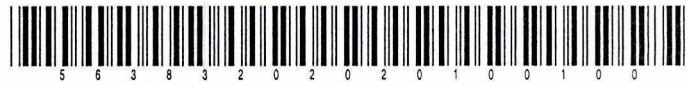


ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America



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

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2020
OF THE CONDITION AND AFFAIRS OF THE

The Order Of United Commercial Travelers Of America

NAIC Group Code _____ NAIC Company Code 56383 Employer's ID Number 31-4273120

Organized under the Laws of _____ (Current) Ohio (Prior) _____, State of Domicile or Port of Entry _____ OH

Country of Domicile _____ United States of America

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

Incorporated/Organized 10/04/1890 Commenced Business 01/16/1888

Statutory Home Office 1801 Watermark Drive Suite 100, Columbus, OH, US 43215
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 1801 Watermark Drive Suite 100, 800-848-0123-1202
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 1801 Watermark Drive Suite 100, Columbus, OH, US 43215
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 1801 Watermark Drive Suite 100, 800-848-0123-1142
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.uct.org

Statutory Statement Contact Andrew Michael Swetnam, 800-848-0123-1135
(Name) (Area Code) (Telephone Number)
aswetnam@uct.org, 614-487-9675
(E-mail Address) (FAX Number)

OFFICERS

UCT President Mary Frances Applegate Chief Executive Officer Kevin Clare Hecker
UCT Secretary/Treasurer Stephen Randal Desselles

OTHER

Kathryn Louise Chilinsky, Vice-President, Membership & Communications Kevin Joe Roberts, Vice-President, Insurance Operations & Agent Services Andrew Michael Swetnam #, Vice-President & Chief Financial Officer
Jeffrey Lee Smith MAAA, FCA, Consulting Actuary

DIRECTORS OR TRUSTEES

<u>Glenn Edward Suever</u>	<u>Stephen Randal Desselles</u>	<u>Mary Frances Applegate</u>
<u>David Allan Van Order</u>	<u>Christopher Barry Phelan</u>	<u>David James Syrota</u>
<u>Dianna Jean Wolfe</u>	<u>Kenneth Eugene Milliser, Jr.</u>	<u>Stanna Kay Funk</u>

State of Ohio SS:
County of Franklin

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

Mary Frances Applegate

Mary Frances Applegate
UCT President

Stephen Randal Desselles

Stephen Randal Desselles
UCT Secretary/Treasurer

Kevin Clare Hecker

Kevin Clare Hecker
Chief Executive Officer

a. Is this an original filing?

Yes [] No []

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)	10,776,358	0	10,776,358	11,719,136
2. Stocks (Schedule D):				
2.1 Preferred stocks	0	0	0	0
2.2 Common stocks	0	0	0	0
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens	0	0	0	0
3.2 Other than first liens	0	0	0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ encumbrances)	0	0	0	0
4.2 Properties held for the production of income (less \$ 0 encumbrances)	0	0	0	0
4.3 Properties held for sale (less \$ encumbrances)	0	0	0	0
5. Cash (\$ 1,159,120 , Schedule E - Part 1), cash equivalents (\$ 1,160,987 , Schedule E - Part 2) and short-term investments (\$ 0 , Schedule DA)	2,320,106	0	2,320,106	1,133,947
6. Contract loans (including \$ 0 premium notes)	662,208	0	662,208	712,710
7. Derivatives (Schedule DB)	0	0	0	0
8. Other invested assets (Schedule BA)	0	0	0	0
9. Receivables for securities	0	0	0	0
10. Securities lending reinvested collateral assets (Schedule DL)	0	0	0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	13,758,672	0	13,758,672	13,565,793
13. Title plants less \$ 0 charged off (for Title insurers only)	0	0	0	0
14. Investment income due and accrued	75,409	0	75,409	85,396
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	36,580	0	36,580	28,357
15.2 Deferred premiums and agents' balances and installments booked but deferred and not yet due (including \$ 0 earned but unbilled premiums)	55,078	0	55,078	57,833
15.3 Accrued retrospective premiums (\$ 0) and contracts subject to redetermination (\$ 0)	0	0	0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	167,755	0	167,755	188,915
16.2 Funds held by or deposited with reinsured companies	0	0	0	0
16.3 Other amounts receivable under reinsurance contracts	63,404	0	63,404	63,404
17. Amounts receivable relating to uninsured plans	0	0	0	0
18.1 Current federal and foreign income tax recoverable and interest thereon	0	0	0	0
18.2 Net deferred tax asset	0	0	0	0
19. Guaranty funds receivable or on deposit	0	0	0	0
20. Electronic data processing equipment and software	212,964	45,842	167,122	73,206
21. Furniture and equipment, including health care delivery assets (\$ 0)	10,947	10,947	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates	0	0	0	0
24. Health care (\$ 0) and other amounts receivable	0	0	0	0
25. Aggregate write-ins for other than invested assets	299,974	299,974	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	14,680,783	356,763	14,324,020	14,062,904
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0	0
28. Total (Lines 26 and 27)	14,680,783	356,763	14,324,020	14,062,904
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Other Assets Nonadmitted	183,402	183,402	0	0
2502. Commission Advances	43,574	43,574	0	0
2503. Supply Inventory	72,998	72,998	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	299,974	299,974	0	0

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Aggregate reserve for life contracts \$ 2,883,019 (Exh. 5, Line 9999999) less \$ 0 included in Line 6.3 (including \$ 0 Modco Reserve)	2,883,019	2,638,811
2. Aggregate reserve for accident and health contracts (including \$ 0 Modco Reserve)	965,842	915,262
3. Liability for deposit-type contracts (Exhibit 7, Line 14, Col. 1) (including \$ 0 Modco Reserve)	13,421	17,568
4. Contract claims:		
4.1 Life (Exhibit 8, Part 1, Line 4.4, Col. 1 less sum of Cols. 9, 10 and 11)	10,562	22,489
4.2 Accident and health (Exhibit 8, Part 1, Line 4.4, sum of Cols. 9, 10 and 11)	929,305	1,002,246
5. Policyholders' dividends/refunds to members \$ 0 and coupons \$ 0 due and unpaid (Exhibit 4, Line 10)	0	0
6. Provision for policyholders' dividends, refunds to members and coupons payable in following calendar year - estimated amounts:		
6.1 Policyholders' dividends and refunds to members apportioned for payment (including \$ 0 Modco)	0	0
6.2 Policyholders' dividends and refunds to members not yet apportioned (including \$ 0 Modco)	0	0
6.3 Coupons and similar benefits (including \$ 0 Modco)	0	0
7. Amount provisionally held for deferred dividend policies not included in Line 6	0	0
8. Premiums and annuity considerations for life and accident and health contracts received in advance less \$ 0 discount; including \$ 84,330 accident and health premiums (Exhibit 1, Part 1, Col. 1, sum of lines 4 and 14)	84,583	106,245
9. Contract liabilities not included elsewhere:		
9.1 Surrender values on canceled contracts	0	0
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	0	0
9.3 Other amounts payable on reinsurance, including \$ 0 assumed and \$ 0 ceded	0	0
9.4 Interest maintenance reserve (IMR, Line 6)	56,355	60,488
10. Commissions to agents due or accrued-life and annuity contracts \$ 23,938 accident and health \$ 613 and deposit-type contract funds \$ 0	24,551	15,059
11. Commissions and expense allowances payable on reinsurance assumed	0	0
12. General expenses due or accrued (Exhibit 2, Line 12, Col. 7)	512,419	438,026
13. Transfers to Separate Accounts due or accrued (net) (including \$ 0 accrued for expense allowances recognized in reserves, net of reinsured allowances)	0	0
14. Taxes, licenses and fees due or accrued, excluding federal income taxes (Exhibit 3, Line 9, Col. 6)	10,786	16,922
15.1 Current federal and foreign income taxes, including \$ 0 on realized capital gains (losses)	0	0
15.2 Net deferred tax liability	0	0
16. Unearned investment income	0	0
17. Amounts withheld or retained by reporting entity as agent or trustee	151,580	49,720
18. Amounts held for agents' account, including \$ 0 agents' credit balances	0	0
19. Remittances and items not allocated	10,346	15,736
20. Net adjustment in assets and liabilities due to foreign exchange rates	0	0
21. Liability for benefits for employees and agents if not included above	0	0
22. Borrowed money \$ 0 and interest thereon \$ 0	0	0
23. Dividends to stockholders declared and unpaid	0	0
24. Miscellaneous liabilities:		
24.01 Asset valuation reserve (AVR, Line 16, Col. 7)	49,517	44,664
24.02 Reinsurance in unauthorized and certified (\$ 0) companies	0	0
24.03 Funds held under reinsurance treaties with unauthorized and certified (\$ 0) reinsurers	0	0
24.04 Payable to parent, subsidiaries and affiliates	0	0
24.05 Drafts outstanding	0	0
24.06 Liability for amounts held under uninsured plans	0	0
24.07 Funds held under coinsurance	0	0
24.08 Derivatives	0	0
24.09 Payable for securities	0	0
24.10 Payable for securities lending	0	0
24.11 Capital notes \$ 0 and interest thereon \$ 0	0	0
25. Aggregate write-ins for liabilities	1,172,351	1,146,751
26. Total liabilities excluding Separate Accounts business (Lines 1 to 25)	6,874,637	6,489,987
27. From Separate Accounts Statement	0	0
28. Total liabilities (Lines 26 and 27)	6,874,637	6,489,987
29. Common capital stock	0	0
30. Preferred capital stock	0	0
31. Aggregate write-ins for other than special surplus funds	0	0
32. Surplus notes	0	0
33. Gross paid in and contributed surplus (Page 3, Line 33, Col. 2 plus Page 4, Line 51.1, Col. 1)	0	0
34. Aggregate write-ins for special surplus funds	25,000	25,000
35. Unassigned funds (surplus)	7,424,383	7,547,917
36. Less treasury stock, at cost:		
36.1 0 shares common (value included in Line 29 \$ 0)	0	0
36.2 0 shares preferred (value included in Line 30 \$ 0)	0	0
37. Surplus (Total Lines 31+32+33+34+35-36) (including \$ 0 in Separate Accounts Statement)	7,449,383	7,572,917
38. Totals of Lines 29, 30 and 37 (Page 4, Line 55)	7,449,383	7,572,917
39. Totals of Lines 28 and 38 (Page 2, Line 28, Col. 3)	14,324,020	14,062,904
DETAILS OF WRITE-INS		
2501. Amounts Payable to Reinsurer	924,083	849,680
2502. Deferred Income	0	0
2503. Unclaimed Funds	248,268	297,071
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	1,172,351	1,146,751
3101.		
3102.		
3103.		
3198. Summary of remaining write-ins for Line 31 from overflow page	0	0
3199. Totals (Lines 3101 thru 3103 plus 3198)(Line 31 above)	0	0
3401. Fraternal Fund	25,000	25,000
3402.		
3403.		
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	25,000	25,000

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
SUMMARY OF OPERATIONS

	1 Current Year	2 Prior Year
1. Premiums and annuity considerations for life and accident and health contracts (Exhibit 1, Part 1, Line 20.4, Col. 1, less Col. 11)	12,516,431	12,408,704
2. Considerations for supplementary contracts with life contingencies	0	0
3. Net investment income (Exhibit of Net Investment Income, Line 17)	318,816	395,548
4. Amortization of Interest Maintenance Reserve (IMR, Line 5)	4,133	9,285
5. Separate Accounts net gain from operations excluding unrealized gains or losses	0	0
6. Commissions and expense allowances on reinsurance ceded (Exhibit 1, Part 2, Line 26.1, Col. 1)	3,125,862	3,542,699
7. Reserve adjustments on reinsurance ceded	0	0
8. Miscellaneous Income:		
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts	0	0
8.2 Charges and fees for deposit-type contracts	0	0
8.3 Aggregate write-ins for miscellaneous income	719,216	893,091
9. Total (Lines 1 to 8.3)	16,684,458	17,249,327
10. Death benefits	160,679	186,150
11. Matured endowments (excluding guaranteed annual pure endowments)	6,506	1,280
12. Annuity benefits (Exhibit 8, Part 2, Line 6.4, Cols. 4 + 8)	22,407	90,766
13. Disability benefits and benefits under accident and health contracts	7,440,679	8,139,500
14. Coupons, guaranteed annual pure endowments and similar benefits	0	0
15. Surrender benefits and withdrawals for life contracts	19,683	156,725
16. Group conversions	0	0
17. Interest and adjustments on contract or deposit-type contract funds	215	338
18. Payments on supplementary contracts with life contingencies	0	0
19. Increase in aggregate reserves for life and accident and health contracts	294,787	11,428
20. Totals (Lines 10 to 19)	7,944,956	8,586,187
21. Commissions on premiums, annuity considerations, and deposit-type contract funds (direct business only) (Exhibit 1, Part 2, Line 31, Col. 1)	2,618,391	2,642,370
22. Commissions and expense allowances on reinsurance assumed (Exhibit 1, Part 2, Line 26.2, Col. 1)	0	0
23. General insurance expenses and fraternal expenses (Exhibit 2, Line 10, Cols. 1, 2, 3, 4 and 6)	6,335,276	6,925,891
24. Insurance taxes, licenses and fees, excluding federal income taxes (Exhibit 3, Line 7, Cols. 1 + 2 + 3 + 5)	292,045	298,169
25. Increase in loading on deferred and uncollected premiums	1,063	(723)
26. Net transfers to or (from) Separate Accounts net of reinsurance	0	0
27. Aggregate write-ins for deductions	0	0
28. Totals (Lines 20 to 27)	17,191,731	18,451,894
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28)	(507,273)	(1,202,567)
30. Dividends to policyholders and refunds to members	0	0
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)	(507,273)	(1,202,567)
32. Federal and foreign income taxes incurred (excluding tax on capital gains)	0	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)	(507,273)	(1,202,567)
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)	233,604
35. Net income (Line 33 plus Line 34)	(273,669)	(1,104,746)
CAPITAL AND SURPLUS ACCOUNT		
36. Capital and surplus, December 31, prior year (Page 3, Line 38, Col. 2)	7,572,916	8,254,050
37. Net income (Line 35)	(273,669)	(1,104,746)
38. Change in net unrealized capital gains (losses) less capital gains tax of \$	0	0
39. Change in net unrealized foreign exchange capital gain (loss)	(575)	74,783
40. Change in net deferred income tax	0	0
41. Change in nonadmitted assets	155,563	346,929
42. Change in liability for reinsurance in unauthorized and certified companies	0	0
43. Change in reserve on account of change in valuation basis, (increase) or decrease	0	0
44. Change in asset valuation reserve	(4,853)	1,900
45. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Col. 2 minus Col. 1)	0	0
46. Surplus (contributed to) withdrawn from Separate Accounts during period	0	0
47. Other changes in surplus in Separate Accounts Statement	0	0
48. Change in surplus notes	0	0
49. Cumulative effect of changes in accounting principles	0	0
50. Capital changes:		
50.1 Paid in	0	0
50.2 Transferred from surplus (Stock Dividend)	0	0
50.3 Transferred to surplus	0	0
51. Surplus adjustment:		
51.1 Paid in	0	0
51.2 Transferred to capital (Stock Dividend)	0	0
51.3 Transferred from capital	0	0
51.4 Change in surplus as a result of reinsurance	0	0
52. Dividends to stockholders	0	0
53. Aggregate write-ins for gains and losses in surplus	0	0
54. Net change in capital and surplus for the year (Lines 37 through 53)	(123,534)	(681,134)
55. Capital and surplus, December 31, current year (Lines 36 + 54) (Page 3, Line 38)	7,449,382	7,572,916
DETAILS OF WRITE-INS		
08.301. Donations	24,016	30,897
08.302. Supreme Dues	591,249	626,894
08.303. Miscellaneous Income	103,951	235,300
08.398. Summary of remaining write-ins for Line 8.3 from overflow page	0	0
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398)(Line 8.3 above)	719,216	893,091
2701.		
2702.		
2703.		
2798. Summary of remaining write-ins for Line 27 from overflow page	0	0
2799. Totals (Lines 2701 thru 2703 plus 2798)(Line 27 above)	0	0
5301.		
5302.		
5303.		
5398. Summary of remaining write-ins for Line 53 from overflow page	0	0
5399. Totals (Lines 5301 thru 5303 plus 5398)(Line 53 above)	0	0

