2,470,404	XXX	2,470,404	XXX	
0200005. FPDA Rider (accumulation) (4.50% Guar).....	286,205	XXX	286,205	XXX	
0200006. SPIA '83a (setback 1 yr) M/F 6.50%.....	27,020	XXX	27,020	XXX	
0200007. SPIA '83a (setback 1 yr) M/F 6.25%.....	6,724	XXX	6,724	XXX	
0200008. SPIA '83a (setback 1 yr) M/F 4.50%.....	2,103,998	XXX	2,103,998	XXX	
0200009. SPIA '83a (setback 1 yr) M/F 3.00%.....	170,590	XXX	170,590	XXX	
0200010. SPIA '83a (setback 1 yr) M/F 2.50%.....	93,848	XXX	93,848	XXX	
0200011. SPIA '83a (setback 1 yr) M/F 2.25%.....	305,324	XXX	305,324	XXX	
0299997. Totals (Gross).....	64,119,831	XXX	64,119,831	XXX	0
0299999. Totals (Net).....	64,119,831	XXX	64,119,831	XXX	0

Accidental Death Benefits:

0400001. Interco DI with 41CSO 2.5%.....	666		.666		
0400002. 59 ADB & 58 CSO 3%.....	740		.740		
0400003. Dismemberment Benefits.....	4,979		4,979		
0499997. Totals (Gross).....	6,385	0	6,385	0	0
0499999. Totals (Net).....	6,385	0	6,385	0	0

Disability - Active Lives:

0500001. 52 Disability Study, per 4, Ben 5 w/ 58 CSO 3%.....	1,242		1,242		
0599997. Totals (Gross).....	1,242	0	1,242	0	0
0599998. Reinsurance ceded.....	39		39		
0599999. Totals (Net).....	1,203	0	1,203	0	0

Miscellaneous Reserves:

0700001. Non-Deduction.....	2,723		2,723		
0700002. Rated Premiums - 1/2 Annual.....	4,167		4,167		
0799997. Totals (Gross).....	6,890	0	6,890	0	0
0799999. Totals (Net).....	6,890	0	6,890	0	0
9999999. Totals (Net) - Page 3, Line 1.....	72,164,705	0	72,164,705	0	0

(a) Included in the above table are amounts of deposit-type contracts that originally contained a mortality risk. Amounts of deposit-type contracts in Column 2 that no longer contain a mortality risk are Life Insurance \$.....0, Annuities \$.....0, Supplementary Contracts with Life Contingencies \$.....0, Accidental Death Benefits \$.....0, Disability-Active Lives \$.....0, Disability-Disabled Lives \$.....0, Miscellaneous Reserves, \$.....0.

EXHIBIT 5 - INTERROGATORIES

1.1 Has the reporting entity ever issued both participating and non-participating contracts? Yes [] No [X]

1.2 If not, state which kind is issued
Participating

2.1 Does the reporting entity at present issue both participating and non-participating contracts? Yes [] No [X]

2.2 If not, state which kind is issued
Participating

3. Does the reporting entity at present issue or have in force contracts that contain non-guaranteed elements? If so, attach a statement that contains the determination procedures, answers to the interrogatories and an actuarial opinion as described in the instructions. Yes [X] No []

4. Has the reporting entity any assessment or stipulated premium contracts in force? If so, state: Yes [] No [X]

4.1 Amount of insurance: \$.....

4.2 Amount of reserve: \$.....

4.3 Basis of reserve:

4.4 Basis of regular assessments:

4.5 Basis of special assessments:

4.6 Assessments collected during year: \$.....

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

6. Does the reporting entity hold reserves for any annuity contracts that are less than the reserves that would be held on a standard basis? Yes [] No [X]

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

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

Attach statement of methods employed in their valuation.

7. Does the reporting entity have any Synthetic GIC contracts or agreements in effect as of December 31 of the current year? Yes [] No [X]

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

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

7.3 State the amount of reserves established for this business: \$.....

7.4 Identify where the reserves are reported in the blank.

8. Does the reporting entity have any Contingent Deferred Annuity contracts or agreements in effect as of December of the current year? Yes [] No [X]

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

8.2 State the amount of reserves established for this business: \$.....

8.3 Identify where the reserves are reported in the blank:

9. Does the reporting entity have any Guaranteed Lifetime Income Benefit contracts, agreements or riders in effect as of December 31 of the current year? Yes [] No [X]

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

9.2 State the amount of reserves established for this business: \$.....

9.3 Identify where the reserves are reported in the blank:

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

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

NONE

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

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

NONE**DETAILS OF WRITE-INS**

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

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

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

EXHIBIT 7 - DEPOSIT-TYPE CONTRACTS

	1 Total	2 Guaranteed Interest Contracts	3 Annuities Certain	4 Supplemental Contracts	5 Dividend Accumulations or Refunds	6 Premium and Other Deposit Funds
1. Balance at the beginning of the year before reinsurance.....	8,995,312	3,309,462	1,700,847	2,828,162	865,729	291,112
2. Deposits received during the year.....	1,259,466	44,300	1,183,295	14,400	8,680	8,791
3. Investment earnings credited to the account.....	339,386	98,061	76,142	120,540	36,243	8,400
4. Other net change in reserves.....	0					
5. Fees and other charges assessed.....	0					
6. Surrender charges.....	0					
7. Net surrender or withdrawal payments.....	1,000,960	104,650	790,614	50,824	34,032	20,840
8. Other net transfers to or (from) Separate Accounts.....	0					
9. Balance at the end of current year before reinsurance (Lines 1 + 2 + 3 + 4 - 5 - 6 - 7 - 8).....	9,593,204	3,347,173	2,169,670	2,912,278	876,620	287,463
10. Reinsurance balance at the beginning of the year.....	0					
11. Net change in reinsurance assumed.....	0					
12. Net change in reinsurance ceded.....	0					
13. Reinsurance balance at the end of the year (Lines 10 + 11 - 12).....	0	0	0	0	0	0
14. Net balance at the end of the current year after reinsurance (Lines 9 + 13).....	9,593,204	3,347,173	2,169,670	2,912,278	876,620	287,463

EXHIBIT 8 - CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

PART 1 - Liability End of Current Year

	1 Total	2 Industrial Life	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health		
			3 Life Insurance	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other
1. Due and unpaid:											
1.1 Direct.....	1,866,770		94,653		1,772,117						
1.2 Reinsurance assumed.....	0										
1.3 Reinsurance ceded.....	0										
1.4 Net.....	1,866,770	0	94,653	1,772,117	0	0	0	0	0	0	0
2. In course of settlement:											
2.1 Resisted:											
2.11 Direct.....	0										
2.12 Reinsurance assumed.....	0										
2.13 Reinsurance ceded.....	0										
2.14 Net.....	0	0	(b) 0	(b) 0	(b) 0	(b) 0	(b) 0	0	0	0	0
2.2 Other:											
2.21 Direct.....	0										
2.22 Reinsurance assumed.....	0										
2.23 Reinsurance ceded.....	0										
2.24 Net.....	0	0	(b) 0	(b) 0	(b) 0	(b) 0	(b) 0	0	(b) 0	(b) 0	(b) 0
3. Incurred but unreported:											
3.1 Direct.....	12,000		12,000								
3.2 Reinsurance assumed.....	0										
3.3 Reinsurance ceded.....	0										
3.4 Net.....	12,000	0	(b) 12,000	(b) 0	(b) 0	(b) 0	(b) 0	0	(b) 0	(b) 0	(b) 0
4. Totals:											
4.1 Direct.....	1,878,770	0	106,653	1,772,117	0	0	0	0	0	0	0
4.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0	0
4.4 Net.....	1,878,770	(a) 0	(a) 106,653	1,772,117	0	0	(a) 0	0	0	0	0

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

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

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

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

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

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

	1 Total	2 Industrial Life (a)	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health		
			3 Life Insurance (b)	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance (c)	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other
1. Settlements during the year:											
1.1 Direct.....	4,769,544		210,263	4,559,281							
1.2 Reinsurance assumed.....	0										
1.3 Reinsurance ceded.....	0										
1.4 Net.....	(d) 4,769,544	0	210,263	4,559,281	0	0	0	0	0	0	0
2. Liability December 31, current year from Part 1:											
2.1 Direct.....	1,878,770	0	106,653	1,772,117	0	0	0	0	0	0	0
2.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0	0
2.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0	0
2.4 Net.....	1,878,770	0	106,653	1,772,117	0	0	0	0	0	0	0
3. Amounts recoverable from reinsurers Dec. 31, current year.....	0										
4. Liability December 31, prior year:											
4.1 Direct.....	1,421,602		57,357	1,364,245							
4.2 Reinsurance assumed.....	0										
4.3 Reinsurance ceded.....	0										
4.4 Net.....	1,421,602	0	57,357	1,364,245	0	0	0	0	0	0	0
5. Amounts recoverable from reinsurers Dec. 31, prior year.....	0										
6. Incurred benefits:											
6.1 Direct.....	5,226,712	0	259,559	4,967,153	0	0	0	0	0	0	0
6.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0	0
6.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0	0
6.4 Net.....	5,226,712	0	259,559	4,967,153	0	0	0	0	0	0	0

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

(b) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$.....0 in Line 1.1, \$.....0 in Line 1.4, \$.....0 in Line 6.1 and \$....10,604 in Line 6.4.

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

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

Alliance Of Transylvanian Saxons

EXHIBIT OF NONADMITTED ASSETS

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D).....			0
2. Stocks (Schedule D):			
2.1 Preferred stocks.....			0
2.2 Common stocks.....			0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens.....			0
3.2 Other than first liens.....			0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company.....			0
4.2 Properties held for the production of income.....			0
4.3 Properties held for sale.....			0
5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA).....			0
6. Contract loans.....			0
7. Derivatives (Schedule DB).....			0
8. Other invested assets (Schedule BA).....			0
9. Receivables for securities.....			0
10. Securities lending reinvested collateral assets (Schedule DL).....			0
11. Aggregate write-ins for invested assets.....	.0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	.0	0	0
13. Title plants (for Title insurers only).....			0
14. Investment income due and accrued.....			0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection.....			0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.....			0
15.3 Accrued retrospective premiums and contracts subject to redetermination.....			0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers.....			0
16.2 Funds held by or deposited with reinsured companies.....			0
16.3 Other amounts receivable under reinsurance contracts.....			0
17. Amounts receivable relating to uninsured plans.....			0
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0
18.2 Net deferred tax asset.....			0
19. Guaranty funds receivable or on deposit.....			0
20. Electronic data processing equipment and software.....			0
21. Furniture and equipment, including health care delivery assets.....			0
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0
23. Receivables from parent, subsidiaries and affiliates.....			0
24. Health care and other amounts receivable.....			0
25. Aggregate write-ins for other-than-invested assets.....	.652,608	.629,840	(22,768)
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	.652,608	.629,840	(22,768)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0
28. TOTALS (Lines 26 and 27).....	.652,608	.629,840	(22,768)

DETAILS OF WRITE-INS

1101.....			0
1102.....			0
1103.....			0
1198. Summary of remaining write-ins for Line 11 from overflow page.....	.0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....	.0	0	0
2501. Retirement Funds.....	.652,608	.629,840	(22,768)
2502. Deposit.....			0
2503.....			0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	.0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	.652,608	.629,840	(22,768)

Notes to the Financial Statements**1. Summary of Significant Accounting Policies and Going Concern****A. Accounting Practices**

	SSAP #	F/S Page	F/S Line #	2020	2019
Net Income					
(1) State basis (Page 4, Line 35, Columns 1 & 2)	XXX	XXX	XXX	\$..... 595,599	\$..... 985,922
(2) State prescribed practices that are an increase / (decrease) from NAIC SAP:					
(3) State permitted practices that are an increase / (decrease) from NAIC SAP:					
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$..... 595,599	\$..... 985,922
Surplus					
(5) State basis (Page 3, Line 38, Columns 1 & 2)	XXX	XXX	XXX	\$.... 12,965,095	\$.... 12,444,267
(6) State prescribed practices that are an increase / (decrease) from NAIC SAP:					
(7) State permitted practices that are an increase / (decrease) from NAIC SAP:					
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$.... 12,965,095	\$.... 12,444,267

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

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

C. Accounting Policy

Asset values are generally stated as follows:

(1) Short-term investments

Accounted for in the same manner as similar long-term investments.

(2) Bonds

Amortized cost using the scientific method, except where other values are required by the NAIC Valuations of Securities manual.

(3) Common Stocks

Market values provided by the NAIC Valuations of Securities manual.

(4) Preferred Stocks

Original cost where permitted by the NAIC Valuations of Securities manual.

(5) Mortgage Loans

Aggregate unpaid balances.

(6) Loan-back securities

The Society does not have any loan-backed bonds or structured securities.

(7) Investments in subsidiaries, controlled and affiliated entities

The Society has no subsidiaries.

(8) Investment in joint ventures, partnerships and limited liability entities

The Society does not have minor ownership interests in joint ventures.

(9) Derivatives

There are no derivatives

(10) Investment income as a factor in the premium deficiency calculation

The Society does not anticipate investment income to be a factor in the premium deficiency calculation.

(11) Liabilities for losses and loss/claim adjustment expenses

The Society does not issue accident and health contracts.

(12) Changes in capitalization policy

The Society has not modified its capitalization policy from the prior period.

(13) Pharmaceutical rebate receivables

The Society does not have Pharmaceutical Rebate receivables.

D. Going Concern

None

Notes to the Financial Statements

- 2. Accounting Changes and Corrections of Errors** - None
- 3. Business Combinations and Goodwill** - None
- 4. Discontinued Operations** - None
- 5. Investments** - None
- 6. Joint Ventures, Partnerships and Limited Liability Companies** - None
- 7. Investment Income** - None
- 8. Derivative Instruments** - None
- 9. Income Taxes** - None
- 10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties** - None
- 11. Debt** - None
- 12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans**
 - A. Defined Benefit Plan - None
 - B. Investment Policies and Strategies of Plan Assets - None
 - C. Fair Value of Each Class of Plan Assets - None
 - D. Expected Long-Term Rate of Return for the Plan Assets - None
 - E. Defined Contribution Plans

Alliance of Transylvanian Saxons employees are covered by a qualified defined contribution pension plan sponsored by the Alliance of Transylvanian Saxons.

Contributions of 10% of each employee's compensation are made each year. The Society's contribution for the plan was approximately \$22,800 for 2020 and \$25,200 for 2019. The approximate fair value of the plan assets at December 31, 2020 was \$2.0 million.
 - F. Multiemployer Plans - None
 - G. Consolidated/Holding Company Plans - None
 - H. Postemployment Benefits and Compensated Absences - None
 - I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17) - None
- 13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations** - None
- 14. Liabilities, Contingencies and Assessments** - None
- 15. Leases** - None
- 16. Information About Financial Instruments With Off-Balance-Sheet Risk And Financial Instruments With Concentrations of Credit Risk** - None
- 17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities** - None
- 18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans** - None
- 19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators** - None
- 20. Fair Value Measurements** - None
- 21. Other Items** - None
- 22. Events Subsequent**

	Current Year	Prior Year
A. Did the reporting entity write accident and health insurance premium that is subject to Section 9010 of the Federal Affordable Care Act?	NO	
B. ACA fee assessment payable for the upcoming year	\$.....	\$.....
C. ACA fee assessment paid	\$.....	\$.....
D. Premium written subject to ACA 9010 assessment	\$.....	\$.....
E. Total adjusted capital before surplus adjustment	\$.... 13,662,624	
F. Total adjusted capital after surplus adjustment	\$.... 13,662,624	
G. Authorized control level	\$.... 1,025,951	
H. Would reporting the ACA assessment as of Dec 31 have triggered an RBC action level?	NO	

Notes to the Financial Statements**23. Reinsurance****A. Ceded Reinsurance Report**

Section 1 – General Interrogatories

(1) Are any of the reinsurers, listed in Schedule S as non-affiliated, owned in excess of 10% or controlled, either directly or indirectly, by the company or by any representative, officer, trustee, or director of the company?

Yes () No (X)

(2) Have any policies issued by the company been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) that is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor or any other person not primarily engaged in the insurance business?

Yes () No (X)

Section 2 – Ceded Reinsurance Report – Part A

(1) Does the company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credits?

Yes () No (X)

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

b. What is the total amount of reinsurance credits taken, whether as an asset or as a reduction of liability, for these agreements in this statement? \$ 1,123

(2) Does the reporting entity have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies?