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
CASH FLOW

	1 Current Year	2 Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	12,488,238	12,409,696
2. Net investment income	352,032	428,613
3. Miscellaneous income	3,845,078	4,435,790
4. Total (Lines 1 through 3)	16,685,348	17,274,099
5. Benefit and loss related payments	7,713,876	8,384,125
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	9,242,356	10,398,850
8. Dividends paid to policyholders	0	0
9. Federal and foreign income taxes paid (recovered) net of \$	0	0
10. Total (Lines 5 through 9)	16,956,232	18,782,975
11. Net cash from operations (Line 4 minus Line 10)	(270,884)	(1,508,876)
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	2,838,254	3,005,637
12.2 Stocks	0	0
12.3 Mortgage loans	0	0
12.4 Real estate	0	0
12.5 Other invested assets	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	2,718
12.7 Miscellaneous proceeds	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	2,838,254	3,008,355
13. Cost of investments acquired (long-term only):		
13.1 Bonds	1,766,749	1,277,035
13.2 Stocks	0	0
13.3 Mortgage loans	0	0
13.4 Real estate	0	0
13.5 Other invested assets	0	0
13.6 Miscellaneous applications	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	1,766,749	1,277,035
14. Net increase (decrease) in contract loans and premium notes	(50,502)	(33,916)
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	1,122,007	1,765,236
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes	0	0
16.2 Capital and paid in surplus, less treasury stock	0	0
16.3 Borrowed funds	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	(4,147)	(4,923)
16.5 Dividends to stockholders	0	0
16.6 Other cash provided (applied)	339,182	172,474
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	335,035	167,551
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)	1,186,158	423,911
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	1,133,948	710,037
19.2 End of year (Line 18 plus Line 19.1)	2,320,106	1,133,948

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

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ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - SUMMARY

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - INDIVIDUAL LIFE INSURANCE (b)

	1 Total	2 Industrial Life	3 Whole Life	4 Term Life	5 Indexed Life	6 Universal Life	7 Universal Life With Secondary Guarantees	8 Variable Life	9 Variable Universal Life	10 Credit Life (c)	11 Other Individual Life	12 YRT Mortality Risk Only
1. Premiums for life contracts ^(a)	145,728	0	125,077	21,492	0	(841)	0	0	0	0	0	0
2. Considerations for supplementary contracts with life contingencies	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Net investment income	155,851	0	143,049	5,343	0	7,459	0	0	0	0	0	0
4. Amortization of Interest Maintenance Reserve (IMR)	2,020	0	1,854	69	0	97	0	0	0	0	0	0
5. Separate Accounts net gain from operations excluding unrealized gains or losses	0	0	0	0	0	0	0	0	0	0	0	0
6. Commissions and expense allowances on reinsurance ceded .....	.89,051	0	.68,403	10,841	0	9,807	0	0	0	0	0	0
7. Reserve adjustments on reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0
8. Miscellaneous Income:												
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts	0	0	0	0	0	0	0	0	0	0	0	0
8.2 Charges and fees for deposit-type contracts	0	0	0	0	0	0	0	0	0	0	0	0
8.3 Aggregate write-ins for miscellaneous income	0	0	0	0	0	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3)	392,650	0	338,383	37,745	0	16,522	0	0	0	0	0	0
10. Death benefits	160,679	0	157,165	0	0	3,514	0	0	0	0	0	0
11. Matured endowments (excluding guaranteed annual pure endowments)	6,506	0	6,506	0	0	0	0	0	0	0	0	0
12. Annuity benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Disability benefits and benefits under accident and health contracts	0	0	0	0	0	0	0	0	0	0	0	0
14. Coupons, guaranteed annual pure endowments and similar benefits	0	0	0	0	0	0	0	0	0	0	0	0
15. Surrender benefits and withdrawals for life contracts	19,683	0	19,181	0	0	502	0	0	0	0	0	0
16. Group conversions	0	0	0	0	0	0	0	0	0	0	0	0
17. Interest and adjustments on contract or deposit-type contract funds .....	.215	0	0	.215	0	0	0	0	0	0	0	0
18. Payments on supplementary contracts with life contingencies	0	0	0	0	0	0	0	0	0	0	0	0
19. Increase in aggregate reserves for life and accident and health contracts	214,459	0	210,148	(5,528)	0	9,839	0	0	0	0	0	0
20. Totals (Lines 10 to 19)	401,542	0	393,000	(5,313)	0	13,855	0	0	0	0	0	0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)	50,867	0	38,216	9,689	0	2,962	0	0	0	0	0	XXX
22. Commissions and expense allowances on reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0
23. General insurance expenses	439,775	0	403,652	15,077	0	21,046	0	0	0	0	0	0
24. Insurance taxes, licenses and fees, excluding federal income taxes	14,266	0	13,094	.489	0	.683	0	0	0	0	0	0
25. Increase in loading on deferred and uncollected premiums	1,063	0	976	.36	0	.51	0	0	0	0	0	0
26. Net transfers to or (from) Separate Accounts net of reinsurance	0	0	0	0	0	0	0	0	0	0	0	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)	907,513	0	848,938	19,978	0	38,597	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)	(514,863)	0	(510,555)	17,767	0	(22,075)	0	0	0	0	0	0
30. Dividends to policyholders and refunds to members	0	0	0	0	0	0	0	0	0	0	0	0
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)	(514,863)	0	(510,555)	17,767	0	(22,075)	0	0	0	0	0	0
32. Federal income taxes incurred (excluding tax on capital gains)	0	0	0	0	0	0	0	0	0	0	0	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)	(514,863)	0	(510,555)	17,767	0	(22,075)	0	0	0	0	0	0
34. Policies/certificates in force end of year	2,581	0	2,164	244	173	0	0	0	0	0	0	0
DETAILS OF WRITE-INS												
08.301.												
08.302.												
08.303.												
08.398. Summary of remaining write-ins for Line 8.3 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above)	0	0	0	0	0	0	0	0	0	0	0	0
2701.												
2702.												
2703.												
2798. Summary of remaining write-ins for Line 27 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Include premium amounts for preneed plans included in Line 1 0

(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.)

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - GROUP LIFE 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)									
2. Considerations for supplementary contracts with life contingencies	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Net investment income									
4. Amortization of Interest Maintenance Reserve (IMR)									
5. Separate Accounts net gain from operations excluding unrealized gains or losses									
6. Commissions and expense allowances on reinsurance ceded									
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									
9. Totals (Lines 1 to 8.3)									
10. Death benefits									
11. Matured endowments (excluding guaranteed annual pure endowments)									
12. Annuity benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
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									
16. Group conversions									
17. Interest and adjustments on contract or deposit-type contract funds									
18. Payments on supplementary contracts with life contingencies									
19. Increase in aggregate reserves for life and accident and health contracts									
20. Totals (Lines 10 to 19)									
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)									XXX
22. Commissions and expense allowances on reinsurance assumed									
23. General insurance expenses									
24. Insurance taxes, licenses and fees, excluding federal income taxes									
25. Increase in loading on deferred and uncollected premiums									
26. Net transfers to or (from) Separate Accounts net of reinsurance									
27. Aggregate write-ins for deductions									
28. Totals (Lines 20 to 27)									
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28)									
30. Dividends to policyholders and refunds to members									
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)									
32. Federal 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)									
34. Policies/certificates in force end of year									
DETAILS OF WRITE-INS									
08.301.									
08.302.									
08.303.									
08.398. Summary of remaining write-ins for Line 8.3 from overflow page									
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above)									
2701.									
2702.									
2703.									
2798. Summary of remaining write-ins for Line 27 from overflow page									
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)									

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

(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.)

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - INDIVIDUAL ANNUITIES ^(a)

	1	Deferred				6	7
		2	3	4	5		
	Total	Fixed Annuities	Indexed Annuities	Variable Annuities with Guarantees	Variable Annuities Without Guarantees		
1. Premiums for individual annuity contracts	21,119	.21,119	0	0	0	0	0
2. Considerations for supplementary contracts with life contingencies	0	XXX	XXX	XXX	XXX	0	XXX
3. Net investment income	39,950	.39,950	0	0	0	0	0
4. Amortization of Interest Maintenance Reserve (IMR) .....	.518	.518	0	0	0	0	0
5. Separate Accounts net gain from operations excluding unrealized gains or losses	0	0	0	0	0	0	0
6. Commissions and expense allowances on reinsurance ceded	1,749	1,749	0	0	0	0	0
7. Reserve adjustments on reinsurance ceded	0	0	0	0	0	0	0
8. Miscellaneous Income:							
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts	0	0	0	0	0	0	0
8.2 Charges and fees for deposit-type contracts	0	0	0	0	0	0	0
8.3 Aggregate write-ins for miscellaneous income	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3)	63,336	63,336	0	0	0	0	0
10. Death benefits	0	0	0	0	0	0	0
11. Matured endowments (excluding guaranteed annual pure endowments)	0	0	0	0	0	0	0
12. Annuity benefits	22,407	22,407	0	0	0	0	0
13. Disability benefits and benefits under accident and health contracts	0	0	0	0	0	0	0
14. Coupons, guaranteed annual pure endowments and similar benefits	0	0	0	0	0	0	0
15. Surrender benefits and withdrawals for life contracts	0	0	0	0	0	0	0
16. Group conversions	0	0	0	0	0	0	0
17. Interest and adjustments on contract or deposit-type contract funds	0	0	0	0	0	0	0
18. Payments on supplementary contracts with life contingencies	0	0	0	0	0	0	0
19. Increase in aggregate reserves for life and accident and health contracts	29,747	29,747	0	0	0	0	0
20. Totals (Lines 10 to 19)	52,154	52,154	0	0	0	0	0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)	0	0	0	0	0	0	0
22. Commissions and expense allowances on reinsurance assumed	0	0	0	0	0	0	0
23. General insurance expenses	52,672	52,672	0	0	0	0	0
24. Insurance taxes, licenses and fees, excluding federal income taxes	1,709	1,709	0	0	0	0	0
25. Increase in loading on deferred and uncollected premiums	0	0	0	0	0	0	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)	106,535	106,535	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)	(43,199)	(43,199)	0	0	0	0	0
30. Dividends to policyholders and refunds to members	0	0	0	0	0	0	0
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)	(43,199)	(43,199)	0	0	0	0	0
32. Federal income taxes incurred (excluding tax on capital gains)	0	0	0	0	0	0	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)	(43,199)	(43,199)	0	0	0	0	0
34. Policies/certificates in force end of year	91	91	0	0	0	0	0
DETAILS OF WRITE-INS							
08.301.							
08.302.							
08.303.							
08.398. Summary of remaining write-ins for Line 8.3 from overflow page	0	0	0	0	0	0	0
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above)	0	0	0	0	0	0	0
2701.							
2702.							
2703.							
2798. Summary of remaining write-ins for Line 27 from overflow page	0	0	0	0	0	0	0
2799. Totals (Lines 2701 thru 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.

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - GROUP ANNUITIES ^(a)

	1	Deferred				6	7
		2	3	4	5		
	Total	Fixed Annuities	Indexed Annuities	Variable Annuities with Guarantees	Variable Annuities Without Guarantees		
1. Premiums for group annuity contracts							
2. Considerations for supplementary contracts with life contingencies		XXX	XXX	XXX	XXX		XXX
3. Net investment income							
4. Amortization of Interest Maintenance Reserve (IMR)							
5. Separate Accounts net gain from operations excluding unrealized gains or losses							
6. Commissions and expense allowances on reinsurance ceded							
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							
9. Totals (Lines 1 to 8.3)							
10. Death benefits							
11. Matured endowments (excluding guaranteed annual pure endowments)							
12. Annuity benefits							
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							
16. Group conversions							
17. Interest and adjustments on contract or deposit-type contract funds							
18. Payments on supplementary contracts with life contingencies							
19. Increase in aggregate reserves for life and accident and health contracts							
20. Totals (Lines 10 to 19)							
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)							
22. Commissions and expense allowances on reinsurance assumed							
23. General insurance expenses							
24. Insurance taxes, licenses and fees, excluding federal income taxes							
25. Increase in loading on deferred and uncollected premiums							
26. Net transfers to or (from) Separate Accounts net of reinsurance							
27. Aggregate write-ins for deductions							
28. Totals (Lines 20 to 27)							
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28)							
30. Dividends to policyholders and refunds to members							
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)							
32. Federal 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)							
34. Policies/certificates in force end of year							
DETAILS OF WRITE-INS							
08.301.							
08.302.							
08.303.							
08.398. Summary of remaining write-ins for Line 8.3 from overflow page							
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above)							
2701.							
2702.							
2703.							
2798. Summary of remaining write-ins for Line 27 from overflow page							
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)							

(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.

NONE

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - ACCIDENT AND HEALTH ^(a)

	1 Total	Comprehensive		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
		2 Individual	3 Group										
1. Premiums for accident and health contracts	12,349,583	0	0	2,620,725	0	0	0	0	0	0	0	498	9,728,360
2. Considerations for supplementary contracts with life contingencies	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Net investment income	123,015	0	0	111,773	0	0	0	0	0	0	0	0	11,242
4. Amortization of Interest Maintenance Reserve (IMR)	1,595	0	0	1,449	0	0	0	0	0	0	0	0	146
5. Separate Accounts net gain from operations excluding unrealized gains or losses	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Commissions and expense allowances on reinsurance ceded	3,035,062	0	0	2,894,852	0	0	0	0	0	0	0	0	140,210
7. Reserve adjustments on reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Miscellaneous Income:													
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts	0	0	0	0	0	0	0	0	0	0	0	0	0
8.2 Charges and fees for deposit-type contracts	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8.3 Aggregate write-ins for miscellaneous income	103,951	0	0	103,951	0	0	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3)	15,613,206	0	0	5,732,750	0	0	0	0	0	0	0	498	9,879,958
10. Death benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
11. Matured endowments (excluding guaranteed annual pure endowments)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
12. Annuity benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Disability benefits and benefits under accident and health contracts	7,440,679	0	0	1,759,064	0	0	0	0	0	0	0	0	5,681,615
14. Coupons, guaranteed annual pure endowments and similar benefits	0	0	0	0	0	0	0	0	0	0	0	0	0
15. Surrender benefits and withdrawals for life contracts	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
16. Group conversions	0	0	0	0	0	0	0	0	0	0	0	0	0
17. Interest and adjustments on contract or deposit-type contract funds	0	0	0	0	0	0	0	0	0	0	0	0	0
18. Payments on supplementary contracts with life contingencies	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
19. Increase in aggregate reserves for life and accident and health contracts	50,581	0	0	62,728	0	0	0	0	0	0	0	0	(12,147)
20. Totals (Lines 10 to 19)	7,491,260	0	0	1,821,792	0	0	0	0	0	0	0	0	5,669,468
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)	2,567,523	0	0	764,772	0	0	0	0	0	0	0	0	1,802,751
22. Commissions and expense allowances on reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0
23. General insurance expenses	5,326,415	0	0	3,270,925	0	0	0	0	0	0	0	0	2,055,490
24. Insurance taxes, licenses and fees, excluding federal income taxes	249,646	0	0	186,115	0	0	0	0	0	0	0	0	63,531
25. Increase in loading on deferred and uncollected premiums	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Net transfers to or (from) Separate Accounts net of reinsurance	0	0	0	0	0	0	0	0	0	0	0	0	0
27. Aggregate write-ins for deductions	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27)	15,634,844	0	0	6,043,604	0	0	0	0	0	0	0	0	9,591,240
29. Net gain from operations before dividends to policyholders, and refunds to members and federal income taxes (Line 9 minus Line 28)	(21,638)	0	0	(310,854)	0	0	0	0	0	0	0	498	288,718
30. Dividends to policyholders and refunds to members	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)	(21,638)	0	0	(310,854)	0	0	0	0	0	0	0	498	288,718
32. Federal income taxes incurred (excluding tax on capital gains)	0	0	0	0	0	0	0	0	0	0	0	0	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)	(21,638)	0	0	(310,854)	0	0	0	0	0	0	0	498	288,718
34. Policies/certificates in force end of year	29,090	0	0	6,870	0	0	0	0	0	0	0	1	22,219
DETAILS OF WRITE-INS													
08.301. Donations	0	0	0	0	0	0	0	0	0	0	0	0	0
08.302. Supreme Dues	0	0	0	0	0	0	0	0	0	0	0	0	0
08.303. Miscellaneous Income	103,951	0	0	103,951	0	0	0	0	0	0	0	0	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	0
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above)	103,951	0	0	103,951	0	0	0	0	0	0	0	0	0
2701.													
2702.													
2703.													
2798. Summary of remaining write-ins for Line 27 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
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 of prior year	1,858,938	0	1,781,711	44,747	0	32,480	0	0	0	0	0	0
2. Tabular net premiums or considerations	175,672	0	139,380	33,216	0	3,076	0	0	0	0	0	0
3. Present value of disability claims incurred	0	0	0	0	0	0	0	0	0	0	0	0
4. Tabular interest	73,444	0	69,705	2,398	0	1,341	0	0	0	0	0	0
5. Tabular less actual reserve released	0	0	0	0	0	0	0	0	0	0	0	0
6. Increase in reserve on account of change in valuation basis	240,000	0	224,213	4,290	0	11,497	0	0	0	0	0	0
6.1 Change in excess of VM-20 deterministic/stochastic reserve over net premium reserve	0	XXX	0	0	0	0	0	0	0	XXX	0	0
7. Other increases (net)	0	0	0	0	0	0	0	0	0	0	0	0
8. Totals (Lines 1 to 7)	2,348,054	0	2,215,009	84,651	0	48,394	0	0	0	0	0	0
9. Tabular cost	67,617	0	27,934	34,261	0	5,422	0	0	0	0	0	0
10. Reserves released by death	84,815	0	84,605	0	0	210	0	0	0	0	0	0
11. Reserves released by other terminations (net)	122,224	0	119,385	2,337	0	502	0	0	0	0	0	0
12. Annuity, supplementary contract and disability payments involving life contingencies	0	0	0	0	0	0	0	0	0	0	0	0
13. Net transfers to or (from) Separate Accounts	0	0	0	0	0	0	0	0	0	0	0	0
14. Total Deductions (Lines 9 to 13)	274,656	0	231,924	36,598	0	6,134	0	0	0	0	0	0
15. Reserve December 31 of current year	2,073,398	0	1,983,085	48,053	0	42,260	0	0	0	0	0	0
Cash Surrender Value and Policy Loans												
16. CSV Ending balance December 31, current year	7,992,200	0	7,516,483	0	0	475,717	0	0	0	0	0	0
17. Amount Available for Policy Loans Based upon Line 16 CSV	7,459,607	0	7,045,712	0	0	413,895	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) Individual and Group Credit Life are combined and included on _____ page. (Indicate whether included with Individual or Group.)