Yes () No (X)

Section 3 – Ceded Reinsurance Report – Part B

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

(2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the company as of the effective date of the agreement?

Yes () No (X)

B. Uncollectible Reinsurance - None**C. Commutation of Reinsurance Reflected in Income and Expenses - None****D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation - None****E. Reinsurance of Variable Annuity Contracts with an Affiliated Captive Reinsurer - None****F. Reinsurance Agreement with an Affiliated Captive Reinsurer - None****G. Ceding Entities That Utilize Captive Reinsurers to Assume Reserves Subject to the XXX/AXXX Captive Framework**

(1) Captive reinsurers in which a Risk-Based Capital shortfall exists per the Risk-Based Capital XXX/AXXX Captive Reinsurance Consolidated Exhibit

(a) Captives with Risk-Based Capital shortfall

(1)	(2)	(3)	(4)	(5)
NAIC Company	Code	ID Number	Name of Captive Reinsurer	Amount of Risk-Based Capital Shortfall
Cession ID				\$
Total				

(b) Effect of Risk-Based Capital shortfall on Total Adjusted Capital (TAC)

	Amount
1. Total Adjusted Capital.....	\$.... 13,662,624
2. Risk-Based Capital Shortfall.....	\$.....
3. Total Adjusted Capital Before Risk-Based Capital Shortfall.....	\$.... 13,662,624

(2) Captive reinsurers for which a non-zero primary security shortfall is shown on the Risk-Based Capital XXX/AXXX Reinsurance Primary Security Shortfall by Cession Exhibit

NAIC Company	Code	ID Number	Name of Captive Reinsurer	Amount of Primary Security Shortfall
Cession ID				\$
Total				

H. Reinsurance Credit - None

Notes to the Financial Statements**24. Retrospectively Rated Contracts & Contracts Subject to Redetermination**

- A. Method Used to Estimate - None
- B. Method Used to Record - None
- C. Amount and Percent of Net Retrospective Premiums - None
- D. Medical Loss Ratio Rebates Required Pursuant to the Public Health Service Act - None
- E. Risk-Sharing Provisions of the Affordable Care Act (ACA)

N/A

- (1) Accident and health insurance premium subject to the Affordable Care Act risk-sharing provisions

N/A

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

- (2) Impact of Risk-Sharing Provisions of the Affordable Care Act on admitted assets, liabilities and revenue for the current year - None
- (3) Roll-forward of prior year ACA risk-sharing provisions for the following asset (gross of any nonadmission) and liability balances, along with the reasons for adjustments to prior year balance - None
- (4) Roll-forward of risk corridors asset and liability balances by program benefit year - None
- (5) ACA risk corridors receivable as of reporting date - None

25. Change in Incurred Losses and Loss Adjustment Expenses - None**26. Intercompany Pooling Arrangements - None****27. Structured Settlements - None****28. Health Care Receivables - None****29. Participating Policies - None****30. Premium Deficiency Reserves - None****31. Reserves for Life Contracts and Annuity Contracts**

1. The Society waives deduction of deferred fractional premiums upon death of the insured and returns any portion of the final premium beyond the date of death. A reserve has been included in Exhibit 5 in the amount of \$2,723. Surrender values are not promised in excess of the legally computed reserves. The following exception is noted: NONE.
2. Extra Premiums are charged for substandard lives. Reserves are determined by computing the regular mean reserve for the plan at the rated age and holding, in addition, one-half (1/2) of the extra annual premium \$4,167.
3. As of December 31, 2020, the Society had \$0 of insurance in force for which the gross premiums are less than the net premiums according to the standard of valuation set by the State of Ohio.
4. The Tabular Interest (Page 7, Line 4) has been determined by formula as described in the instructions for Page 7. The Tabular Less Actual Reserve Released (Page 7, Line 5) has been determined by formula as described in the instructions for Page 7. The Tabular Cost (Page 7, Line 9) has been determined by formula as described in the instructions for Page 7.
5. The Tabular Interest on Funds Not Involving Life Contingencies in Exhibit 7 are determined as the ending reserve plus funds withdrawn less funds added less beginning reserve. The resulting tabular interest is tested for reasonableness.
6. Details for Other Changes - None

32. Analysis of Annuity Actuarial Reserves and Deposit Type Contract Liabilities by Withdrawal Characteristics**A. Individual Annuities**

		Separate Account General Account	Separate Account With Guarantees	Separate Account Nonguaranteed	Total	Percent of Total
(1)	Subject to discretionary withdrawal					
a.	With market value adjustment.....	\$	\$	\$	\$	%
b.	At book value less current surrender charge of 5% or more.....	573,653			573,653	0.778
c.	At fair value.....					
d.	Total with market value adjustment or at fair value (total of a through c).....	573,653			573,653	0.778
e.	At book value without adjustment (minimal or no charge or adjustment).....	70,431,878			70,431,878	95.549
(2)	Not subject to discretionary withdrawal.....	2,707,504			2,707,504	3.673
(3)	Total (gross: direct + assumed).....	73,713,035			73,713,035	100.000 %
(4)	Reinsurance ceded.....					
(5)	Total (net) (3 - 4).....	\$ 73,713,035	\$	\$	\$ 73,713,035	
(6)	Amount included in A(1)b above that will move to A(1)e for the first time within the year after the statement date:.....	\$	\$	\$	\$	

B. Group Annuities - None

Notes to the Financial Statements**32. Analysis of Annuity Actuarial Reserves and Deposit Type Contract Liabilities by Withdrawal Characteristics (Continued)****C. Deposit-Type Contracts (no life contingencies)**

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

D. Reconciliation of Total Annuity Actuarial Reserves and Deposit Fund Liabilities Amounts

	Amount
Life & Accident & Health Annual Statement	
(1) Exhibit 5, annuities, total (net)	\$ 64,119,830
(2) Exhibit 5, supplementary contracts with life contingencies section, total (net)	\$
(3) Exhibit of Deposit-type Contracts, Line 14, Column 1	\$ 9,593,205
(4) Subtotal	\$ 73,713,035
Separate Accounts Annual Statement	
(5) Exhibit 3, Line 0299999, Column 2	\$
(6) Exhibit 3, Line 0399999, Column 2	\$
(7) Policyholder dividend and coupon accumulations	\$
(8) Policyholder premiums	\$
(9) Guaranteed interest contracts	\$
(10) Other contract deposit funds	\$
(11) Subtotal	\$
(12) Combined total	\$ 73,713,035

33. Analysis of Life Actuarial Reserves by Withdrawal Characteristics**A. General Account**

	Account Value	Cash Value	Reserve
(1) Subject to discretionary withdrawal, surrender values or policy loans:			
a. Term Policies with Cash Value	\$	\$	\$
b. Universal Life	\$	\$	\$
c. Universal Life with Secondary Guarantees	\$	\$	\$
d. Indexed Universal Life	\$	\$	\$
e. Indexed Universal Life with Secondary Guarantees	\$	\$	\$
f. Indexed Life	\$	\$	\$
g. Other Permanent Cash Value Life Insurance	\$	\$	\$
h. Variable Life	\$	\$	\$
i. Variable Universal Life	\$	\$	\$
j. Miscellaneous Reserves	\$	\$	\$
(2) Not subject to discretionary withdrawal or no cash values			
a. Term Policies without Cash Value	XXX	XXX	XXX
b. Accidental Death Benefits	XXX	XXX	XXX
c. Disability – Active Lives	XXX	XXX	XXX
d. Disability – Disabled Lives	XXX	XXX	XXX
e. Miscellaneous Reserves	XXX	XXX	XXX
(3) Total (gross: direct + assumed)	\$	\$	\$
(4) Reinsurance Ceded	\$	\$	\$
(5) Total (net) (3) - (4)	<u>\$</u>	<u>\$</u>	<u>\$</u>

Notes to the Financial Statements**33. Analysis of Life Actuarial Reserves by Withdrawal Characteristics (Continued)****B. Separate Account with Guarantees**

		Account Value	Cash Value	Reserve
(1)	Subject to discretionary withdrawal, surrender values or policy loans:			
a.	Term Policies with Cash Value	\$	\$	\$
b.	Universal Life .....	.....	.....	.....
c.	Universal Life with Secondary Guarantees .....	.....	.....	.....
d.	Indexed Universal Life .....	.....	.....	.....
e.	Indexed Universal Life with Secondary Guarantees .....	.....	.....	.....
f.	Indexed Life .....	.....	.....	.....
g.	Other Permanent Cash Value Life Insurance .....	.....	.....	.....
h.	Variable Life .....	.....	.....	.....
i.	Variable Universal Life .....	.....	.....	.....
j.	Miscellaneous Reserves .....	.....	.....	.....
(2)	Not subject to discretionary withdrawal or no cash values			
a.	Term Policies without Cash Value	XXX	XXX .....	.....
b.	Accidental Death Benefits	XXX	XXX .....	.....
c.	Disability – Active Lives	XXX	XXX .....	.....
d.	Disability – Disabled Lives	XXX	XXX .....	.....
e.	Miscellaneous Reserves	XXX	XXX .....	.....
(3)	Total (gross: direct + assumed) .....	.....	.....	.....
(4)	Reinsurance Ceded .....	.....	.....	.....
(5)	Total (net) (3) - (4)	\$	\$	\$

C. Separate Account Nonguaranteed

		Account Value	Cash Value	Reserve
(1)	Subject to discretionary withdrawal, surrender values or policy loans:			
a.	Term Policies with Cash Value	\$	\$	\$
b.	Universal Life .....	.....	.....	.....
c.	Universal Life with Secondary Guarantees .....	.....	.....	.....
d.	Indexed Universal Life .....	.....	.....	.....
e.	Indexed Universal Life with Secondary Guarantees .....	.....	.....	.....
f.	Indexed Life .....	.....	.....	.....
g.	Other Permanent Cash Value Life Insurance .....	.....	.....	.....
h.	Variable Life .....	.....	.....	.....
i.	Variable Universal Life .....	.....	.....	.....
j.	Miscellaneous Reserves .....	.....	.....	.....
(2)	Not subject to discretionary withdrawal or no cash values			
a.	Term Policies without Cash Value	XXX	XXX .....	.....
b.	Accidental Death Benefits	XXX	XXX .....	.....
c.	Disability – Active Lives	XXX	XXX .....	.....
d.	Disability – Disabled Lives	XXX	XXX .....	.....
e.	Miscellaneous Reserves	XXX	XXX .....	.....
(3)	Total (gross: direct + assumed) .....	.....	.....	.....
(4)	Reinsurance Ceded .....	.....	.....	.....
(5)	Total (net) (3) - (4)	\$	\$	\$

Notes to the Financial Statements**33. Analysis of Life Actuarial Reserves by Withdrawal Characteristics (Continued)**

D. Reconciliation of Total Life Insurance Reserves

	Amount
Life & Accident & Health Annual Statement:	
(1) Exhibit 5, Life Insurance Section, Total (net).....	\$ 8,030,396
(2) Exhibit 5, Accidental Death Benefits Section, Total (net).....	6,385
(3) Exhibit 5, Disability – Active Lives Section, Total (net).....	1,203
(4) Exhibit 5, Disability – Disabled Lives Section, Total (net).....	.....
(5) Exhibit 5, Miscellaneous Reserves Section, Total (net).....	6,890
(6) Subtotal.....	<u>8,044,874</u>
Separate Accounts Annual Statement:	
(7) Exhibit 3, Line 0199999, Column 2.....	.....
(8) Exhibit 3, Line 0499999, Column 2.....	.....
(9) Exhibit 3, Line 0599999, Column 2.....	.....
(10) Subtotal (Lines (7) through (9)).....	<u>.....</u>
(11) Combined Total ((6) and (10)).....	<u>\$ 8,044,874</u>

34. Premiums and Annuity Considerations Deferred and Uncollected

A. Deferred and Uncollected Life Insurance Premiums and Annuity Considerations

Type	Gross	Net of Loading
(1) Industrial.....	\$	\$
(2) Ordinary new business.....	138	102
(3) Ordinary renewal.....	5,817	4,794
(4) Credit life.....	.....	.....
(5) Group life.....	.....	.....
(6) Group annuity.....	.....	.....
(7) Totals.....	<u>\$ 5,955</u>	<u>\$ 4,896</u>

35. Separate Accounts - None**36. Loss/Claim Adjustment Expenses - None**

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

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

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

1.3 State regulating?

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

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

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

2.2 If yes, date of change:

3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2019

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

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

3.4 By what department or departments?
Ohio

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

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

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

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

4.12 renewals? Yes [] No [X]

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

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

4.22 renewals? Yes [] No [X]

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

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

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

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

6.2 If yes, give full information:

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

7.2 If yes,

7.21 State the percentage of foreign control %

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

1 Nationality	2 Type of Entity

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

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

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

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

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

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

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

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

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

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

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

10.5	Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws?	Yes [<input checked="" type="checkbox"/>]	No [<input type="checkbox"/>]	N/A [<input type="checkbox"/>]
10.6	If the response to 10.5 is no or n/a, please explain:			
11.	What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification? <u>Miller & Newberg, Inc. 8717 W. 110th St. Suite 530. Overland Park, KS 66210</u>			
12.1	Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?	Yes [<input type="checkbox"/>]	No [<input checked="" type="checkbox"/>]	
12.11	Name of real estate holding company			
12.12	Number of parcels involved	<hr/> 0		
12.13	Total book/adjusted carrying value	\$	<hr/> 0	
12.2	If yes, provide explanation			
13.	FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:			
13.1	What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?			
13.2	Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located?	Yes [<input type="checkbox"/>]	No [<input type="checkbox"/>]	
13.3	Have there been any changes made to any of the trust indentures during the year?	Yes [<input type="checkbox"/>]	No [<input type="checkbox"/>]	
13.4	If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?	Yes [<input type="checkbox"/>]	No [<input type="checkbox"/>]	N/A [<input type="checkbox"/>]
14.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?	Yes [<input checked="" type="checkbox"/>]	No [<input type="checkbox"/>]	
14.11	If the response to 14.1 is no, please explain:			
14.2	Has the code of ethics for senior managers been amended?	Yes [<input type="checkbox"/>]	No [<input checked="" type="checkbox"/>]	
14.21	If the response to 14.2 is yes, provide information related to amendment(s).			
14.3	Have any provisions of the code of ethics been waived for any of the specified officers?	Yes [<input type="checkbox"/>]	No [<input checked="" type="checkbox"/>]	
14.31	If the response to 14.3 is yes, provide the nature of any waiver(s).			
15.1	Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List?	Yes [<input type="checkbox"/>]	No [<input checked="" type="checkbox"/>]	
15.2	If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.			
	1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount
			\$	
BOARD OF DIRECTORS				
16.	Is the purchase or sale of all investments of the reporting entity passed upon either by the Board of Directors or a subordinator committee thereof?	Yes [<input checked="" type="checkbox"/>]	No [<input type="checkbox"/>]	
17.	Does the reporting entity keep a complete permanent record of the proceedings of its Board of Directors and all subordinate committees thereof?	Yes [<input checked="" type="checkbox"/>]	No [<input type="checkbox"/>]	
18.	Has the reporting entity an established procedure for disclosure to its Board of Directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person?	Yes [<input checked="" type="checkbox"/>]	No [<input type="checkbox"/>]	
FINANCIAL				
19.	Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)?	Yes [<input type="checkbox"/>]	No [<input checked="" type="checkbox"/>]	
20.1	Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):			
20.11	To directors or other officers	\$	<hr/> 0	
20.12	To stockholders not officers	\$	<hr/> 0	
20.13	Trustees, supreme or grand (Fraternal only)	\$	<hr/> 0	
20.2	Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):	\$	<hr/> 0	
20.21	To directors or other officers	\$	<hr/> 0	
20.22	To stockholders not officers	\$	<hr/> 0	
20.23	Trustees, supreme or grand (Fraternal only)	\$	<hr/> 0	
21.1	Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement?	Yes [<input type="checkbox"/>]	No [<input checked="" type="checkbox"/>]	
21.2	If yes, state the amount thereof at December 31 of the current year:			
21.21	Rented from others	\$	<hr/> 0	
21.22	Borrowed from others	\$	<hr/> 0	
21.23	Leased from others	\$	<hr/> 0	
21.24	Other	\$	<hr/> 0	
22.1	Does this statement include payments for assessments as described in the <i>Annual Statement Instructions</i> other than guaranty fund or guaranty association assessments?	Yes [<input type="checkbox"/>]	No [<input checked="" type="checkbox"/>]	
22.2	If answer is yes:			
22.21	Amount paid as losses or risk adjustment	\$	<hr/> 0	
22.22	Amount paid as expenses	\$	<hr/> 0	
22.23	Other amounts paid	\$	<hr/> 0	
23.1	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?	Yes [<input type="checkbox"/>]	No [<input checked="" type="checkbox"/>]	