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
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 of prior year									
2. Tabular net premiums or considerations									
3. Present value of disability claims incurred									
4. Tabular interest									
5. Tabular less actual reserve released									
6. Increase in reserve on account of change in valuation basis									
7. Other increases (net)									
8. Totals (Lines 1 to 7)									
9. Tabular cost									
10. Reserves released by death									
11. Reserves released by other terminations (net)									
12. Annuity, supplementary contract and disability payments involving life contingencies									
13. Net transfers to or (from) Separate Accounts									
14. Total Deductions (Lines 9 to 13)									
15. Reserve December 31 of current year									
Cash Surrender Value and Policy Loans									
16. CSV Ending balance December 31, current year									
17. Amount Available for Policy Loans Based upon Line 16 CSV									

NONE

(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.)

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
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 of prior year	779,873	779,873	0	0	0	0	0
2. Tabular net premiums or considerations	20,064	20,064	0	0	0	0	0
3. Present value of disability claims incurred	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4. Tabular interest	32,789	32,789	0	0	0	0	0
5. Tabular less actual reserve released	0	0	0	0	0	0	0
6. Increase in reserve on account of change in valuation basis	0	0	0	0	0	0	0
7. Other increases (net)	0	0	0	0	0	0	0
8. Totals (Lines 1 to 7)	832,726	832,726	0	0	0	0	0
9. Tabular cost	0	0	0	0	0	0	0
10. Reserves released by death	XXX	XXX	XXX	XXX	XXX	XXX	XXX
11. Reserves released by other terminations (net)	23,106	23,106	0	0	0	0	0
12. Annuity, supplementary contract and disability payments involving life contingencies	0	0	0	0	0	0	0
13. Net transfers to or (from) Separate Accounts	0	0	0	0	0	0	0
14. Total Deductions (Lines 9 to 13)	23,106	23,106	0	0	0	0	0
15. Reserve December 31 of current year	809,620	809,620	0	0	0	0	0
Cash Surrender Value and Policy Loans							
16. CSV Ending balance December 31, current year	2,720,078	2,720,078	0	0	0	0	0
17. Amount Available for Policy Loans Based upon Line 16 CSV	0	0	0	0	0	0	0

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
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 of prior year							
2. Tabular net premiums or considerations		XXX	XXX	XXX	XXX	XXX	
3. Present value of disability claims incurred							
4. Tabular interest							
5. Tabular less actual reserve released							
6. Increase in reserve on account of change in valuation basis							
7. Other increases (net)							
8. Totals (Lines 1 to 7)							
9. Tabular cost							
10. Reserves released by death		XXX	XXX	XXX	XXX	XXX	XXX
11. Reserves released by other terminations (net)							
12. Annuity, supplementary contract and disability payments involving life contingencies							
13. Net transfers to or (from) Separate Accounts							
14. Total Deductions (Lines 9 to 13)							
15. Reserve December 31 of current year							
Cash Surrender Value and Policy Loans							
16. CSV Ending balance December 31, current year							
17. Amount Available for Policy Loans Based upon Line 16 CSV							

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
EXHIBIT OF NET INVESTMENT INCOME

		1 Collected During Year	2 Earned During Year
1. U.S. Government bonds	(a)	46,031	35,136
1.1 Bonds exempt from U.S. tax	(a)	0	0
1.2 Other bonds (unaffiliated)	(a)	297,381	287,288
1.3 Bonds of affiliates	(a)	0	0
2.1 Preferred stocks (unaffiliated)	(b)	0	0
2.11 Preferred stocks of affiliates	(b)	0	0
2.2 Common stocks (unaffiliated) .....	.....	0	0
2.21 Common stocks of affiliates .....	.....	0	0
3. Mortgage loans	(c)	0	0
4. Real estate	(d)	0	0
5. Contract loans .....	.....	48,134	48,134
6. Cash, cash equivalents and short-term investments	(e)	751	751
7. Derivative instruments	(f)	0	0
8. Other invested assets .....	.....	0	0
9. Aggregate write-ins for investment income .....	.....	0	1,079
10. Total gross investment income .....	.....	392,297	372,388
11. Investment expenses	(g)	53,572	
12. Investment taxes, licenses and fees, excluding federal income taxes	(g)	0	
13. Interest expense	(h)	0	
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) .....	.....	53,572	
17. Net investment income (Line 10 minus Line 16) .....	.....	318,816	
DETAILS OF WRITE-INS			
0901. Miscellaneous Income .....	.....	0	1,079
0902. .....	.....	.....
0903. .....	.....	.....
0998. Summary of remaining write-ins for Line 9 from overflow page .....	.....	0	0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above) .....	.....	0	1,079
1501. .....	.....	.....
1502. .....	.....	.....
1503. .....	.....	.....
1598. Summary of remaining write-ins for Line 15 from overflow page .....	.....	0	0
1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above) .....	.....	0	0

(a) Includes \$ 9,221 accrual of discount less \$ 32,450 amortization of premium and less \$ 1,567 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 \$ 427 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued interest on purchases.

(f) Includes \$ 0 accrual of discount less \$ 0 amortization of premium.

(g) Includes \$ 0 investment expenses and \$ 0 investment taxes, licenses and fees, excluding federal income taxes, attributable to Segregated and Separate Accounts.

(h) Includes \$ 0 interest on surplus notes and \$ 0 interest on capital notes.

(i) Includes \$ 0 depreciation on real estate and \$ 0 depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1 Realized Gain (Loss) On Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds	808	0	808	0	0
1.1 Bonds exempt from U.S. tax	0	0	0	0	0
1.2 Other bonds (unaffiliated)	222,820	9,976	232,796	0	264,793
1.3 Bonds of affiliates	0	0	0	0	0
2.1 Preferred stocks (unaffiliated)	0	0	0	0	0
2.11 Preferred stocks of affiliates	0	0	0	0	0
2.2 Common stocks (unaffiliated)	0	0	0	0	0
2.21 Common stocks of affiliates	0	0	0	0	0
3. Mortgage loans	0	0	0	0	0
4. Real estate	0	0	0	0	0
5. Contract loans	0	0	0	0	0
6. Cash, cash equivalents and short-term investments	0	0	0	0	0
7. Derivative instruments	0	0	0	0	0
8. Other invested assets	0	0	0	0	0
9. Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10. Total capital gains (losses)	223,628	9,976	233,604	0	264,793
DETAILS OF WRITE-INS					
0901. .....	.....	.....	.....	.....
0902. .....	.....	.....	.....	.....
0903. .....	.....	.....	.....	.....
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America

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

	1 Total	2 Industrial Life	Insurance									11 Aggregate of All Other Lines of Business	12 Fraternal (Fraternal Benefit Societies Only)		
			Ordinary		5 Credit Life (Group and Individual)	Group		Accident and Health							
			3 Life Insurance	4 Individual Annuities		6 Life Insurance	7 Annuities	8 Group	9 Credit (Group and Individual)	10 Other					
FIRST YEAR (other than single)															
1. Uncollected	0	0	0	0	0	0	0	0	0	0	0	0	0		
2. Deferred and accrued	3,740	0	3,740	0	0	0	0	0	0	0	0	0	0		
3. Deferred , accrued and uncollected:															
3.1 Direct	3,740	0	3,740	0	0	0	0	0	0	0	0	0	0		
3.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0		
3.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0		
3.4 Net (Line 1 + Line 2)	3,740	0	3,740	0	0	0	0	0	0	0	0	0	0		
4. Advance	0	0	0	0	0	0	0	0	0	0	0	0	0		
5. Line 3.4 - Line 4	3,740	0	3,740	0	0	0	0	0	0	0	0	0	0		
6. Collected during year:															
6.1 Direct	10,805	0	10,805	0	0	0	0	0	0	0	0	0	0		
6.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0		
6.3 Reinsurance ceded	1,825	0	1,825	0	0	0	0	0	0	0	0	0	0		
6.4 Net	8,980	0	8,980	0	0	0	0	0	0	0	0	0	0		
7. Line 5 + Line 6.4	12,720	0	12,720	0	0	0	0	0	0	0	0	0	0		
8. Prior year (uncollected + deferred and accrued - advance)	4,408	0	4,408	0	0	0	0	0	0	0	0	0	0		
9. First year premiums and considerations:															
9.1 Direct	8,664	0	8,664	0	0	0	0	0	0	0	0	0	0		
9.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0		
9.3 Reinsurance ceded	352	0	352	0	0	0	0	0	0	0	0	0	0		
9.4 Net (Line 7 - Line 8)	8,312	0	8,312	0	0	0	0	0	0	0	0	0	0		
SINGLE															
10. Single premiums and considerations:															
10.1 Direct	10,645	0	10,645	0	0	0	0	0	0	0	0	0	0		
10.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0		
10.3 Reinsurance ceded	7,909	0	7,909	0	0	0	0	0	0	0	0	0	0		
10.4 Net	2,736	0	2,736	0	0	0	0	0	0	0	0	0	0		
RENEWAL															
11. Uncollected	37,311	0	730	0	0	0	0	0	0	0	36,581	0	0		
12. Deferred and accrued	55,701	0	55,701	0	0	0	0	0	0	0	0	0	0		
13. Deferred, accrued and uncollected:															
13.1 Direct	317,716	0	215,790	0	0	0	0	0	0	0	101,926	0	0		
13.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0		
13.3 Reinsurance ceded	224,704	0	159,359	0	0	0	0	0	0	0	65,345	0	0		
13.4 Net (Line 11 + Line 12)	93,012	0	56,431	0	0	0	0	0	0	0	36,581	0	0		
14. Advance	84,583	0	253	0	0	0	0	0	0	0	84,330	0	0		
15. Line 13.4 - Line 14	8,429	0	56,178	0	0	0	0	0	0	0	(47,749)	0	0		
16. Collected during year:															
16.1 Direct	40,808,625	0	605,594	32,890	0	0	0	0	0	0	40,170,141	0	0		
16.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0		
16.3 Reinsurance ceded	28,332,106	0	470,287	11,771	0	0	0	0	0	0	27,850,048	0	0		
16.4 Net	12,476,519	0	135,307	21,119	0	0	0	0	0	0	12,320,093	0	0		
17. Line 15 + Line 16.4	12,484,948	0	191,485	21,119	0	0	0	0	0	0	12,272,344	0	0		
18. Prior year (uncollected + deferred and accrued - advance)	(20,432)	0	56,807	0	0	0	0	0	0	0	(77,239)	0	0		
19. Renewal premiums and considerations:															
19.1 Direct	40,940,715	0	586,009	32,890	0	0	0	0	0	0	40,321,816	0	0		
19.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0		
19.3 Reinsurance ceded	28,435,334	0	451,331	11,771	0	0	0	0	0	0	27,972,232	0	0		
19.4 Net (Line 17 - Line 18)	12,505,381	0	134,678	21,119	0	0	0	0	0	0	12,349,584	0	0		
TOTAL															
20. Total premiums and annuity considerations:															
20.1 Direct	40,960,024	0	605,318	32,890	0	0	0	0	0	0	40,321,816	0	0		
20.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0		
20.3 Reinsurance ceded	28,443,595	0	459,592	11,771	0	0	0	0	0	0	27,972,232	0	0		
20.4 Net (Lines 9.4 + 10.4 + 19.4)	12,516,429	0	145,726	21,119	0	0	0	0	0	0	12,349,584	0	0		

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America

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

	1 Total	2 Industrial Life	Insurance									11 Aggregate of All Other Lines of Business	12 Fraternal (Fraternal Benefit Societies Only)		
			Ordinary		5 Credit Life (Group and Individual)	Group		Accident and Health							
			3 Life Insurance	4 Individual Annuities		6 Life Insurance	7 Annuities	8 Group	9 Credit (Group and Individual)	10 Other					
POLICYHOLDERS' DIVIDENDS, REFUNDS TO MEMBERS AND COUPONS APPLIED (included in Part 1)															
21. To pay renewal premiums	0	0	0	0	0	0	0	0	0	0	0	0	0		
22. All other	0	0	0	0	0	0	0	0	0	0	0	0	0		
REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES INCURRED															
23. First year (other than single):															
23.1 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0		
23.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0		
23.3 Net ceded less assumed	0	0	0	0	0	0	0	0	0	0	0	0	0		
24. Single:															
24.1 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0		
24.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0		
24.3 Net ceded less assumed	0	0	0	0	0	0	0	0	0	0	0	0	0		
25. Renewal:															
25.1 Reinsurance ceded	3,125,860	0	89,049	1,749	0	0	0	0	0	0	3,035,062	0	0		
25.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0		
25.3 Net ceded less assumed	3,125,860	0	89,049	1,749	0	0	0	0	0	0	3,035,062	0	0		
26. Totals:															
26.1 Reinsurance ceded (Page 6, Line 6)	3,125,860	0	89,049	1,749	0	0	0	0	0	0	3,035,062	0	0		
26.2 Reinsurance assumed (Page 6, Line 22)	0	0	0	0	0	0	0	0	0	0	0	0	0		
26.3 Net ceded less assumed	3,125,860	0	89,049	1,749	0	0	0	0	0	0	3,035,062	0	0		
COMMISSIONS INCURRED (direct business only)															
27. First year (other than single)	569,597	0	10,118	0	0	0	0	0	0	0	559,479	0	0		
28. Single	1,916	0	1,916	0	0	0	0	0	0	0	0	0	0		
29. Renewal	2,046,878	0	38,833	0	0	0	0	0	0	0	2,008,045	0	0		
30. Deposit-type contract funds	0	0	0	0	0	0	0	0	0	0	0	0	0		
31. Totals (to agree with Page 6, Line 21)	2,618,391	0	50,867	0	0	0	0	0	0	0	2,567,524	0	0		

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
EXHIBIT 2 - GENERAL EXPENSES