GENERAL INTERROGATORIES**PART 1 - COMMON INTERROGATORIES**

23.2	If yes, indicate any amounts receivable from parent included in the Page 2 amount:	\$ _____ 0						
INVESTMENT								
24.01	Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date (other than securities lending programs addressed in 24.03)?	Yes [X] No []						
24.02	If no, give full and complete information, relating thereto:							
24.03	For securities lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet (an alternative is to reference Note 17 where this information is also provided).							
24.04	For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions.	\$ _____ 0						
24.05	For the reporting entity's securities lending program, report amount of collateral for other programs.	\$ _____ 0						
24.06	Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract?	Yes [] No [] N/A [X]						
24.07	Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%?	Yes [] No [] N/A [X]						
24.08	Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending?	Yes [] No [] N/A [X]						
24.09	For the reporting entity's securities lending program, state the amount of the following as of December 31 of the current year:							
24.091	Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2:	\$ _____ 0						
24.092	Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2:	\$ _____ 0						
24.093	Total payable for securities lending reported on the liability page:	\$ _____ 0						
25.1	Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is current in force? (Exclude securities subject to Interrogatory 21.1 and 24.03.)	Yes [] No [X]						
25.2	If yes, state the amount thereof at December 31 of the current year:							
25.21	Subject to repurchase agreements	\$ _____ 0						
25.22	Subject to reverse repurchase agreements	\$ _____ 0						
25.23	Subject to dollar repurchase agreements	\$ _____ 0						
25.24	Subject to reverse dollar repurchase agreements	\$ _____ 0						
25.25	Placed under option agreements	\$ _____ 0						
25.26	Letter stock or securities restricted as sale – excluding FHLB Capital Stock	\$ _____ 0						
25.27	FHLB Capital Stock	\$ _____ 0						
25.28	On deposit with states	\$ _____ 0						
25.29	On deposit with other regulatory bodies	\$ _____ 0						
25.30	Pledged as collateral – excluding collateral pledged to an FHLB	\$ _____ 0						
25.31	Pledged as collateral to FHLB – including assets backing funding agreements	\$ _____ 0						
25.32	Other	\$ _____ 0						
25.3	For category (25.26) provide the following:							
	<table border="1" style="width: 100%;"><thead><tr><th style="text-align: center;">1 Nature of Restriction</th><th style="text-align: center;">2 Description</th><th style="text-align: center;">3 Amount</th></tr></thead><tbody><tr><td></td><td></td><td style="text-align: right;">\$ _____</td></tr></tbody></table>	1 Nature of Restriction	2 Description	3 Amount			\$ _____	
1 Nature of Restriction	2 Description	3 Amount						
		\$ _____						
26.1	Does the reporting entity have any hedging transactions reported on Schedule DB?	Yes [] No [X]						
26.2	If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement.	Yes [] No [] N/A [X]						
Lines 26.3 through 26.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:								
26.3	Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a results of interest rate sensitivity?	Yes [] No [X]						
26.4	If the response to 26.3 is yes, does the reporting entity utilize:							
26.41	Special accounting provision of SSAP No. 108	Yes [] No []						
26.42	Permitted accounting practice	Yes [] No []						
26.43	Other accounting guidance	Yes [] No []						
26.5	By responding yes to 26.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following:	Yes [] No []						
	<ul style="list-style-type: none"> • The reporting entity has obtained explicit approval from the domiciliary state. • Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21. • Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guidance Conditional Tail Expectation Amount. • Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts. 							
27.1	Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity?	Yes [] No [X]						
27.2	If yes, state the amount thereof at December 31 of the current year:	\$ _____ 0						
28.	Excluding items in Schedule E-Part 3-Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC <i>Financial Condition Examiners Handbook</i> ?	Yes [X] No []						
28.01	For agreements that comply with the requirements of the NAIC <i>Financial Condition Examiners Handbook</i> , complete the following:							
	<table border="1" style="width: 100%;"><thead><tr><th style="text-align: center;">1 Name of Custodian(s)</th><th style="text-align: center;">2 Custodian's Address</th></tr></thead><tbody><tr><td style="text-align: center;">Fifth Third Bank</td><td style="text-align: center;">5050 Kingsley Drive, MD1MOB2D, Cincinnati, OH 45263</td></tr></tbody></table>	1 Name of Custodian(s)	2 Custodian's Address	Fifth Third Bank	5050 Kingsley Drive, MD1MOB2D, Cincinnati, OH 45263			
1 Name of Custodian(s)	2 Custodian's Address							
Fifth Third Bank	5050 Kingsley Drive, MD1MOB2D, Cincinnati, OH 45263							
28.02	For all agreements that do not comply with the requirements of the NAIC <i>Financial Condition Examiners Handbook</i> , provide the name, location and a complete explanation							
	1	2	3					

GENERAL INTERROGATORIES**PART 1 - COMMON INTERROGATORIES**

Name(s)	Location(s)	Complete Explanation(s)
---------	-------------	-------------------------

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

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

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

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

1 Name of Firm or Individual	2 Affiliation
---------------------------------	------------------

28.0597 For those firms/individuals listed in the table for Question 28.05, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets? Yes [] No [X]

28.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 28.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets? Yes [] No [X]

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

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

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

29.2 If yes, complete the following schedule:

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

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

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

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

		1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1	Bonds	\$ 85,318,147	\$ 104,619,599	\$ 19,301,451
30.2	Preferred Stocks	\$ 0	\$ 0	\$ 0
30.3	Totals	\$ 85,318,147	\$ 104,619,599	\$ 19,301,451

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

Clearwater Analytics, Inc. and Custodian/Broker statements

31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes [X] No []

31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes [X] No []

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

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

32.2 If no, list exceptions:

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

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

Has the reporting entity self-designated 5GI securities?

Yes [] No [X]

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

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

Has the reporting entity self-designated PLGI securities?

Yes [] No [X]

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

- a. The shares were purchased prior to January 1, 2019.
- b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.

GENERAL INTERROGATORIES**PART 1 - COMMON INTERROGATORIES**

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

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

Yes [X] No []

36. By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E, Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:

- a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.
- b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.
- c. If the investment is with a related party or affiliate then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.
- d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 36.a-36.c are reported as long-term investments.

Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria?

Yes [X] No [] N/A []