	Insurance			5	6	7			
	1	Accident and Health							
		2 Life	3 Cost Containment						
1. Rent	22,518	0	351,908	0	0	40,000 414,426			
2. Salaries and wages	146,776	0	2,293,799	0	6,000 299,689	2,746,264			
3.11 Contributions for benefit plans for employees	16,569	0	258,932	0	0	36,252 311,753			
3.12 Contributions for benefit plans for agents	0	0	0	0	0	0			
3.21 Payments to employees under non-funded benefit plans	0	0	0	0	0	0			
3.22 Payments to agents under non-funded benefit plans	0	0	0	0	0	0			
3.31 Other employee welfare	7,135	0	111,504	0	0	16,235 134,874			
3.32 Other agent welfare	0	0	0	0	0	0			
4.1 Legal fees and expenses	3,021	0	47,212	0	0	0 50,233			
4.2 Medical examination fees	179	0	2,810	0	0	0 2,989			
4.3 Inspection report fees	1,718	0	26,847	0	0	0 28,565			
4.4 Fees of public accountants and consulting actuaries	163,210	0	472,146	0	0	0 635,356			
4.5 Expense of investigation and settlement of policy claims	0	0	0	0	0	0 0			
5.1 Traveling expenses	277	0	4,328	0	0	1,439 6,044			
5.2 Advertising	0	0	0	0	0	0 0			
5.3 Postage, express, telegraph and telephone	11,928	0	186,403	0	0	7,001 205,332			
5.4 Printing and stationery	2,949	0	46,091	0	0	26 49,066			
5.5 Cost or depreciation of furniture and equipment	612	0	9,568	0	0	0 10,180			
5.6 Rental of equipment	25,092	0	392,129	0	0	0 417,221			
5.7 Cost or depreciation of EDP equipment and software	3,606	0	56,359	0	0	0 59,965			
6.1 Books and periodicals	0	0	0	0	0	0 0			
6.2 Bureau and association fees	1,627	0	25,422	0	0	1,278 28,327			
6.3 Insurance, except on real estate	6,152	0	96,139	0	0	0 102,291			
6.4 Miscellaneous losses	0	0	0	0	0	0 0			
6.5 Collection and bank service charges	1,299	0	20,306	0	0	0 21,605			
6.6 Sundry general expenses	12	0	204	0	0	0 216			
6.7 Group service and administration fees	0	0	0	0	0	0 0			
6.8 Reimbursements by uninsured plans	0	0	0	0	0	0 0			
7.1 Agency expense allowance	0	0	0	0	0	0 0			
7.2 Agents' balances charged off (less \$ recovered)	0	0	0	0	0	0 0			
7.3 Agency conferences other than local meetings	0	0	0	0	0	0 0			
8.1 Official publication (Fraternal Benefit Societies Only)	XXX	XXX	XXX	XXX	XXX	29,459 29,459			
8.2 Expense of supreme lodge meetings (Fraternal Benefit Societies Only)	XXX	XXX	XXX	XXX	XXX	37,172 37,172			
9.1 Real estate expenses	0	0	0	0	0	0 0			
9.2 Investment expenses not included elsewhere	0	0	0	0	47,572	0 47,572			
9.3 Aggregate write-ins for expenses	77,767	0	924,308	0	0	47,863 1,049,938			
10. General expenses incurred	492,447	0	5,326,415	0	53,572	(b) 516,414 (a) 6,388,848			
11. General expenses unpaid Dec. 31, prior year	25,231	0	358,225	0	3,684	50,886 438,026			
12. General expenses unpaid Dec. 31, current year	39,497	0	427,206	0	4,297	41,419 512,419			
13. Amounts receivable relating to uninsured plans, prior year	0	0	0	0	0	0 0			
14. Amounts receivable relating to uninsured plans, current year	0	0	0	0	0	0 0			
15. General expenses paid during year (Lines 10+11-12-13-14)	478,181	0	5,257,434	0	52,959	525,881 6,314,455			
DETAILS OF WRITE-INS									
09.301. Board Expenses	4,198	0	65,604	0	0	0 69,802			
09.302. Professional Fees	16,830	0	263,018	0	0	0 279,848			
09.303. Membership Promotion	0	0	0	0	0	11,689 11,689			
09.398. Summary of remaining write-ins for Line 9.3 from overflow page	56,739	0	595,686	0	0	36,174 688,599			
09.399. Totals (Lines 09.301 thru 09.303 plus 09.398) (Line 9.3 above)	77,767	0	924,308	0	0	47,863 1,049,938			

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

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

1. Charitable \$ 32,938 ; 2. Institutional \$ 0 ; 3. Recreational and Health \$ 0 ; 4. Educational \$ 0 ; 5. Religious \$ 0 ; 6. Membership \$ 41,147 ; 7. Other \$ 442,329 ; 8. Total \$ 516,414

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

	Insurance			4	5	6
	1 Life	2 Accident and Health	3 All Other Lines of Business			
1. Real estate taxes	0	0	0	0	0	0
2. State insurance department licenses and fees	3,700	57,819	0	0	0	61,519
3. State taxes on premiums	0	0	0	0	0	0
4. Other state taxes, including \$ for employee benefits	0	621	9,702	0	0	10,323
5. U.S. Social Security taxes	11,653	182,126	0	0	26,424	220,203
6. All other taxes	0	0	0	0	0	0
7. Taxes, licenses and fees incurred	15,974	249,647	0	0	26,424	292,045
8. Taxes, licenses and fees unpaid Dec. 31, prior year	1,000	14,200	0	0	1,722	16,922
9. Taxes, licenses and fees unpaid Dec. 31, current year	622	9,728	0	0	436	10,786
10. Taxes, licenses and fees paid during year (Lines 7 + 8 - 9)	16,352	254,119	0	0	27,710	298,181

EXHIBIT 4 - DIVIDENDS OR REFUNDS

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

NONE

EXHIBIT 5 - AGGREGATE RESERVE FOR LIFE CONTRACTS

1 Valuation Standard	2 Total ^(a)	3 Industrial	4 Ordinary	5 Credit (Group and Individual)	6 Group
0100001. A.E. 3.5% NLP ANB CRF .....	.0	0	0	0	0
0100002. 41 CSO 2.5% CRVM ANB CRF	16,797	0	16,797	0	0
0100003. 41 CSO 2.5% NLP ANB CRF	44,026	0	44,026	0	0
0100004. 58 CSO 2.5% NJ ALB CFT	72,354	0	72,354	0	0
0100005. 58 CSO 2.5% NLP ALB CFT	41,426	0	41,426	0	0
0100006. 58 CET 2.5% NJ ALB CFT	3,483	0	3,483	0	0
0100007. 58 CSO ALB NL 4%	76,712	0	76,712	0	0
0100008. 80 CSO ALB CRVM 5.0%	132,124	0	132,124	0	0
0100009. 80 CSO ALB NL 5.0% .....	.0	0	0	0	0
0100010. 80 CSO ALB CRVM 4.5% .....	.6,146,833	0	6,146,833	0	0
0100011. 80 CSO ALB NL 4.5%	1,935,618	0	1,935,618	0	0
0100012. 80 CSO ALB CRVM 4.0%	318,842	0	318,842	0	0
0100013. 80 CSO ALB NL 4.0%	78,925	0	78,925	0	0
0100014. 01 CSO ALB CRVM 4.0%	138,264	0	138,264	0	0
0100015. 01 CSO ALB NL 4.0% .....	.753,199	0	.753,199	0	0
0100016. 01 CSO XXX 4.0%	63,103	0	63,103	0	0
0100017. 01 CSO ALB CRVM 3.5%	47,676	0	47,676	0	0
0100018. 01 CSO ALB NL 3.5%	181,065	0	181,065	0	0
0100019. 01 CSO XXX 3.5%	41,795	0	41,795	0	0
0100020. 17 CSO ALB CRVM 3.5%	706	0	706	0	0
0199997. Totals (Gross)	10,092,948	0	10,092,948	0	0
0199998. Reinsurance ceded	8,491,389	0	8,491,389	0	0
0199999. Life Insurance: Totals (Net)	1,601,559	0	1,601,559	0	0
0200001. Deferred (Net Premium Accumulation)	2,720,077	XXX	2,720,077	XXX	0
0299997. Totals (Gross)	2,720,077	XXX	2,720,077	XXX	0
0299998. Reinsurance ceded	1,910,457	XXX	1,910,457	XXX	0
0299999. Annuities: Totals (Net)	809,620	XXX	809,620	XXX	0
0399998. Reinsurance ceded	0	0	0	0	0
0399999. SCWLC: Totals (Net)	0	0	0	0	0
0400001. ADB	116	0	116	0	0
0499997. Totals (Gross)	116	0	116	0	0
0499998. Reinsurance ceded	110	0	110	0	0
0499999. Accidental Death Benefits: Totals (Net)	6	0	6	0	0
0500001. WP-Active	938	0	938	0	0
0599997. Totals (Gross)	938	0	938	0	0
0599998. Reinsurance ceded	891	0	891	0	0
0599999. Disability-Active Lives: Totals (Net)	47	0	47	0	0
0699998. Reinsurance ceded	0	0	0	0	0
0699999. Disability-Disabled Lives: Totals (Net)	0	0	0	0	0
0700001. Deficiency Reserves	5,887	0	5,887	0	0
0700002. Non-Deduction Reserves	58,276	0	58,276	0	0
0700003. CV> Reserves	0	0	0	0	0
0700004. Immediate Payment of Claim Reserve	0	0	0	0	0
0700005. Substandard Reserve	243	0	243	0	0
0700006. Waiver of Premium	0	0	0	0	0
0700007. Add'l Reserve-Asset/Liability	453,000	0	453,000	0	0
0799997. Totals (Gross)	517,406	0	517,406	0	0
0799998. Reinsurance ceded	45,619	0	45,619	0	0
0799999. Miscellaneous Reserves: Totals (Net)	471,787	0	471,787	0	0
9999999. Totals (Net) - Page 3, Line 1	2,883,019	0	2,883,019	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 .

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
EXHIBIT 5 - INTERROGATORIES

1.1 Has the reporting entity ever issued both participating and non-participating contracts? Yes [] No [X]
 1.2 If not, state which kind is issued.
 non-participating

2.1 Does the reporting entity at present issue both participating and non-participating contracts? Yes [] No [X]
 2.2 If not, state which kind is issued.
 non-participating

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

4. Has the reporting entity any assessment or stipulated premium contracts in force? Yes [] No [X]
 If so, state:
 4.1 Amount of insurance? \$ 0
 4.2 Amount of reserve? \$ 0
 4.3 Basis of reserve:

 4.4 Basis of regular assessments:

 4.5 Basis of special assessments:

 4.6 Assessments collected during the year \$ 0

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: \$ 0
 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: \$ 0
 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 \$ 0
 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: \$ 0
 7.4 Identify where the reserves are reported in the blank:

8. Does the reporting entity have any Contingent Deferred Annuity contracts or agreements in effect as of December 31 of the current year? Yes [] No [X]
 8.1 If yes, state the total dollar amount of account value covered by these contracts or agreements: \$ 0
 8.2 State the amount of reserves established for this business: \$ 0
 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: \$ 0
 9.2 State the amount of reserves established for this business: \$ 0
 9.3 Identify where the reserves are reported in the blank:

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

1 Description of Valuation Class	Valuation Basis		4 Increase in Actuarial Reserve Due to Change
	2 Changed From	3 Changed To	
9999999 - Total (Column 4, only)			

NONE

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America

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

	1	Comprehensive		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
		2 Individual	3 Group										
ACTIVE LIFE RESERVE		Total											
1. Unearned premium reserves		1,864,212	0	0	1,455,064	0	0	0	0	0	0	0	409,148
2. Additional contract reserves (b)		6,356,291	0	0	6,000,000	0	0	0	0	0	0	0	356,291
3. Additional actuarial reserves-Asset/Liability analysis		155,259	0	0	155,259	0	0	0	0	0	0	0	0
4. Reserve for future contingent benefits		0	0	0	0	0	0	0	0	0	0	0	0
5. Reserve for rate credits		0	0	0	0	0	0	0	0	0	0	0	0
6. Aggregate write-ins for reserves		0	0	0	0	0	0	0	0	0	0	0	0
7. Totals (Gross)		8,375,762	0	0	7,610,323	0	0	0	0	0	0	0	765,439
8. Reinsurance ceded		7,409,920	0	0	7,252,657	0	0	0	0	0	0	0	157,263
9. Totals (Net)		965,842	0	0	357,666	0	0	0	0	0	0	0	608,176
CLAIM RESERVE													
10. Present value of amounts not yet due on claims		0	0	0	0	0	0	0	0	0	0	0	0
11. Additional actuarial reserves-Asset/Liability analysis		0	0	0	0	0	0	0	0	0	0	0	0
12. Reserve for future contingent benefits		0	0	0	0	0	0	0	0	0	0	0	0
13. Aggregate write-ins for reserves		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
15. Reinsurance ceded		0	0	0	0	0	0	0	0	0	0	0	0
16. Totals (Net)		0	0	0	0	0	0	0	0	0	0	0	0
17. TOTAL (Net)		965,842	0	0	357,666	0	0	0	0	0	0	0	608,176
18. TABULAR FUND INTEREST		36,702	0	0	13,591	0	0	0	0	0	0	0	23,111
DETAILS OF WRITE-INS													
0601.													
0602.													
0603.													
0698. Summary of remaining write-ins for Line 6 from overflow page		0	0	0	0	0	0	0	0	0	0	0	0
0699. TOTALS (Lines 0601 thru 0603 plus 0698) (Line 6 above)		0	0	0	0	0	0	0	0	0	0	0	0
1301.													
1302.													
1303.													
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0	0	0	0	0	0	0	0
1399. TOTALS (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0	0	0	0	0	0	0	0

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

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America

EXHIBIT 7 - DEPOSIT TYPE CONTRACTS

	1 Total	2 Guaranteed Interest Contracts	3 Annuities Certain	4 Supplemental Contracts	5 Dividend Accumulations or Refunds	6 Premium and Other Deposit Funds
1. Balance at the beginning of the year before reinsurance	17,568	0	13,979	0	3,589	0
2. Deposits received during the year	0	0	0	0	0	0
3. Investment earnings credited to the account	654	0	494	0	160	0
4. Other net change in reserves	0	0	0	0	0	0
5. Fees and other charges assessed	0	0	0	0	0	0
6. Surrender charges	0	0	0	0	0	0
7. Net surrender or withdrawal payments	4,801	0	4,020	0	781	0
8. Other net transfers to or (from) Separate Accounts	0	0	0	0	0	0
9. Balance at the end of current year before reinsurance (Lines 1+2+3+4-5-6-7-8)	13,421	0	10,453	0	2,968	0
10. Reinsurance balance at the beginning of the year	0	0	0	0	0	0
11. Net change in reinsurance assumed	0	0	0	0	0	0
12. Net change in reinsurance ceded	0	0	0	0	0	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 current year after reinsurance (Lines 9 + 13)	13,421	0	10,453	0	2,968	0

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America

EXHIBIT 8 - CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS**PART 1 - Liability End of Current Year**

	1 Total	2 Industrial Life	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health		
			3 Life Insurance	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other
1. Due and unpaid:											
1.1 Direct	0	0	0	0	0	0	0	0	0	0	0
1.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
1.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0
1.4 Net	0	0	0	0	0	0	0	0	0	0	0
2. In course of settlement:											
2.1 Resisted	0	0	0	0	0	0	0	0	0	0	0
2.11 Direct	0	0	0	0	0	0	0	0	0	0	0
2.12 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
2.13 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0
2.14 Net	0	0	(b)	0	0	(b)	0	(b)	0	0	0
2.2 Other	90,427	0	90,427	0	0	0	0	0	0	0	0
2.21 Direct	90,427	0	90,427	0	0	0	0	0	0	0	0
2.22 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
2.23 Reinsurance ceded	84,305	0	84,305	0	0	0	0	0	0	0	0
2.24 Net	6,122	0	(b)	6,122	(b)	0	(b)	0	(b)	0	(b)
3. Incurred but unreported:											
3.1 Direct	3,054,320	0	65,573	0	0	0	0	0	0	0	2,988,747
3.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
3.3 Reinsurance ceded	2,120,575	0	61,133	0	0	0	0	0	0	0	2,059,442
3.4 Net	933,745	0	(b)	4,440	(b)	0	(b)	0	(b)	0	(b)
4. TOTALS	3,144,747	0	156,000	0	0	0	0	0	0	0	2,988,747
4.1 Direct	0	0	0	0	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	2,204,880	0	145,438	0	0	0	0	0	0	0	2,059,442
4.4 Net	939,867	(a)	0	(a)	10,562	0	0	(a)	0	0	929,305

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

(b) Include only portion of disability and accident and health claim liabilities applicable to assumed "accrued" benefits. Reserves (including reinsurance assumed and net of reinsurance ceded) for unaccrued benefits for Ordinary Life Insurance \$ 0

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

Credit (Group and Individual) Accident and Health \$ 0, and Other Accident and Health \$ 0 are included in Page 3, Line 2 (See Exhibit 6, Claim Reserve).

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America

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

	1 Total	2 Industrial Life (a)	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health		
			3 Life Insurance (b)	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance (c)	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other
1. Settlements During the Year:											
1.1 Direct	26,647,624	0	1,441,951	160,587	0	0	0	0	0	0	25,045,086
1.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
1.3 Reinsurance ceded	18,912,751	0	1,243,101	138,180	0	0	0	0	0	0	17,531,470
1.4 Net	(d) 7,734,873	0	198,850	22,407	0	0	0	0	0	0	7,513,616
2. Liability December 31, current year from Part 1:											
2.1 Direct	3,144,747	0	156,000	0	0	0	0	0	0	0	2,988,747
2.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
2.3 Reinsurance ceded	2,204,880	0	145,438	0	0	0	0	0	0	0	2,059,442
2.4 Net	939,867	0	10,562	0	0	0	0	0	0	0	929,305
3. Amounts recoverable from reinsurers December 31, current year	147,504	0	132,891	14,613	0	0	0	0	0	0	0
4. Liability December 31, prior year:											
4.1 Direct	3,726,090	0	119,768	0	0	0	0	0	0	0	3,606,322
4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	2,701,355	0	97,279	0	0	0	0	0	0	0	2,604,076
4.4 Net	1,024,735	0	22,489	0	0	0	0	0	0	0	1,002,246
5. Amounts recoverable from reinsurers December 31, prior year	133,066	0	120,564	12,502	0	0	0	0	0	0	0
6. Incurred Benefits											
6.1 Direct	26,066,281	0	1,478,183	160,587	0	0	0	0	0	0	24,427,511
6.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
6.3 Reinsurance ceded	18,430,714	0	1,303,587	140,291	0	0	0	0	0	0	16,986,836
6.4 Net	7,635,567	0	174,596	20,296	0	0	0	0	0	0	7,440,675

(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 \$ 10,576 in Line 1.1, \$ 6,506 in Line 1.4.

\$ 10,576 in Line 6.1, and \$ 6,506 in Line 6.4.

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

\$ 0 in Line 6.1, and \$ 0 in Line 6.4.

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
EXHIBIT OF NON-ADMITTED ASSETS

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D)	0	0	0
2. Stocks (Schedule D):			
2.1 Preferred stocks	0	0	0
2.2 Common stocks	0	0	0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens	0	0	0
3.2 Other than first liens	0	0	0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company	0	0	0
4.2 Properties held for the production of income	0	0	0
4.3 Properties held for sale	0	0	0
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)	0	0	0
6. Contract loans	0	0	0
7. Derivatives (Schedule DB)	0	0	0
8. Other invested assets (Schedule BA)	0	0	0
9. Receivables for securities	0	0	0
10. Securities lending reinvested collateral assets (Schedule DL)	0	0	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	0	0
14. Investment income due and accrued	0	0	0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection	0	0	0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due	0	0	0
15.3 Accrued retrospective premiums and contracts subject to redetermination	0	0	0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers	0	0	0
16.2 Funds held by or deposited with reinsured companies	0	0	0
16.3 Other amounts receivable under reinsurance contracts	0	0	0
17. Amounts receivable relating to uninsured plans	0	0	0
18.1 Current federal and foreign income tax recoverable and interest thereon	0	0	0
18.2 Net deferred tax asset	0	0	0
19. Guaranty funds receivable or on deposit	0	0	0
20. Electronic data processing equipment and software	45,842	80,765	34,923
21. Furniture and equipment, including health care delivery assets	10,947	21,128	10,181
22. Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0
23. Receivables from parent, subsidiaries and affiliates	0	0	0
24. Health care and other amounts receivable	0	0	0
25. Aggregate write-ins for other than invested assets	299,974	410,433	110,459
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	356,763	512,326	155,563
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
28. Total (Lines 26 and 27)	356,763	512,326	155,563
DETAILS OF WRITE-INS			
1101.			
1102.			
1103.			
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0
2501. Other Assets Nonadmitted	183,402	210,079	26,677
2502. Commission Advances	43,574	115,798	72,224
2503. Supply Inventory	72,998	84,556	11,558
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	299,974	410,433	110,459

NOTES TO FINANCIAL STATEMENTS

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

The financial statements of The Order of United Commercial Travelers of America (UCT) are presented on the basis of accounting practices prescribed or permitted by the Ohio Department of Insurance.

The Ohio Department of Insurance recognizes only statutory accounting practices prescribed or permitted by the state of Ohio for determining and reporting the financial condition and results of operations of an insurance company, and for determining its solvency under Ohio Insurance Law. The National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures manual, version effective March 2019, (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the state of Ohio. UCT has no transactions that fall outside the NAIC's practices and procedures.

	F/S SSAP #	F/S Page	F/S Line #	2020	2019
NET INCOME					
(1) State basis (Page 4, Line 35, Columns 1 & 2)	XXX	XXX	XXX	\$ (273,669)	\$ (1,104,746)
(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	\$ (273,669)	\$ (1,104,746)
SURPLUS					
(5) State basis (Page 3, Line 38, Columns 1 & 2)	XXX	XXX	XXX	\$ 7,449,383	\$ 7,572,917
(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	\$ 7,449,383	\$ 7,572,917

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

Life premiums are recognized as income over the premium paying period of the related policies. Annuity considerations are recognized as revenue when received. Health premiums are earned ratably over the terms of the related insurance and reinsurance contracts or policies. Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred.

The company has no dividend paying life insurance policies.

(1) Basis for Short-Term Investments

Short-term investments are stated at amortized cost.

(2) Basis for Bonds and Amortization Schedule

Bonds not backed by other loans are stated at amortized cost using the scientific-to-worst amortization method.

(3) Basis for Common Stocks

The Company has no common stock.

(4) Basis for Preferred Stocks

The Company has no preferred stock.

(5) Basis for Mortgage Loans

The Company has no mortgage loans.

(6) Basis for Loan-Backed Securities and Adjustment Methodology

Bonds backed by other loans are stated at amortized cost using the scientific-to-worst amortization method.

(7) Accounting Policies for Investments in Subsidiaries, Controlled and Affiliated Entities

The Company has no material investment or transactions with subsidiaries, controlled or affiliate entities.

(8) Accounting Policies for Investments in Joint Ventures, Partnerships and Limited Liability Entities

The Company has no interests in joint ventures, partnerships or limited liability companies that exceed 10% of admitted assets.

(9) Accounting Policies for Derivatives

The Company has no derivatives.

(10) Anticipated Investment Income Used in Premium Deficiency Calculation

The Company has no individual Accident and Health contracts for which a deficiency reserve is required.

(11) Management's Policies and Methodologies for Estimating Liabilities for Losses and Loss/Claim Adjustment Expenses

Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes that amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liabilities are continually reviewed and any adjustments are reflected in the period determined.

(12) Changes in the Capitalization Policy and Predefined Thresholds from Prior Period

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

(13) Method Used to Estimate Pharmaceutical Rebate Receivables

The Company does not have pharmaceutical rebate receivables.

D. Going Concern

N/A.

NOTE 2 Accounting Changes and Corrections of Errors

NOTES TO FINANCIAL STATEMENTS

The company does not have any changes or corrections of errors.

NOTE 3 Business Combinations and Goodwill

A. Statutory Purchase Method - None

B. Statutory Merger
None

C. Assumption Reinsurance

In December of 2010, the Company assumed 100% of all assets and liabilities of National Masonic Provident Association, NAIC Company Code 66702. The balance in the deferred income account at December 31, 2020 is \$0. \$0 was recognized as income in 2020.

D. Impairment Loss
None

NOTE 4 Discontinued Operations

A. Discontinued Operation Disposed of or Classified as Held for Sale

(1) List of Discontinued Operations Disposed of or Classified as Held for Sale

Discontinued Operation Identifier	Description of Discontinued Operation
1	Discontinuation of Benefits in Canada

(2) Description of the Facts and Circumstances Leading to the Disposal or Expected Disposal and a Description of the Expected Manner and Timing of that Disposal

In 2018, the Order made the decision to exit the insurance business in Canada. The decision was made as a result of a lack of membership growth in Canada as well as the costs to implement changes resulting from IFRS 17 in the coming years. The Order communicated its plans with OSFI and began working on a payout for each policyholder. The payout amounts were determined by an independent actuary for policies in force as of July 1, 2018 and were based on the type of policy, length of policy in force, and various other factors. The payouts in Canada had a large impact on Claims, Policy Reserves, General Expenses, Bonds, and Surplus.

The Order had policies considered both cancelable and non-cancelable. All 2,100+ cancelable policies were cancelled by November 30, 2018 and checks were issued at the end of October, 2018. Non-cancelable policies require a consent form be signed and returned before the policy is cancelled by the Order. These consent forms were mailed at the end of November 2018. Once the signed consent form is received by the Company, a check is issued to the policyowner in the amount shown on the consent form. At the end of 2020, the Order has six active policies. Four of the six are reduced paid-up policies and the company has found another company in Canada to take on the liabilities associated with the policies. The company is working with the other two policyholders to attempt to buy out the policy or to novate the policy to the US.

The company had a loss of approximately \$57,000 from the Discontinuation in 2020 as a result of accruing additional expenses resulting from the discontinuation efforts carrying into 2021. The cumulative loss since 2018 is approximately \$700,000. The company will continue to report the Discontinuation in the annual statement until the company has successfully exited Canada. There is a large, negative expense on Exhibit 2 as a result of previously accrued expenses now correctly running through Exhibit 2 (Actuarial fees, Attorney fees, etc.)

In 2020, there was a surplus transfer from the Canada to the US resulting in a lower current fair value of the Canadian assets in item (4) below.

(3) Loss Recognized on Discontinued Operations

Discontinued Operation Identifier	Amount for Reporting Period	Cumulative Amount Since Classified as Held for Sale
1	\$ 57,196	\$ 697,222

(4) Carrying Amount and Fair Value of Discontinued Operations and the Effect on Assets, Liabilities, Surplus and Income

a. Carrying Amount of Discontinued Operations

Discontinued Operation Identifier	Carrying Amount Immediately Prior to Classification as Held for Sale	Current Fair Value Less Costs to Sell
1	\$ 2,428,407	\$ 816,765

b. Effect of Discontinued Operations on Assets, Liabilities, Surplus and Income

	Discontinued Operation Identifier	Line Number	Line Description	Amount Attributable to Discontinued Operations
1. Assets				
	1	1	Bonds	\$ (1,027,976)
	1	5	Cash	\$ 1,084,264
2. Liabilities				
	1	1	Aggregate Reserves for Life Contracts	\$ (42)
	1	2	Aggregate Reserves for A&H Contracts	\$ (390)
	1	4	Contract Claims - Life	\$ (184)
	1	4	Contract Claims - A&H	\$ (7,698)
	1	11	General Expenses	\$ 121,798
3. Surplus				
	1	29	Unassigned Surplus	\$ (56,196)
4. Income				
	1	1	Payout Amount (Claims)	\$ (250)
	1	2	Reduction in Reserves	\$ 8,315
	1	3	Capital Gains	\$ 232,573
	1	4	General Expenses (Actuarial Fees, Legal Fees, etc.)	\$ (176,035)
	1	5	Canada Discontinuation - Accrual Reversal	\$ (121,798)

B. Change in Plan of Sale of Discontinued Operation
None

C. Nature of Any Significant Continuing Involvement with Discontinued Operations After Disposal
N/A

NOTES TO FINANCIAL STATEMENTS

D. Equity Interest Retained in the Discontinued Operation After Disposal
N/A

NOTE 5 Investments

- A. Mortgage Loans, including Mezzanine Real Estate Loans - None
- B. Debt Restructuring - None
- C. Reverse Mortgages - None
- D. Loan-Backed Securities
 - (1) Description of Sources Used to Determine Prepayment Assumptions
Prepayment assumptions for loan-backed securities are obtained from Bloomberg.

	1	2		3
		Other-than-Temporary Impairment Recognized in Loss		
	Amortized Cost Basis Before Other-than-Temporary Impairment	2a Interest	2b Non-interest	Fair Value 1 - (2a + 2b)
(2) OTTI recognized 1st Quarter	\$ -	\$ -	\$ -	\$ -
a. Intent to sell	\$ -	\$ -	\$ -	\$ -
b. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis	\$ -	\$ -	\$ -	\$ -
c. Total 1st Quarter	\$ -	\$ -	\$ -	\$ -
OTTI recognized 2nd Quarter	\$ -	\$ -	\$ -	\$ -
d. Intent to sell	\$ -	\$ -	\$ -	\$ -
e. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis	\$ -	\$ -	\$ -	\$ -
f. Total 2nd Quarter	\$ -	\$ -	\$ -	\$ -
OTTI recognized 3rd Quarter	\$ -	\$ -	\$ -	\$ -
g. Intent to sell	\$ -	\$ -	\$ -	\$ -
h. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis	\$ -	\$ -	\$ -	\$ -
i. Total 3rd Quarter	\$ -	\$ -	\$ -	\$ -
OTTI recognized 4th Quarter	\$ -	\$ -	\$ -	\$ -
j. Intent to sell	\$ -	\$ -	\$ -	\$ -
k. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis	\$ -	\$ -	\$ -	\$ -
l. Total 4th Quarter	\$ -	\$ -	\$ -	\$ -
m. Annual Aggregate Total	\$ -	\$ -	\$ -	\$ -

(3)						
1	2	3	4	5	6	7
CUSIP	Book/Adjusted Carrying Value Amortized Cost Before Current Period OTTI	Present Value of Projected Cash Flows	Recognized Other-Than-Temporary Impairment	Amortized Cost After Other-Than-Temporary Impairment	Fair Value at time of OTTI	Date of Financial Statement Where Reported
Total	XXX	XXX	\$ -	XXX	XXX	XXX

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

1. Less than 12 Months	\$	567
2. 12 Months or Longer	\$	-

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

1. Less than 12 Months	\$	49,072
2. 12 Months or Longer	\$	-

(5) **Information Investor Considered in Reaching Conclusion that Impairments are Not Other-Than-Temporary**
 The Company has an "Other Than Temporary Impaired" policy in place that utilizes industry information, investment managers' expertise and rating agencies to identify securities that may be other than temporarily impaired.