OTHER

37.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? \$ 625

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

1 Name	2 Amount Paid
NFIB	\$ 500

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

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

1 Name	2 Amount Paid
	\$

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

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

1 Name	2 Amount Paid
	\$

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

1.1	Does the reporting entity have any direct Medicare Supplement Insurance in force?	Yes []	No [X]
1.2	If yes, indicate premium earned on U.S. business only.	\$	0
1.3	What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?	\$	0
1.3	Reason for excluding:		
1.4	Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above.	\$	0
1.5	Indicate total incurred claims on all Medicare Supplement insurance.	\$	0
1.6	Individual policies:		
	Most current three years:		
1.61	Total premium earned	\$	0
1.62	Total incurred claims	\$	0
1.63	Number of covered lives	\$	0
	All years prior to most current three years:		
1.64	Total premium earned	\$	0
1.65	Total incurred claims	\$	0
1.66	Number of covered lives	\$	0
1.7	Group policies:		
	Most current three years:		
1.71	Total premium earned	\$	0
1.72	Total incurred claims	\$	0
1.73	Number of covered lives	\$	0
	All years prior to most current three years:		
1.74	Total premium earned	\$	0
1.75	Total incurred claims	\$	0
1.76	Number of covered lives	\$	0
2.	Health Test:		
		1 Current Year	2 Prior Year
2.1	Premium Numerator	\$ 0	\$ 0
2.2	Premium Denominator	\$ 4,665,230	\$ 1,973,635
2.3	Premium Ratio (2.1/2.2)	0.0%	0.0%
2.4	Reserve Numerator	\$ 0	\$ 0
2.5	Reserve Denominator	\$ 74,036,583	\$ 71,464,569
2.6	Reserve Ratio (2.4/2.5)	0.0%	0.0%
3.1	Does the reporting entity have Separate Accounts?	Yes []	No [X]
3.2	If yes, has a Separate Accounts statement been filed with this Department	Yes []	No []
3.3	What portion of capital and surplus funds of the reporting entity covered by assets in the Separate Accounts statement, is not currently distributable from the Separate Accounts to the general account for use by the general account?	\$ 0	
3.4	State the authority under which Separate Accounts are maintained:		
3.5	Was any of the reporting entity's Separate Accounts business reinsured as of December 31?	Yes []	No [X]
3.6	Has the reporting entity assumed by reinsurance any Separate Accounts business as of December 31?	Yes []	No [X]
3.7	If the reporting entity has assumed Separate Accounts business, how much, if any, reinsurance assumed receivable for reinsurance of Separate Accounts reserve expense allowances is included as a negative amount in the liability for "Transfers to Separate Accounts due or accrued (net)?"	\$ 0	
4.	For reporting entities having sold annuities to another insurer where the insurer purchasing the annuities has obtained a release of liability from the claimant (payee) as the result of the purchase of an annuity from the reporting entity only:		
4.1	Amount of loss reserves established by these annuities during the current year:	\$ 0	
4.2	List the name and location of the insurance company purchasing the annuities and the statement value on the purchase date of the annuities.		
		1 P&C Insurance Company and Location	2 Statement Value on Purchase Date of Annuities (i.e., Present Value)
5.1	Do you act as a custodian for health savings accounts?	Yes []	No [X]
5.2	If yes, please provide the amount of custodial funds held as of the reporting date.	\$ 0	
5.3	Do you act as an administrator for health savings accounts?	Yes []	No [X]
5.4	If yes, please provide the balance of the funds administered as of the reporting date.	\$ 0	
5.6.1	Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers?	Yes []	No [X]
			N/A []

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

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

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

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

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

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

Yes [X] No []

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

Yes [] No []

Life, Accident and Health Companies Only:

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

Yes [] No []

9.2 Net reimbursement of such expenses between reporting entities:

9.21 Paid	\$	0
9.22 Received	\$	0

10.1 Does the reporting entity write any guaranteed interest contracts?

Yes [] No []

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

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

11. For stock reporting entities only:

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

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

12.11 Cash	\$	0
12.12 Stock	\$	0

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

Yes [] No []

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

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

Yes [] No []

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

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

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

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

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

\$ 0

Fraternal Benefit Societies Only:

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

Yes [X] No []

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

Monthly

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

Delegates at Convention

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

GENERAL INTERROGATORIES**PART 2 – LIFE, ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES INTERROGATORIES**One Delegate for each 50 members in good standing or fractions of 26 or more. Minimum of 2 Delegates and Maximum of 12 Delegates per Lodge.

18.1 How often are regular meetings of the governing body held?
Every two years

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

18.3 When and where will the next regular or special meeting of the governing body be held?
Due to Covid-19 and shut-downs, the Convention that was scheduled for May 30 & 31, 2020 in Cleveland, Ohio was canceled. The next Convention will be held on May 14 & 15, 2022

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

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

19. How are the expenses of the governing body defrayed?
Society's general fund

20. When and by whom are the officers and directors elected?
By Delegates at the Convention. During the Covid-19 shut-down in 2020, Branches still selected Delegates. Those Delegates voted on budget items and election of Board of Directors through mail-in balloting. Results were reported in the Society's official newspaper.

21. What are the qualifications for membership?
Good Moral Character, Interest in the Transylvanian Saxons culture and traditions

22. What are the limiting ages for admission?
Age 0 – 70 for Life Insurance Plans, no age limits for Annuities

23. What is the minimum and maximum insurance that may be issued on any one life?
Minimum of \$1,500; no maximum

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

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

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

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

27. What proportion of first and subsequent year's payments may be used for management expenses?
27.11 First Year 75.0%
27.12 Subsequent Years 15.0%

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

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

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

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

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

30.2 If yes, when?

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

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

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

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

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

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

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

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

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

Date	Outstanding Lien Amount
	\$

FIVE-YEAR HISTORICAL DATA

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

\$000 omitted for amounts of life insurance

	1 2020	2 2019	3 2018	4 2017	5 2016
Life Insurance in Force (Exhibit of Life Insurance)					
1. Ordinary - whole life and endowment (Line 34, Col. 4).....	26,090	26,180	26,198	26,239	26,163
2. Ordinary - term (Line 21, Col. 4, less Line 34, Col. 4).....		0			
3. Credit life (Line 21, Col. 6).....					
4. Group, excluding FEGLI/SGLI (Line 21, Col. 9 less Lines 43 & 44, Col. 4).....					
5. Industrial (Line 21, Col. 2).....					
6. FEGLI/SGLI (Lines 43 & 44, Col. 4).....					
7. Total (Line 21, Col. 10).....	26,090	26,180	26,198	26,239	26,163
7.1 Total in force for which VM-20 deterministic/stochastic reserves are calculated.....				XXX	
New Business Issued (Exhibit of Life Insurance)					
8. Ordinary - whole life and endowment (Line 34, Col. 2).....	131	102	270	254	89
9. Ordinary - term (Line 2, Col. 4, less Line 34, Col. 2).....					
10. Credit life (Line 2, Col. 6).....					
11. Group (Line 2, Col. 9).....					
12. Industrial (Line 2, Col. 2).....					
13. Total (Line 2, Col. 10).....	131	102	270	254	89
Premium Income - Lines of Business (Exhibit 1-Part 1)					
14. Industrial life (Line 20.4, Col. 2).....					
15.1 Ordinary life insurance (Line 20.4, Col.. 3).....	71,764	75,617	78,320	85,750	70,871
15.2 Ordinary individual annuities (Line 20.4, Col. 4).....	4,593,466	1,898,018	3,635,688	2,772,499	2,701,897
16. Credit life (group and individual) (Line 20.4, Col. 5).....					
17.1 Group life insurance (Line 20.4, Col. 6).....					
17.2 Group annuities (Line 20.4, Col. 7).....					
18.1 A&H - group (Line 20.4, Col. 8).....					
18.2 A&H - credit (group and individual) (Line 20.4, Col. 9).....					
18.3 A&H - other (Line 20.4, Col. 10).....					
19. Aggregate of all other lines of business (Line 20.4, Col. 11).....					
20. Total.....	4,665,230	1,973,635	3,714,008	2,858,249	2,772,768
Balance Sheet (Pages 2 and 3)					
21. Total admitted assets excluding Separate Accounts business (Page 2, Line 26, Col. 3).....	98,107,283	94,283,949	93,210,584	89,313,861	87,313,180
22. Total liabilities excluding Separate Accounts business (Page 3, Line 26).....	85,142,188	81,839,682	81,831,835	79,082,996	77,793,760
23. Aggregate life reserves (Page 3, Line 1).....	72,164,703	70,050,007	71,181,342	68,463,084	66,979,971
23.1 Excess VM-20 deterministic/stochastic reserve over NPR related to Line 7.1.....					XXX
24. Aggregate A&H reserves (Page 3, Line 2).....					
25. Deposit-type contract funds (Page 3, Line 3).....	9,593,204	8,995,312	8,189,011	8,489,150	7,876,822
26. Asset valuation reserve (Page 3, Line 24.01).....	670,029	479,526	296,806	510,317	567,873
27. Capital (Page 3, Lines 29 & 30).....					
28. Surplus (Page 3, Line 37).....	12,965,095	12,444,267	11,378,750	10,230,865	9,519,420
Cash Flow (Page 5)					
29. Net cash from operations (Line 11).....	3,837,317	325,060	3,852,069	2,045,168	2,246,716
Risk-Based Capital Analysis					
30. Total adjusted capital.....	13,662,624	12,951,293	11,703,056	10,768,682	10,087,293
31. Authorized control level risk-based capital.....	1,025,951	833,636	1,079,697	1,233,507	1,226,634
Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Line No. /Page 2, Line 12, Col. 3) x 100.0					
32. Bonds (Line 1).....	.88.1	89.5	80.7	81.6	77.9
33. Stocks (Lines 2.1 and 2.2).....	1.3	1.2	0.9	1.1	1.3
34. Mortgage loans on real estate (Lines 3.1 and 3.2).....					
35. Real estate (Line 4.1, 4.2 and 4.3).....	0.0	0.0	0.0	0.0	0.0
36. Cash, cash equivalents and short-term investments (Line 5).....	7.8	7.3	16.3	14.0	18.1
37. Contract loans (Line 6).....	0.2	0.3	0.2	0.2	0.2
38. Derivatives (Line 7).....					
39. Other invested assets (Line 8).....	2.6	1.7	1.8	3.0	2.4
40. Receivables for securities (Line 9).....					
41. Securities lending reinvested collateral assets (Line 10).....					
42. Aggregate write-ins for invested assets (Line 11).....					
43. Cash, cash equivalents and invested assets (Line 12).....	100.0	100.0	100.0	100.0	100.0

FIVE-YEAR HISTORICAL DATA

(continued)

	1 2020	2 2019	3 2018	4 2017	5 2016
Investments in Parent, Subsidiaries and Affiliates					
44. Affiliated bonds (Sch. D Summary, Line 12, Col. 1).....					
45. Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1).....					
46. Affiliated common stocks (Sch. D Summary, Line 24, Col. 1).....					
47. Affiliated short-term investments (subtotal included in Sch. DA, Verif., Col. 5, Line 10).....					
48. Affiliated mortgage loans on real estate					
49. All other affiliated.....					
50. Total of above Lines 44 to 49.....	0	0	0	0	0
51. Total investment in parent included in Lines 44 to 49 above.....					
Total Nonadmitted and Admitted Assets					
52. Total nonadmitted assets (Page 2, Line 28, Col. 2).....	652,608	629,840	604,623	587,110	554,601
53. Total admitted assets (Page 2, Line 28, Col. 3).....	98,107,283	94,283,949	93,210,584	89,313,861	87,313,180
Investment Data					
54. Net investment income (Exhibit of Net Investment Income).....	4,383,207	4,631,536	4,471,802	4,373,196	4,277,835
55. Realized capital gains (losses) (Page 4, Line 34, Column 1).....		(28,813)	55,051	(79,638)	41,773
56. Unrealized capital gains (losses) (Page 4, Line 38, Column 1).....	115,731	262,317	(118,625)	(9,608)	114,054
57. Total of above Lines 54, 55 and 56.....	4,498,938	4,865,040	4,408,228	4,283,950	4,433,662
Benefits and Reserve Increase (Page 6)					
58. Total contract/certificate benefits - life (Lines 10, 11, 12, 13, 14 and 15, Col. 1 minus Lines 10, 11, 12, 13, 14 and 15, Cols. 6, 7 & 8).....	5,265,737	5,632,509	3,379,674	3,895,229	3,947,174
59. Total contract/certificate benefits - A&H (Lines 13 & 14, Col. 6).....					
60. Increase in life reserves - other than group and annuities (Line 19, Col. 2).....	(874)	122,521	1,096	19,610	194
61. Increase in A&H reserves (Line 19, Col. 6).....					
62. Dividends to policyholders and refunds to members (Line 30, Col 1).....	51,887	51,821	51,774	51,780	51,943
Operating Percentages					
63. Insurance expense percent (Page 6, Col. 1, Lines 21, 22, & 23 less Line (6) / (Page 6, Col. 1, Line 1 plus Exhibit 7, Col. 2, Line 2) x 100.00).....	16.4	38.6	22.7	27.6	30.6
64. Lapse percent (ordinary only) [(Exhibit of Life Insurance, Col. 4, Lines 14 & 15) / 1/2 (Exhibit of Life Insurance, Col. 4, Lines 1 & 21)] x 100.00.....	0.4	0.4	0.5	0.3	0.7
65. A&H loss percent (Schedule H, Part 1, Lines 5 & 6, Col. 2).....					
66. A&H cost containment percent (Schedule H, Part 1, Line 4, Col. 2).....					
67. A&H expense percent excluding cost containment expenses (Schedule H, Part 1, Line 10, Col. 2).....					
A&H Claim Reserve Adequacy					
68. Incurred losses on prior years' claims - group health (Sch. H, Part 3, Line 3.1, Col. 2).....					
69. Prior years' claim liability and reserve - group health (Sch. H, Part 3, Line 3.2, Col. 2).....					
70. Incurred losses on prior years' claims - health other than group (Sch. H, Part 3, Line 3.1, Col. 1 less Col. 2).....					
71. Prior years' claim liability and reserve - health other than group (Sch. H, Part 3, Line 3.2, Col. 1 less Col. 2).....					
Net Gains From Operations After Dividends to Policyholders/Members' Refunds and Federal Income Taxes by Lines of Business (Page 6.x, Line 33)					
72. Industrial life (Page 6.1, Col. 2).....					
73. Ordinary - life (Page 6.1, Col. 1 less Cols. 2, 10 and 12).....	70,201	156,905	11,479	19,820	18,193
74. Ordinary - individual annuities (Page 6, Col. 4).....	525,398	857,830	986,468	723,241	638,569
75. Ordinary - supplementary contracts.....	XXX	XXX			
76. Credit life (Page 6.1, Col. 10 plus Page 6.2, Col. 7).....					
77. Group life (Page 6.2, Col. 1 less Col. 7 less Col. 9).....					
78. Group annuities (Page 6, Col. 5).....					
79. A&H - group (Page 6.5, Col. 3).....					
80. A&H - credit (Page 6.5, Col. 10).....					
81. A&H - other (Page 6.5, Col. 1 less Cols. 3 and 10).....					
82. Aggregate of all other lines of business (Page 6, Col. 8).....					
83. Fraternal (Page 6, Col. 7).....					
84. Total (Page 6, Col. 1).....	595,599	1,014,735	997,947	743,061	656,762

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

Yes [] No []

If no, please explain:

EXHIBIT OF LIFE INSURANCE

(\$000 Omitted for Amounts of Life Insurance)

	Industrial		Ordinary		Credit Life (Group and Individual)		Group			10 Total Amount of Insurance	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance	5 Number of Individual Policies and Group Certificates	6 Amount of Insurance	Number of				
							7 Policies	8 Certificates			
1. In force end of prior year.....			5,458	26,180						26,180	
2. Issued during year.....			18	131						131	
3. Reinsurance assumed.....										0	
4. Revived during year.....										0	
5. Increased during year (net).....										0	
6. Subtotals, Lines 2 to 5.....	0	0	18	131	0	0	0	0	0	131	
7. Additions by dividends during year.....	XXX		XXX	152	XXX		XXX	XXX		152	
8. Aggregate write-ins for increases.....	0	0	0	0	0	0	0	0	0	0	
9. Totals (Lines 1 and 6 to 8).....	0	0	5,476	26,463	0	0	0	0	0	26,463	
Deductions during year:											
10. Death.....			105	244			XXX			244	
11. Maturity.....			1	11			XXX			11	
12. Disability.....							XXX			0	
13. Expiry.....			5	9						9	
14. Surrender.....			23	99						99	
15. Lapse.....										0	
16. Conversion.....							XXX	XXX	XXX	0	
17. Decreased (net).....			4	10						10	
18. Reinsurance.....										0	
19. Aggregate write-ins for decreases.....	0	0	0	0	0	0	0	0	0	0	
20. Totals (Lines 10 to 19).....	0	0	138	373	0	0	0	0	0	373	
21. In force end of year (b) (Line 9 minus Line 20).....	0	0	5,338	26,090	0	0	0	0	0	26,090	
22. Reinsurance ceded end of year.....	XXX		XXX	506	XXX		XXX	XXX		506	
23. Line 21 minus Line 22.....	XXX	0	XXX	25,584	XXX	(a) 0	XXX	XXX	0	25,584	

DETAILS OF WRITE-INS

0801.....										0
0802.....										0
0803.....										0
0898. Summary of remaining write-ins for Line 8 from overflow page	0	0	0	0	0	0	0	0	0	0
0899. Totals (Lines 0801 through 0803 plus 0898) (Line 8 above).....	0	0	0	0	0	0	0	0	0	0
1901.....										0
1902.....										0
1903.....										0
1998. Summary of remaining write-ins for Line 19 from overflow page	0	0	0	0	0	0	0	0	0	0
1999. Totals (Lines 1901 through 1903 plus 1998) (Line 19 above).....	0	0	0	0	0	0	0	0	0	0

Life Accident and Health Companies Only:

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

Fraternal Benefit Societies Only:

(b) Paid-up insurance included in the final totals of Line 21 (including additions to certificates) number of certificates.....5,227 , amount, \$....24,684,811.