- E. Dollar Repurchase Agreements and/or Securities Lending Transactions - None
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing - None
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing - None
- H. Repurchase Agreements Transactions Accounted for as a Sale - None
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale - None
- J. Real Estate - The Company does not own any real estate.
- K. Low Income Housing tax Credits (LIHTC) - None
- L. Restricted Assets

1. Restricted Assets (Including Pledged)	Gross (Admitted & Nonadmitted) Restricted					6	7		
	Current Year								
	1	2	3	4	5				

NOTES TO FINANCIAL STATEMENTS

Restricted Asset Category	Total General Account (G/A)	G/A Supporting S/A Activity (a)	Total Separate Account (S/A) Restricted Assets	S/A Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/(Decrease) (5 minus 6)
a. Subject to contractual obligation for which liability is not shown	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
b. Collateral held under security lending agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
c. Subject to repurchase agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
d. Subject to reverse repurchase agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
e. Subject to dollar repurchase agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
f. Subject to dollar reverse repurchase agreements	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
g. Placed under option contracts	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
i. FHLB capital stock	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
j. On deposit with states	\$ 629,886	\$ -	\$ -	\$ -	\$ 629,886	\$ 629,405	\$ 481
k. On deposit with other regulatory bodies	\$ 913,132	\$ -	\$ -	\$ -	\$ 913,132	\$ 1,027,976	\$ (114,844)
l. Pledged collateral to FHLB (including assets backing funding agreements)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
m. Pledged as collateral not captured in other categories	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
n. Other restricted assets	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
o. Total Restricted Assets	\$ 1,543,018	\$ -	\$ -	\$ -	\$ 1,543,018	\$ 1,657,381	\$ (114,363)

(a) Subset of Column 1

(b) Subset of Column 3

Restricted Asset Category	Current Year				
	8	9	Percentage		
			10	11	
	Total Non-admitted Restricted	Total Admitted Restricted (5 minus 8)	Gross (Admitted & Non-admitted) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (d)	
a. Subject to contractual obligation for which liability is not shown	\$ -	\$ -	0.000%	0.000%	
b. Collateral held under security lending agreements	\$ -	\$ -	0.000%	0.000%	
c. Subject to repurchase agreements	\$ -	\$ -	0.000%	0.000%	
d. Subject to reverse repurchase agreements	\$ -	\$ -	0.000%	0.000%	
e. Subject to dollar repurchase agreements	\$ -	\$ -	0.000%	0.000%	
f. Subject to dollar reverse repurchase agreements	\$ -	\$ -	0.000%	0.000%	
g. Placed under option contracts	\$ -	\$ -	0.000%	0.000%	
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock	\$ -	\$ -	0.000%	0.000%	
i. FHLB capital stock	\$ -	\$ -	0.000%	0.000%	
j. On deposit with states	\$ -	\$ 629,886	4.291%	4.397%	
k. On deposit with other regulatory bodies	\$ -	\$ 913,132	6.220%	6.375%	
l. Pledged collateral to FHLB (including assets backing funding agreements)	\$ -	\$ -	0.000%	0.000%	
m. Pledged as collateral not captured in other categories	\$ -	\$ -	0.000%	0.000%	
n. Other restricted assets	\$ -	\$ -	0.000%	0.000%	
o. Total Restricted Assets	\$ -	\$ 1,543,018	10.510%	10.772%	

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

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

M. Working Capital Finance Investments - None

N. Offsetting and Netting of Assets and Liabilities - None

O. 5GI Securities - None

P. Short Sales - None

Q. Prepayment Penalty and Acceleration Fees

	General Account	Separate Account
1. Number of CUSIPs	2	0
2. Aggregate Amount of Investment Income	\$ 11,801	\$ -

NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies

A. The Company has no investments in joint ventures, partnerships or limited liability companies that exceed 10% of its admitted assets.

B. No investments in Impaired Joint Ventures, Partnerships and Limited Liability Companies

NOTE 7 Investment Income

A. There was no investment income due and accrued over 90 days past due requiring exclusion from the financial statements.

B. No debt excluded.

NOTE 8 Derivative Instruments - None

NOTES TO FINANCIAL STATEMENTS

NOTE 9 Income Taxes

The Company is an Internal Revenue Code Section 501(c)(8) non-profit corporation and is not required to calculate or pay Federal or State Income Tax.

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

A. There are no transactions of a material nature to report. Related party transactions are reported on Schedule Y.

There is no material asset or liability account that involves a related party at year end.

NOTE 11 Debt

A. The Company does not have any outstanding debt obligations.

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

A. Defined Benefit Plan - None

E. Defined Contribution Plan

The company sponsors a qualified defined contribution plan (401K Profit Sharing Plan) that covers all eligible U.S. employees. Eligible Canadian employees participate in Individual RRSP accounts in Canada.

The Company provides a 401K match of 100% up to 3% and 50% from 3.1% to 5% of defined compensation. The Company's contribution for the plan was \$95,857 \$101,455 for 2020 and 2019, respectively. The Company did not make a voluntary pension contribution for 2020. At December 31, 2020, the fair value of plan assets was \$5,287,872. The Company paid RRSP contributions of \$3,209 in 2020.

H. Postemployment Benefits and Compensated Absences

The Company does not have any postemployment benefit arrangements.

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

N/A

NOTE 13 Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

The Company is a Fraternal Benefit Society and does not issue or maintain any type of stock.

The company has not participated in any surplus note transactions.

NOTE 14 Liabilities, Contingencies and Assessments

A. Contingent Commitments

N/A

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

	Direct
(1) The company paid the following amounts in the reporting period to settle claims related extra contractual obligations or bad faith claims stemming from lawsuits	\$ -
(2) Number of claims where amounts were paid to settle claims related extra contractual obligations or bad faith claims resulting from lawsuits during the reporting period	0-25 Claims
(3) Indicate whether claim count information is disclosed per claim or per claimant	0-25 Claims

NOTE 15 Leases

A. Lessee Operating Lease:

(1) The Company leases equipment under various non-cancelable operating lease agreements that expire through November 2024. Rental expense for 2020 and 2019 was approximately \$145,115 and \$158,003, respectively.

The Company leases real estate under non-cancelable operating lease agreements that expire through July 2024. Rental expense for 2020 and 2019 was approximately \$379,401 and \$447,163, respectively. In 2019, UCT reduced its leased space in Columbus, Ohio by approximately 20%.

(2) a. At December 31, 2020, the minimum aggregate rental commitments are as follows:

	Operating Leases
1. 2021	\$ 371,284
2. 2022	\$ 351,751
3. 2023	\$ 333,057
4. 2024	\$ 213,100
5. 2025	\$ -
6. Total	\$ 1,269,192

(3) None

B. Lessor Leases - N.A

NOTE 16 Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

The Company does not have any financial instruments with off-balance sheet risk or financial instruments with concentrations of credit risk.

NOTE 17 Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

A. Transfers of Receivables Reported as Sales - None

B. Transfer and Servicing of Financial Assets - N/A

C. Wash Sales - None

NOTE 18 Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

A. ASO Plans: N/A

B. ASC Plans: N/A

C. Medicare or Similarly Structured Cost Based Reimbursement Contract - N/A

NOTE 19 Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

The Company did not receive any direct premium written through managing general agents or third party administrators.

NOTES TO FINANCIAL STATEMENTS

NOTE 20 Fair Value Measurements

A. (1) Fair Value Measurements at Reporting Date - The Company holds bonds at amortized cost.

NOTE 21 Other Items

A. Unusual or Infrequent Items
See Note 4 - Discontinued Operations

B. Troubled Debt Restructuring: Debtors
N/A

C. Other Disclosures
N/A

D. Business Interruption Insurance Recoveries
N/A

E. State Transferable and Non-transferable Tax Credits - None
\$ - \$ -

F. Subprime Mortgage Related Risk Exposure - None

G. Retained Assets - None

H. Insurance-Linked Securities (ILS) Contracts - None

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

NOTE 22 Events Subsequent

The Company has no subsequent events to report. Subsequent events have been considered through February 19, 2021 for these statutory financial statements which are to be issued on February 23, 2021.

Type II - Nonrecognized Subsequent Events:

	Current Year	Prior Year
A. Did the reporting entity write accident and health insurance premium that is subject to Section 9010 of the Federal Affordable Care Act (YES/NO)?	No	
B. ACA fee assessment payable for the upcoming year	\$ -	\$ -
C. ACA fee assessment paid	\$ -	\$ -
D. Premium written subject to ACA 9010 assessment	\$ -	\$ -
E. Total Adjusted Capital before surplus adjustment (Five-Year Historical Line 30)	\$ -	
F. Total Adjusted Capital after surplus adjustment (Five-Year Historical Line 30 minus 22B above)	\$ -	
G. Authorized Control Level (Five-Year Historical Line 31)	\$ -	
H. Would reporting the ACA assessment as of Dec. 31, 2020 have triggered an RBC action level (YES/NO)?	No	

NOTE 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]

If yes, give full details.

(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]

If yes, give full details.

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. \$0

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? \$0

(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]

If yes, give full details.

Section 3 – Ceded Reinsurance Report – Part B

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

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

If yes, what is the amount of reinsurance credits, whether an asset or a reduction of liability, taken for such new agreements or amendments? \$0

B. Uncollectible Reinsurance

(1) The Company has written off in the current year reinsurance balances due from the companies listed below, the amount of: \$ -

That is reflected as:

NOTES TO FINANCIAL STATEMENTS

3106999 Total	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
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NOTE 32 Analysis of Annuity Actuarial Reserves and Deposit Type Contract Liabilities by Withdrawal Characteristics

A. INDIVIDUAL ANNUITIES:

	General Account	Separate Account with Guarantees	Separate Account Nonguaranteed	Total	% of Total
(1) Subject to discretionary withdrawal:					
a. With market value adjustment	\$ -	\$ -	\$ -	\$ -	0.0%
b. At book value less current surrender charge of 5% or more	\$ -	\$ -	\$ -	\$ -	0.0%
c. At fair value	\$ -	\$ -	\$ -	\$ -	0.0%
d. Total with market value adjustment or at fair value (total of a through c)	\$ -	\$ -	\$ -	\$ -	0.0%
e. At book value without adjustment (minimal or no charge or adjustment)	\$ 2,720,077	\$ -	\$ -	\$ 2,720,077	100.0%
(2) Not subject to discretionary withdrawal	\$ -	\$ -	\$ -	\$ -	0.0%
(3) Total (gross: direct + assumed)	\$ 2,720,077	\$ -	\$ -	\$ 2,720,077	100.0%
(4) Reinsurance ceded	\$ 1,910,457	\$ -	\$ -	\$ 1,910,457	
(5) Total (net)* (3) - (4)	\$ 809,620	\$ -	\$ -	\$ 809,620	

(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: \$ -

* Reconciliation of total annuity actuarial reserves and deposit fund liabilities.

B. GROUP ANNUITIES:

	General Account	Separate Account with Guarantees	Separate Account Nonguaranteed	Total	% of Total
(1) Subject to discretionary withdrawal:					
a. With market value adjustment	\$ -	\$ -	\$ -	\$ -	0.0%
b. At book value less current surrender charge of 5% or more	\$ -	\$ -	\$ -	\$ -	0.0%
c. At fair value	\$ -	\$ -	\$ -	\$ -	0.0%
d. Total with market value adjustment or at fair value (total of a through c)	\$ -	\$ -	\$ -	\$ -	0.0%
e. At book value without adjustment (minimal or no charge or adjustment)	\$ -	\$ -	\$ -	\$ -	0.0%
(2) Not subject to discretionary withdrawal	\$ -	\$ -	\$ -	\$ -	0.0%
(3) Total (gross: direct + assumed)	\$ -	\$ -	\$ -	\$ -	100.0%
(4) Reinsurance ceded	\$ -	\$ -	\$ -	\$ -	
(5) Total (net)* (3) - (4)	\$ -	\$ -	\$ -	\$ -	

(6) Amount included in B(1)b above that will move to B(1)e for the first time within the year after the statement date: \$ -

C. DEPOSIT-TYPE CONTRACTS (no life contingencies):

	General Account	Separate Account with Guarantees	Separate Account Nonguaranteed	Total	% of Total
(1) Subject to discretionary withdrawal:					
a. With market value adjustment	\$ -	\$ -	\$ -	\$ -	0.0%
b. At book value less current surrender charge of 5% or more	\$ -	\$ -	\$ -	\$ -	0.0%
c. At fair value	\$ 13,421	\$ -	\$ -	\$ 13,421	100.0%
d. Total with market value adjustment or at fair value (total of a through c)	\$ 13,421	\$ -	\$ -	\$ 13,421	100.0%
e. At book value without adjustment (minimal or no charge or adjustment)	\$ -	\$ -	\$ -	\$ -	0.0%
(2) Not subject to discretionary withdrawal	\$ -	\$ -	\$ -	\$ -	0.0%
(3) Total (gross: direct + assumed)	\$ 13,421	\$ -	\$ -	\$ 13,421	100.0%
(4) Reinsurance ceded	\$ -	\$ -	\$ -	\$ -	
(5) Total (net)* (3) - (4)	\$ 13,421	\$ -	\$ -	\$ 13,421	

(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. Life & Accident & Health Annual Statement:

	Amount
(1) Exhibit 5, Annuities Section, Total (net)	\$ 809,620
(2) Exhibit 5, Supplementary Contracts with Life Contingencies Section, Total (net)	\$ -
(3) Exhibit 7, Deposit-Type Contracts, Line 14, Column 1	\$ 13,421
(4) Subtotal	\$ 823,041
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	\$ 823,041

NOTE 33 Analysis of Life Actuarial Reserves by Withdrawal Characteristics

	Account Value	Cash Value	Reserve
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A. General Account

NOTES TO FINANCIAL STATEMENTS

(1) Subject to discretionary withdrawal, surrender values or policy loans:				
a. Term Policies with Cash Value	\$	-	\$	\$
b. Universal Life	\$	485,980	\$	485,980
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	\$	-	\$	9,467,955
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	\$ 139,013
b. Accidental Death Benefits	XXX		XXX	\$ 116
c. Disability - Active Lives	XXX		XXX	\$ 938
d. Disability - Disabled Lives	XXX		XXX	\$
e. Miscellaneous Reserves	XXX		XXX	\$ 517,406
(3) Total (gross: direct + assumed)	\$ 485,980	\$ 8,536,006	\$ 10,611,408	
(4) Reinsurance ceded	\$ -	\$ -	\$ 8,538,009	
(5) Total (net) (3) - (4)	\$ 485,980	\$ 8,536,006	\$ 2,073,399	

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)	\$ -	\$ -	\$ -

D. Life & Accident & Health Annual Statement:	Amount
(1) Exhibit 5, Life Insurance Section, Total (net)	\$ 1,601,559
(2) Exhibit 5, Accidental Death Benefits Section, Total (net)	\$ 6
(3) Exhibit 5, Disability - Active Lives Section, Total (net)	\$ 47
(4) Exhibit 5, Disability - Disabled Lives Section, Total (net)	\$ -
(5) Exhibit 5, Miscellaneous Reserves Section, Total (net)	\$ 471,787
(6) Subtotal	\$ 2,073,399

Separate Accounts Statement

(7) Exhibit 3, Line 0199999, Column 2	\$ -
(8) Exhibit 3, Line 0499999, Column 2	\$ -
(9) Exhibit 3, Line 0599999, Column 2	\$ -
(10) Subtotal (Lines (7) through (9))	\$ -
(11) Combined Total (6) and (10))	\$ 2,073,399

NOTE 34 Premium & Annuity Considerations Deferred and Uncollected

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

NOTES TO FINANCIAL STATEMENTS

Type	Gross	Net of Loading
(1) Industrial	\$ -	\$ -
(2) Ordinary new business	\$ 745	\$ (2,250)
(3) Ordinary renewal	\$ 54,333	\$ 70,853
(4) Credit Life	\$ -	\$ -
(5) Group Life	\$ -	\$ -
(6) Group Annuity	\$ -	\$ -
(7) Totals	\$ 55,078	\$ 68,603

NOTE 35 Separate Accounts

The Company does not have any separate accounts.

NOTE 36 Loss/Claim Adjustment Expenses

The balance in the liability for unpaid accident and health claim adjustment expenses as of December 31, 2020 and December 31, 2019 was \$17,298 and \$18,355, respectively.

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
GENERAL INTERROGATORIES

**PART 1 - COMMON INTERROGATORIES
 GENERAL**

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

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

1.3 State Regulating? Ohio

1.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes [] 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. 12/31/2018

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. 12/31/2018

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). 12/13/2019

3.4 By what department or departments?
 Ohio Department of Insurance

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

3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [] No [X] 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 yes, complete and file the merger history data file with the NAIC.

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

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

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

6.2 If yes, give full information:

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

7.2 If yes,
 7.21 State the percentage of foreign control; 0.0 %
 7.22 State the nationality(s) of the foreign person(s) or entity(s) or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact; and identify the type of entity(s) (e.g., individual, corporation or government, manager or attorney in fact).

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
GENERAL INTERROGATORIES

8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes [] No [X]
 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.

8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [] No [X]
 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

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

9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
 BKD, 312 Walnut Street, Suite 3000, Cincinnati, Ohio 45020

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

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

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

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

10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? Yes [X] No [] N/A []

10.6 If the response to 10.5 is no or n/a, please explain:

11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?

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

12.11 Name of real estate holding company

12.12 Number of parcels involved 0

12.13 Total book/adjusted carrying value \$ 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 [] No [X]

13.3 Have there been any changes made to any of the trust indentures during the year? Yes [] No [X]

13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? Yes [] No [] N/A [X]

14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [X] No []

a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;

b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;

c. Compliance with applicable governmental laws, rules and regulations;

d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and

e. Accountability for adherence to the code.