Additional accidental death benefits included in life certificates were in amount \$....378,262. Does the society collect any contributions from members for general expenses of the society under fully paid-up certificates? Yes [] No [X]

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

EXHIBIT OF LIFE INSURANCE

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

ADDITIONAL INFORMATION ON INSURANCE IN FORCE END OF YEAR

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

ADDITIONAL INFORMATION ON ORDINARY INSURANCE

Term Insurance Excluding Extended Term Insurance	Issued During Year (Included in Line 2)		In Force End of Year (Included in Line 21)	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance
27. Term policies-decreasing.....				
28. Term policies-other.....				
29. Other term insurance-decreasing.....	....XXX.....		....XXX.....	
30. Other term insurance.....	....XXX.....		....XXX.....	
31. Totals (Lines 27 to 30).....	....0.....	....0.....	....0.....	....0.....
Reconciliation to Lines 2 and 21:				
32. Term additions.....	....XXX.....		....XXX.....	
33. Totals, extended term insurance.....	....XXX.....	....XXX.....		
34. Totals, whole life and endowment.....	....18.....	....131.....	....5,338.....	....26,090.....
35. Totals (Lines 31 to 34).....	....18.....	....131.....	....5,338.....	....26,090.....

CLASSIFICATION OF AMOUNT OF INSURANCE BY PARTICIPATING STATUS

	Issued During Year (Included in Line 2)		In Force End of Year (Included in Line 21)	
	1 Non-Participating	2 Participating	3 Non-Participating	4 Participating
36. Industrial.....				
37. Ordinary.....		....131.....		....26,090.....
38. Credit Life (Group and Individual).....				
39. Group.....				
40. Totals (Lines 36 to 39).....	....0.....	....131.....	....0.....	....26,090.....

ADDITIONAL INFORMATION ON CREDIT LIFE AND GROUP INSURANCE

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

ADDITIONAL ACCIDENTAL DEATH BENEFITS

46. Amount of additional accidental death benefits in force end of year under ordinary policies.....		378
------------------------------------------------------------------------------------------------------	--	-----

BASIS OF CALCULATION OF ORDINARY TERM INSURANCE

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

POLICIES WITH DISABILITY PROVISIONS

Disability Provision	Industrial		Ordinary		Credit		Group	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance	5 Number of Policies	6 Amount of Insurance	7 Number of Certificates	8 Amount of Insurance
48. Waiver of Premium.....		....16.....	....166.....					
49. Disability Income.....								
50. Extended Benefits.....		....XXX.....	....XXX.....					
51. Other.....								
52. Total.....	....0.....	(a) 0	....16.....	(a) 166	....0.....	(a) 0	....0.....	(a) 0

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

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

SUPPLEMENTARY CONTRACTS

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

ANNUITIES

	Ordinary		Group	
	1 Immediate	2 Deferred	3 Contracts	4 Certificates
1. In force end of prior year.....	30	2,272		
2. Issued during year.....	5	54		
3. Reinsurance assumed.....				
4. Increased during year (net).....				
5. Total (Lines 1 to 4).....	35	2,326	0	0
Deductions during year:				
6. Decreased (net).....	1	79		
7. Reinsurance ceded.....				
8. Totals (Lines 6 and 7).....	1	79	0	0
9. In force end of year (Line 5 minus Line 8).....	34	2,247	0	0
Income now payable:				
10. Amount of income payable.....	(a) 216,622	XXX	XXX	(a)
Deferred fully paid:				
11. Account balance.....	XXX	(a)	XXX	(a)
Deferred not fully paid:				
12. Account balance.....	XXX	(a) 61,506,324	XXX	(a)

ACCIDENT AND HEALTH INSURANCE

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

DEPOSIT FUNDS AND DIVIDEND ACCUMULATIONS

			1 Deposit Funds Contracts	2 Dividend Accumulations Contracts
1. In force end of prior year.....			.97	1,716
2. Issued during year.....			8	
3. Reinsurance assumed.....				
4. Increased during year (net).....				
5. Total (Lines 1 to 4).....			105	1,716
Deductions during year:				
6. Decreased (net).....			8	378
7. Reinsurance ceded.....				
8. Totals (Lines 6 and 7).....			8	378
9. In force end of year (Line 5 minus Line 8).....			.97	1,338
10. Amount of account balance.....			(a) 5,081,948	(a) 876,620

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

SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS (b)

Allocated by States and Territories

States, Etc.	1 Active Status (a)	Direct Business Only					
		Life Contracts		4	5	6	7
		2 Life Insurance Premiums	3 Annuity Considerations	Accident and Health Insurance Premiums, Including Policy, Membership and Other Fees	Other Considerations	Total Columns 2 through 5 (b)	Deposit-Type Contracts
1. Alabama.....	AL N					0	
2. Alaska.....	AK N					0	
3. Arizona.....	AZ N					0	
4. Arkansas.....	AR N					0	
5. California.....	CA N					0	
6. Colorado.....	CO N					0	
7. Connecticut.....	CT N					0	
8. Delaware.....	DE N					0	
9. District of Columbia.....	DC N					0	
10. Florida.....	FL N					0	
11. Georgia.....	GA N					0	
12. Hawaii.....	HI N					0	
13. Idaho.....	ID N					0	
14. Illinois.....	IL L	2,340	833,059			.835,399	2,165
15. Indiana.....	IN L	.894	3,100			3,994	
16. Iowa.....	IA N					0	
17. Kansas.....	KS N					0	
18. Kentucky.....	KY N					0	
19. Louisiana.....	LA N					0	
20. Maine.....	ME N					0	
21. Maryland.....	MD N					0	
22. Massachusetts.....	MA N					0	
23. Michigan.....	MI L	.410	.9,155			9,565	
24. Minnesota.....	MN N					0	
25. Mississippi.....	MS N					0	
26. Missouri.....	MO N					0	
27. Montana.....	MT N					0	
28. Nebraska.....	NE N					0	
29. Nevada.....	NV N					0	
30. New Hampshire.....	NH N					0	
31. New Jersey.....	NJ N					0	
32. New Mexico.....	NM N					0	
33. New York.....	NY N					0	
34. North Carolina.....	NC N					0	
35. North Dakota.....	ND N					0	
36. Ohio.....	OH L	24,295	3,215,825			3,240,120	6,626
37. Oklahoma.....	OK N					0	
38. Oregon.....	OR N					0	
39. Pennsylvania.....	PA L	4,168	532,327			.536,495	
40. Rhode Island.....	RI N					0	
41. South Carolina.....	SC N					0	
42. South Dakota.....	SD N					0	
43. Tennessee.....	TN N					0	
44. Texas.....	TX N					0	
45. Utah.....	UT N					0	
46. Vermont.....	VT N					0	
47. Virginia.....	VA N					0	
48. Washington.....	WA N					0	
49. West Virginia.....	WV N					0	
50. Wisconsin.....	WI N					0	
51. Wyoming.....	WY N					0	
52. American Samoa.....	AS N					0	
53. Guam.....	GU N					0	
54. Puerto Rico.....	PR N					0	
55. US Virgin Islands.....	VI N					0	
56. Northern Mariana Islands.....	MP N					0	
57. Canada.....	CAN N					0	
58. Aggregate Other Alien.....	OT XXX	.0	0	.0	.0	0	0
59. Subtotal.....	XXX	32,107	4,593,466	.0	.0	4,625,573	8,791
90. Reporting entity contributions for employee benefit plans.....	XXX					0	
91. Dividends or refunds applied to purchase paid-up additions and annuities.....	XXX	40,125				.40,125	
92. Dividends or refunds applied to shorten endowment or premium paying period.....	XXX					0	
93. Premium or annuity considerations waived under disability or other contract provisions.....	XXX					0	
94. Aggregate other amounts not allocable by State.....	XXX	.0	0	.0	.0	0	0
95. Totals (Direct Business).....	XXX	.72,232	4,593,466	.0	.0	4,665,698	8,791
96. Plus reinsurance assumed.....	XXX					0	
97. Totals (All Business).....	XXX	.72,232	4,593,466	.0	.0	4,665,698	8,791
98. Less reinsurance ceded.....	XXX					0	
99. Totals (All Business) less reinsurance ceded (c).....	XXX	.72,232	4,593,466	(c).0	.0	4,665,698	8,791

DETAILS OF WRITE-INS

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

(a) Active Status Counts:

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

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

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

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

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

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