14.11 If the response to 14.1 is No, please explain:

14.2 Has the code of ethics for senior managers been amended? Yes [] No [X]

14.21 If the response to 14.2 is yes, provide information related to amendment(s).

14.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No [X]

14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
GENERAL INTERROGATORIES

15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? Yes [] No [X]

15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount

BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? Yes [X] No []

17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? Yes [X] No []

18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict with the official duties of such person? Yes [X] No []

FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? Yes [] No [X]

20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):

20.11 To directors or other officers.....	\$ 0
20.12 To stockholders not officers.....	\$ 0
20.13 Trustees, supreme or grand (Fraternal Only).....	\$ 0

20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):

20.21 To directors or other officers.....	\$ 0
20.22 To stockholders not officers.....	\$ 0
20.23 Trustees, supreme or grand (Fraternal Only).....	\$ 0

21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? Yes [] No [X]

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

21.21 Rented from others.....	\$ 0
21.22 Borrowed from others.....	\$ 0
21.23 Leased from others	\$ 0
21.24 Other	\$ 0

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

22.2 If answer is yes:

22.21 Amount paid as losses or risk adjustment \$	0
22.22 Amount paid as expenses	\$ 0
22.23 Other amounts paid	\$ 0

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

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 [] No [X]

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]

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
GENERAL INTERROGATORIES

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 currently in force? (Exclude securities subject to Interrogatory 21.1 and 24.03). Yes [X] No []

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

25.21 Subject to repurchase agreements	\$ 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 to sale - excluding FHLB Capital Stock	\$ 0
25.27 FHLB Capital Stock	\$ 0
25.28 On deposit with states	\$ 629,886
25.29 On deposit with other regulatory bodies	\$ 913,132
25.30 Pledged as collateral - excluding collateral pledged to an FHLB	\$ 0
25.31 Pledged as collateral to FHLB - including assets backing funding agreements	\$ 0
25.32 Other	\$ 0

25.3 For category (25.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
.....

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

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

LINES 26.3 through 26.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:

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

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

26.41 Special accounting provision of SSAP No. 108	<input type="checkbox"/> Yes [] <input type="checkbox"/> No []
26.42 Permitted accounting practice	<input type="checkbox"/> Yes [] <input type="checkbox"/> No []
26.43 Other accounting guidance	<input type="checkbox"/> Yes [] <input type="checkbox"/> No []

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

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

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

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

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

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

1 Name of Custodian(s)	2 Custodian's Address
US Bank National Association	1555 N River Center Drive, Suite 302; Milwaukee, WI 53212

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
GENERAL INTERROGATORIES

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

1 Name(s)	2 Location(s)	3 Complete Explanation(s)
ScotiaTrust	Exchange Tower, 130 King Street West,	Canadian investments are in compliance with OSFI.

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
Sun Life Capital Management LLC	U.....

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

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 [X] No []

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
107680	Victor Harned, Sun Life Capital Management LLC .....	.....	SEC	NO.....

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

29.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
29.2999 - Total	0

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

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
GENERAL INTERROGATORIES

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

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1 Bonds	10,776,358	11,489,428	713,070
30.2 Preferred stocks .....	.0	0	0
30.3 Totals	10,776,358	11,489,428	713,070

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

.....

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 [] No [X]

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 [] No []

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

.....

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

32.2 If no, list exceptions:

.....

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

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

Has the reporting entity self-designated 5GI securities? Yes [] No [X]

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

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

Has the reporting entity self-designated PLGI securities? Yes [] No [X]

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

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

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [] No [X]

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 [] No [X] N/A []

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
GENERAL INTERROGATORIES

OTHER

37.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?\$24,600

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
AM Best	22,100
American Fraternal Alliance	2,500

38.1 Amount of payments for legal expenses, if any?\$49,956

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
Ice Miller, LLP	36,387
Walker Sorensen, LLP	13,569

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
.....

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
GENERAL INTERROGATORIES

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

Life, Accident and Health Companies/Fraternal Benefit Societies:

1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? Yes [] No []

1.2 If yes, indicate premium earned on U.S. business only \$ 30,187,144

1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? \$ 0

1.31 Reason for excluding:
.....

1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above. \$ 0

1.5 Indicate total incurred claims on all Medicare Supplement insurance. \$ 18,494,698

1.6 Individual policies:
Most current three years:
1.61 Total premium earned \$ 730,405
1.62 Total incurred claims \$ 393,135
1.63 Number of covered lives 494

All years prior to most current three years
1.64 Total premium earned \$ 29,456,739
1.65 Total incurred claims \$ 18,101,563
1.66 Number of covered lives 6,376

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	2,756,063	3,099,593
2.2 Premium Denominator	12,516,431	12,408,704
2.3 Premium Ratio (2.1/2.2)	0.220	0.250
2.4 Reserve Numerator	2,793,517	3,078,656
2.5 Reserve Denominator	4,161,682	4,284,719
2.6 Reserve Ratio (2.4/2.5)	0.671	0.719

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

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

3.3 What portion of capital and surplus funds of the reporting entity covered by assets in the Separate Accounts statement, is not currently distributable from the Separate Accounts to the general account for use by the general account? \$ 0

3.4 State the authority under which Separate Accounts are maintained:
.....

3.5 Was any of the reporting entity's Separate Accounts business reinsured as of December 31? Yes [] No []

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

3.7 If the reporting entity has assumed Separate Accounts business, how much, if any, reinsurance assumed receivable for reinsurance of Separate Accounts reserve expense allowances is included as a negative amount in the liability for "Transfers to Separate Accounts due or accrued (net)"? \$ 0

4. For reporting entities having sold annuities to another insurer where the insurer purchasing the annuities has obtained a release of liability from the claimant (payee) as the result of the purchase of an annuity from the reporting entity only:

4.1 Amount of loss reserves established by these annuities during the current year: \$ 0

4.2 List the name and location of the insurance company purchasing the annuities and the statement value on the purchase date of the annuities.

1	2 Statement Value on Purchase Date of Annuities (i.e., Present Value)
P&C Insurance Company And Location	

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
GENERAL INTERROGATORIES

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

5.1 Do you act as a custodian for health savings accounts? Yes [] No [X]

5.2 If yes, please provide the amount of custodial funds held as of the reporting date. \$ 0

5.3 Do you act as an administrator for health savings accounts? Yes [] No [X]

5.4 If yes, please provide the balance of funds administered as of the reporting date. \$ 0

6.1 Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers? Yes [] No [] N/A [X]

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

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

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

7.1 Direct Premium Written \$ 605,318
7.2 Total Incurred Claims \$ 1,478,183
7.3 Number of Covered Lives 2,578

*Ordinary Life Insurance Includes
Term (whether full underwriting, limited underwriting, jet issue, "short form app")
Whole Life (whether full underwriting, limited underwriting, jet issue, "short form app")
Variable Life (with or without secondary guarantee)
Universal Life (with or without secondary guarantee)
Variable Universal Life (with or without secondary guarantee)

8. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? Yes [X] No []

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

Life, Accident and Health Companies Only:

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

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

11. For stock reporting entities only:

11.1 Total amount paid in by stockholders as surplus funds since organization of the reporting entity: \$ 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 reinsurance 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	0
13.32 Paid claims 0	0	0	0
13.33 Claim liability and reserve (beginning of year) 0	0	0	0
13.34 Claim liability and reserve (end of year) 0	0	0	0
13.35 Incurred claims 0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
GENERAL INTERROGATORIES

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

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

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

13.5 What portion of earned premium reported in 13.31, Column 1 was assumed from pools? \$ 0

Fraternal Benefit Societies Only:

14. Is the reporting entity organized and conducted on the lodge system, with ritualistic form of work and representative form of government? Yes [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?
Subordinate councils elect representatives to the Regional Council. The Regional Council elects representatives to the international governing body.

17. What is the basis of representation in the governing body?
One representative for each 500 members or fraction thereof in a Regional Council.

18.1 How often are regular meetings of the governing body held?
Annually

18.2 When was the last regular meeting of the governing body held? 06/27/2020

18.3 When and where will the next regular or special meeting of the governing body be held?
Columbus, OH - Virtually - 06/19/2021

18.4 How many members of the governing body attended the last regular meeting? 154

18.5 How many of the same were delegates of the subordinate branches? 106

19. How are the expenses of the governing body defrayed?
Reimbursed out of the general funds of the Order as authorized by the President.

20. When and by whom are the officers and directors elected?
The President, Secretary/Treasurer and Directors are elected by the membership. The CEO is appointed by the board. The CEO is responsible for hiring the senior management team.

21. What are the qualifications for membership?
Any person with good moral character, not under sixteen years of age, with an interest in good citizenship and community service.

22. What are the limiting ages for admission?
Minimum age of sixteen.

23. What is the minimum and maximum insurance that may be issued on any one life?
Minimum \$1,500; Maximum \$250,000 or amounts higher with approval of reinsurer.

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

25. Are applicants admitted to membership without filing an application with and becoming a member of a local branch by ballot and initiation? Yes [] No [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 14.0 %
27.12 Subsequent Years 9.0 %

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? \$ 0

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? 0

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 [] No [X]

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

32.3 If yes, explain

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

34. Has any present or former officer, director, trustee, incorporator, or any other persons, or any firm, corporation, society or association, any claims of any nature whatsoever against this reporting entity, which is not included in the liabilities on Page 3 of this statement? Yes [] No [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)	25,113	26,705	28,602	31,956	34,543
2. Ordinary - term (Line 21, Col. 4, less Line 34, Col. 4)	12,337	12,797	12,764	13,564	13,526
3. Credit life (Line 21, Col. 6)	0	0	0	0	0
4. Group, excluding FEGLI/SGLI (Line 21, Col. 9 less Lines 43 & 44, Col. 4)	0	0	0	0	0
5. Industrial (Line 21, Col. 2)	0	0	0	0	0
6. FEGLI/SGLI (Lines 43 & 44, Col. 4)	0	0	0	0	0
7. Total (Line 21, Col. 10)	37,450	39,502	41,366	45,520	48,069
7.1 Total in force for which VM-20 deterministic/stochastic reserves are calculated	0	0	0	0	XXX
New Business Issued					
(Exhibit of Life Insurance)					
8. Ordinary - whole life and endowment (Line 34, Col. 2)	0	105	86	139	140
9. Ordinary - term (Line 2, Col. 4, less Line 34, Col. 2)	320	1,140	1,410	625	245
10. Credit life (Line 2, Col. 6)	0	0	0	0	0
11. Group (Line 2, Col. 9)	0	0	0	0	0
12. Industrial (Line 2, Col. 2)	0	0	0	0	0
13. Total (Line 2, Col. 10)	320	1,245	1,496	764	385
Premium Income - Lines of Business					
(Exhibit 1 - Part 1)					
14. Industrial life (Line 20.4, Col. 2)	0	0	0	0	0
15.1 Ordinary-life insurance (Line 20.4, Col. 3)	145,726	147,030	159,768	160,192	203,470
15.2 Ordinary-individual annuities (Line 20.4, Col. 4)	21,119	6,141	34,920	34,686	26,372
16. Credit life (group and individual) (Line 20.4, Col. 5)	0	0	0	0	0
17.1 Group life insurance (Line 20.4, Col. 6)	0	0	0	0	0
17.2 Group annuities (Line 20.4, Col. 7)	0	0	0	0	0
18.1 A & H-group (Line 20.4, Col. 8)	0	0	0	0	0
18.2 A & H-credit (group and individual) (Line 20.4, Col. 9)	0	0	0	0	0
18.3 A & H-other (Line 20.4, Col. 10)	12,349,584	12,255,533	12,474,335	12,063,379	11,609,367
19. Aggregate of all other lines of business (Line 20.4, Col. 11)	0	0	0	0	0
20. Total	12,516,429	12,408,704	12,669,023	12,258,258	11,839,209
Balance Sheet (Pages 2 & 3)					
21. Total admitted assets excluding Separate Accounts business (Page 2, Line 26, Col. 3)	14,324,020	14,062,904	15,434,879	16,758,974	16,890,516
22. Total liabilities excluding Separate Accounts business (Page 3, Line 26)	6,874,637	6,489,987	7,180,829	7,545,738	7,479,379
23. Aggregate life reserves (Page 3, Line 1)	2,883,019	2,638,811	2,580,815	3,162,397	3,077,721
23.1 Excess VM-20 deterministic/stochastic reserve over NPR related to Line 7.1	0	0	0	0	XXX
24. Aggregate A & H reserves (Page 3, Line 2)	965,842	915,262	961,866	1,059,781	1,087,814
25. Deposit-type contract funds (Page 3, Line 3)	13,421	17,568	21,704	4,151	7,417
26. Asset valuation reserve (Page 3, Line 24.01)	49,517	44,664	46,564	55,419	54,527
27. Capital (Page 3, Lines 29 and 30)	0	0	0	0	0
28. Surplus (Page 3, Line 37)	7,449,383	7,572,917	8,254,050	9,213,236	9,411,137
Cash Flow (Page 5)					
29. Net Cash from Operations (Line 11)	(270,884)	(1,508,877)	(817,250)	(284,877)	(1,488,812)
Risk-Based Capital Analysis					
30. Total adjusted capital	7,498,900	7,617,581	8,254,050	9,213,236	9,465,664
31. Authorized control level risk - based capital	500,571	515,064	627,830	619,646	646,068
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)	78.3	86.4	90.1	96.9	94.1
33. Stocks (Lines 2.1 and 2.2)	0.0	0.0	0.0	0.0	0.0
34. Mortgage loans on real estate (Lines 3.1 and 3.2)	0.0	0.0	0.0	0.0	0.0
35. Real estate (Lines 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)	16.9	8.4	4.8	(1.8)	1.1
37. Contract loans (Line 6)	4.8	5.3	5.1	4.9	4.8
38. Derivatives (Page 2, Line 7)	0.0	0.0	0.0	0.0	0.0
39. Other invested assets (Line 8)	0.0	0.0	0.0	0.0	0.0
40. Receivables for securities (Line 9)	0.0	0.0	0.0	0.0	0.0
41. Securities lending reinvested collateral assets (Line 10)	0.0	0.0	0.0	0.0	0.0
42. Aggregate write-ins for invested assets (Line 11)	0.0	0.0	0.0	0.0	0.0
43. Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2020	2 2019	3 2018	4 2017	5 2016
Investments in Parent, Subsidiaries and Affiliates					
44. Affiliated bonds (Schedule D Summary, Line 12, Col. 1)	0	0	0	0	0
45. Affiliated preferred stocks (Schedule D Summary, Line 18, Col. 1)	0	0	0	0	0
46. Affiliated common stocks (Schedule D Summary Line 24, Col. 1),	0	0	0	0	0
47. Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10)	0	0	0	0	0
48. Affiliated mortgage loans on real estate	0	0	0	0	0
49. All other affiliated	0	0	0	0	0
50. Total of above Lines 44 to 49	0	0	0	0	0
51. Total Investment in Parent included in Lines 44 to 49 above	0	0	0	0	0
Total Nonadmitted and Admitted Assets					
52. Total nonadmitted assets (Page 2, Line 28, Col. 2)	356,763	512,326	859,255	901,661	699,760
53. Total admitted assets (Page 2, Line 28, Col. 3)	14,324,020	14,062,904	15,434,879	16,758,974	16,890,516
Investment Data					
54. Net investment income (Exhibit of Net Investment Income)	318,816	395,549	456,788	497,276	459,377
55. Realized capital gains (losses) (Page 4, Line 34, Column 1)	233,604	97,821	236,041	18,361	16,329
56. Unrealized capital gains (losses) (Page 4, Line 38, Column 1)	0	0	0	0	0
57. Total of above Lines 54, 55 and 56	552,420	493,370	692,829	515,637	475,706
Benefits and Reserve Increases (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 and 8)	209,275	434,921	777,387	298,031	410,819
59. Total contract/certificate benefits - A & H (Lines 13 & 14, Col. 6)	7,440,679	8,139,500	8,115,953	7,451,263	7,649,599
60. Increase in life reserves - other than group and annuities (Line 19, Col. 2)	214,459	111,649	(604,407)	54,249	(59,653)
61. Increase in A & H reserves (Line 19, Col. 6)	50,581	(46,606)	(97,914)	(28,028)	(116,900)
62. Dividends to policyholders and refunds to members (Line 30, Col. 1)	0	0	0	0	0
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 100.0	46.6	48.6	53.8	48.5	45.7
64. Lapse percent (ordinary only) [(Exhibit of Life Insurance, Col. 4, Lines 14 & 15) / 1/2 (Exhibit of Life Insurance, Col. 4, Lines 1 & 21)] x 100.0	3.1	3.6	6.0	4.6	5.7
65. A & H loss percent (Schedule H, Part 1, Lines 5 and 6, Col. 2)	60.8	66.1	64.5	61.3	65.1
66. A & H cost containment percent (Schedule H, Pt. 1, Line 4, Col. 2)	0.0	0.0	0.0	0.0	0.0
67. A & H expense percent excluding cost containment expenses (Schedule H, Pt. 1, Line 10, Col. 2)	41.2	41.8	47.7	43.2	39.1
A & H Claim Reserve Adequacy					
68. Incurred losses on prior years' claims - group health (Schedule H, Part 3, Line 3.1 Col. 2)	0	0	0	0	0
69. Prior years' claim liability and reserve - group health (Schedule H, Part 3, Line 3.2 Col. 2)	0	0	0	0	0
70. Incurred losses on prior years' claims-health other than group (Schedule H, Part 3, Line 3.1 Col. 1 less Col. 2)	861,299	902,719	949,053	853,587	1,267,111
71. Prior years' claim liability and reserve-health other than group (Schedule H, Part 3, Line 3.2 Col. 1 less Col. 2)	1,002,245	1,013,523	1,157,770	1,172,798	1,460,227
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)	0	0	0	0	0
73. Ordinary - life (Page 6.1, Col. 1 less Cols. 2, 10 and 12)	(514,863)	(407,331)	(68,158)	(92,018)	(44,440)
74. Ordinary - individual annuities (Page 6, Col. 4)	(43,199)	(69,524)	8,490	(9,968)	52,082
75. Ordinary-supplementary contracts	XXX	XXX	0	0	0
76. Credit life (Page 6.1, Col. 10 plus Page 6.2, Col. 7)	0	0	0	0	0
77. Group life (Page 6.2, Col. 1 Less Cols. 7 and 9)	0	0	0	0	0
78. Group annuities (Page 6, Col. 5)	0	0	0	0	0
79. A & H-group (Page 6.5, Col. 3)	0	0	0	0	0
80. A & H-credit (Page 6.5, Col. 10)	0	0	0	0	0
81. A & H-other (Page 6.5, Col. 1 less Cols. 3 and 10)	(21,638)	(541,745)	(1,036,834)	(146,876)	11,168
82. Aggregate of all other lines of business (Page 6, Col. 8)	0	0	0	0	0
83. Fraternal (Page 6, Col. 7)	72,426	(183,966)	30,726	36,231	(126,928)
84. Total (Page 6, Col. 1)	(507,274)	(1,202,566)	(1,065,776)	(212,631)	(108,118)

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

Yes [] No []

If no, please explain:

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America

EXHIBIT OF LIFE INSURANCE

(\$000 Omitted for Amounts of Life Insurance)

	Industrial		Ordinary		Credit Life (Group and Individual)		Group		10 Total Amount of Insurance
	1	2	3	4	5 Number of Individual Policies and Group Certificates	6 Amount of Insurance	7 Policies	8 Certificates	
	Number of Policies	Amount of Insurance	Number of Policies	Amount of Insurance					
1. In force end of prior year .....	.0	0	2,764	.39,502	0	0	0	0	39,502
2. Issued during year	0	0	18	.320	0	0	0	0	320
3. Reinsurance assumed	0	0	0	0	0	0	0	0	0
4. Revived during year	0	0	21	.531	0	0	0	0	.531
5. Increased during year (net)	0	0	0	0	0	0	0	0	0
6. Subtotals, Lines 2 to 5	0	0	.39	.851	0	0	0	0	.851
7. Additions by dividends during year	XXX	0	XXX	0	XXX	0	XXX	0	0
8. Aggregate write-ins for increases	0	0	0	0	0	0	0	0	0
9. Totals (Lines 1 and 6 to 8)	0	0	2,803	.40,353	0	0	0	0	.40,353
Deductions during year:									
10. Death	0	0	150	.1,305	0	0	XXX	0	0
11. Maturity	0	0	7	.10	0	0	XXX	0	.10
12. Disability	0	0	0	0	0	0	XXX	0	0
13. Expiry	0	0	3	.8	0	0	0	0	8
14. Surrender	0	0	27	.310	0	0	0	0	.310
15. Lapse	0	0	30	.875	0	0	0	0	.875
16. Conversion	0	0	0	0	0	0	XXX	XXX	0
17. Decreased (net)	0	0	5	.395	0	0	0	0	.395
18. Reinsurance	0	0	0	0	0	0	0	0	0
19. Aggregate write-ins for decreases	0	0	0	0	0	0	0	0	0
20. Totals (Lines 10 to 19)	0	0	.222	.2,903	0	0	0	0	.2,903
21. In force end of year (b) (Line 9 minus Line 20)	0	0	2,581	.37,450	0	0	0	0	.37,450
22. Reinsurance ceded end of year	XXX	0	XXX	.27,834	XXX	0	XXX	XXX	.27,834
23. Line 21 minus Line 22	XXX	0	XXX	9,616	XXX	(a)	XXX	XXX	9,616
DETAILS OF WRITE-INS									
0801.									
0802.									
0803.									
0898. Summary of remaining write-ins for Line 8 from overflow page	0	0	0	0	0	0	0	0	0
0899. TOTALS (Lines 0801 thru 0803 plus 0898) (Line 8 above)	0	0	0	0	0	0	0	0	0
1901.									
1902.									
1903.									
1998. Summary of remaining write-ins for Line 19 from overflow page	0	0	0	0	0	0	0	0	0
1999. TOTALS (Lines 1901 thru 1903 plus 1998) (Line 19 above)	0	0	0	0	0	0	0	0	0

Life, Accident and Health Companies Only:

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

Fraternal Benefit Societies Only:

(b) Paid-up insurance included in the final totals of Line 21 (including additions to certificates) number of certificates1,017 , Amount \$5,132

Additional accidental death benefits included in life certificates were in amount \$0 , 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?

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	0	0	XXX	XXX
25. Other paid-up insurance	0	0	XXX	XXX
26. Debit ordinary insurance	0	0	XXX	XXX

NONE**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	0	0	103	1,212
28. Term policies - other	0	0	141	11,103
29. Other term insurance - decreasing	XXX	0	XXX	0
30. Other term insurance	XXX	0	XXX	0
31. Totals (Lines 27 to 30)	0	0	244	12,315
Reconciliation to Lines 2 and 21:				
32. Term additions	XXX	0	XXX	0
33. Totals, extended term insurance	XXX	XXX	2	22
34. Totals, whole life and endowment	0	0	2,335	25,113
35. Totals (Lines 31 to 34)	0	0	2,581	37,450

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	0	0	0	0
37. Ordinary	320	0	37,450	0
38. Credit Life (Group and Individual)	0	0	0	0
39. Group	0	0	0	0
40. Totals (Lines 36 to 39)	320	0	37,450	0

ADDITIONAL INFORMATION ON CREDIT LIFE AND GROUP INSURANCE

	Credit Life		Group	
	1 Number of Individuals Policies	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	XXX	XXX
42. Number in force end of year if the number under ceded group is multiplied on a pro-rata basis				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	165
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BASIS OF CALCULATION OF ORDINARY TERM INSURANCE

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

NONE**POLICIES WITH DISABILITY PROVISIONS**

Disability Provisions	Industrial		Ordinary		Credit		Group	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance	5 Number of Policies	6 Amount of Insurance	7 Number of Certificates	8 Amount of Insurance
48. Waiver of Premium	0	0	6	340	0	0	0	0
49. Disability Income	0	0	0	0	0	0	0	0
50. Extended Benefits	0	0	XXX	XXX	0	0	0	0
51. Other	0	0	0	0	0	0	0	0
52. Total	0	(a)	6	(a)	340	0	(a)	0

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
EXHIBIT OF NUMBER OF POLICIES, CONTRACTS, CERTIFICATES, INCOME PAYABLE AND ACCOUNT VALUES IN FORCE FOR SUPPLEMENTARY CONTRACTS, ANNUITIES, ACCIDENT & HEALTH AND OTHER POLICIES

SUPPLEMENTARY CONTRACTS

	Ordinary		Group	
	1 Involving Life Contingencies	2 Not Involving Life Contingencies	3 Involving Life Contingencies	4 Not Involving Life Contingencies
1. In force end of prior year	0	1	0	0
2. Issued during year	0	0	0	0
3. Reinsurance assumed	0	0	0	0
4. Increased during year (net)	0	0	0	0
5. Total (Lines 1 to 4)	0	1	0	0
Deductions during year:				
6. Decreased (net)	0	0	0	0
7. Reinsurance ceded	0	0	0	0
8. Totals (Lines 6 and 7)	0	0	0	0
9. In force end of year (line 5 minus line 8)	0	1	0	0
10. Amount on deposit	0	(a) 10,453	0	(a) 0
11. Income now payable	0	1	0	0
12. Amount of income payable	(a) 0	(a) 4,020	(a) 0	(a) 0

ANNUITIES

	Ordinary		Group	
	1 Immediate	2 Deferred	3 Contracts	4 Certificates
1. In force end of prior year	0	98	0	0
2. Issued during year	0	0	0	0
3. Reinsurance assumed	0	0	0	0
4. Increased during year (net)	0	0	0	0
5. Totals (Lines 1 to 4)	0	98	0	0
Deductions during year:				
6. Decreased (net)	0	7	0	0
7. Reinsurance ceded	0	0	0	0
8. Totals (Lines 6 and 7)	0	7	0	0
9. In force end of year (line 5 minus line 8)	0	91	0	0
Income now payable:				
10. Amount of income payable	(a) 0	XXX	XXX	(a) 0
Deferred fully paid:				
11. Account balance	XXX	(a) 2,720,077	XXX	(a) 0
Deferred not fully paid:				
12. Account balance	XXX	(a) 0	XXX	(a) 0

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	0	0	0	0	31,432	0
2. Issued during year	0	0	0	0	1,821	0
3. Reinsurance assumed	0	0	0	0	0	0
4. Increased during year (net)	0	XXX	0	XXX	0	XXX
5. Totals (Lines 1 to 4)	0	XXX	0	XXX	33,253	XXX
Deductions during year:						
6. Conversions	0	XXX	XXX	XXX	XXX	XXX
7. Decreased (net)	0	XXX	0	XXX	4,151	XXX
8. Reinsurance ceded	0	XXX	0	XXX	0	XXX
9. Totals (Lines 6 to 8)	0	XXX	0	XXX	4,151	XXX
10. In force end of year (line 5 minus line 9)	0	(a) 0	0	(a) 0	29,102	(a) 0

DEPOSIT FUNDS AND DIVIDEND ACCUMULATIONS

			1 Deposit Funds		2 Dividend Accumulations	
			Contracts	Contracts	Contracts	Contracts
1. In force end of prior year					0	11
2. Issued during year					0	0
3. Reinsurance assumed					0	0
4. Increased during year (net)					0	0
5. Totals (Lines 1 to 4)					0	11
Deductions During Year:						
6. Decreased (net)					0	2
7. Reinsurance ceded					0	0
8. Totals (Lines 6 and 7)					0	2
9. In force end of year (line 5 minus line 8)					0	9
10. Amount of account balance					(a) 0	2,968

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS ^(b)

Allocated by States and Territories

States, Etc.	1 Active Status (a)	Life Contracts			Direct Business Only		7 Deposit-Type Contracts
		2 Life Insurance Premiums	3 Annuity Considerations	4	5		
				Accident and Health Insurance Premiums, Including Policy, Membership and Other Fees	Other Considerations		
1. Alabama	AL	9,412	0	526,100	0	535,512	0
2. Alaska	AK	266	0	5,437	0	5,703	0
3. Arizona	AZ	4,574	0	1,154,184	0	1,158,758	0
4. Arkansas	AR	4,133	0	1,150,448	0	1,154,582	0
5. California	CA	35,288	0	193,153	0	228,441	0
6. Colorado	CO	598	10,500	1,936,620	0	1,947,718	0
7. Connecticut	CT	4,699	0	13,183	0	17,882	0
8. Delaware	DE	0	0	10,641	0	10,641	0
9. District of Columbia	DC	0	0	25	0	25	0
10. Florida	FL	45,835	0	1,950,410	0	1,996,245	0
11. Georgia	GA	23,747	0	330,158	0	353,905	0
12. Hawaii	HI	0	0	2,838	0	2,838	0
13. Idaho	ID	0	0	2,196,420	0	2,196,420	0
14. Illinois	IL	32,981	0	1,824,269	0	1,857,250	0
15. Indiana	IN	30,043	0	2,612,265	0	2,642,309	0
16. Iowa	IA	5,855	0	1,128,533	0	1,134,388	0
17. Kansas	KS	6,258	1,650	255,496	0	263,404	0
18. Kentucky	KY	17,367	0	99,521	0	116,888	0
19. Louisiana	LA	17,070	0	1,085,242	0	1,102,312	0
20. Maine	ME	0	0	7,129	0	7,129	0
21. Maryland	MD	2,195	0	35,167	0	37,362	0
22. Massachusetts	MA	2,248	0	48,146	0	50,394	0
23. Michigan	MI	62,902	0	1,017,374	0	1,080,276	0
24. Minnesota	MN	1,029	0	88,586	0	89,615	0
25. Mississippi	MS	24,092	0	2,602,899	0	2,626,991	0
26. Missouri	MO	12,635	0	571,778	0	584,413	0
27. Montana	MT	434	0	856,099	0	856,533	0
28. Nebraska	NE	11,867	0	3,857,595	0	3,869,462	0
29. Nevada	NV	1,943	0	317,438	0	319,380	0
30. New Hampshire	NH	1,048	0	13,497	0	14,545	0
31. New Jersey	NJ	10,057	0	11,745	0	21,802	0
32. New Mexico	NM	20	0	21,190	0	21,210	0
33. New York	NY	1,344	0	61,932	0	63,276	0
34. North Carolina	NC	21,385	0	1,020,452	0	1,041,837	0
35. North Dakota	ND	4,853	0	731,892	0	736,745	0
36. Ohio	OH	54,212	90	1,359,803	0	1,414,105	0
37. Oklahoma	OK	10,868	10,000	335,083	0	355,951	0
38. Oregon	OR	16,532	0	1,743,965	0	1,760,498	0
39. Pennsylvania	PA	28,360	250	604,888	0	633,498	0
40. Rhode Island	RI	1,690	0	5,074	0	6,764	0
41. South Carolina	SC	3,898	0	390,628	0	394,526	0
42. South Dakota	SD	5,854	0	344,530	0	350,384	0
43. Tennessee	TN	21,373	400	252,124	0	273,897	0
44. Texas	TX	49,924	0	1,015,128	0	1,065,052	0
45. Utah	UT	1,206	0	640,449	0	641,654	0
46. Vermont	VT	0	0	5,617	0	5,617	0
47. Virginia	VA	15,184	0	1,978,216	0	1,993,399	0
48. Washington	WA	0	0	102,202	0	102,202	0
49. West Virginia	WV	9,629	0	996,471	0	1,006,100	0
50. Wisconsin	WI	11,548	10,000	1,706,888	0	1,728,436	0
51. Wyoming	WY	589	0	950,613	0	951,202	0
52. American Samoa	AS	0	0	0	0	0	0
53. Guam	GU	0	0	0	0	0	0
54. Puerto Rico	PR	0	0	0	0	0	0
55. U.S. Virgin Islands	VI	0	0	0	0	0	0
56. Northern Mariana Islands	MP	0	0	0	0	0	0
57. Canada	CAN	0	0	598	0	598	0
58. Aggregate Other Alien	OT	0	0	0	0	0	0
59. Subtotal	XXX	627,044	32,890	40,170,141	0	40,830,075	0
90. Reporting entity contributions for employee benefits plans	XXX	0	0	0	0	0	0
91. Dividends or refunds applied to purchase paid-up additions and annuities	XXX	0	0	0	0	0	0
92. Dividends or refunds applied to shorten endowment or premium paying period	XXX	0	0	0	0	0	0
93. Premium or annuity considerations waived under disability or other contract provisions	XXX	0	0	0	0	0	0
94. Aggregate or other amounts not allocable by State	XXX	0	0	0	0	0	0
95. Totals (Direct Business)	XXX	627,044	32,890	40,170,141	0	40,830,075	0
96. Plus reinsurance assumed	XXX	0	0	0	0	0	0
97. Totals (All Business)	XXX	627,044	32,890	40,170,141	0	40,830,075	0
98. Less reinsurance ceded	XXX	480,020	11,771	27,850,048	0	28,341,839	0
99. Totals (All Business) less Reinsurance Ceded	XXX	147,024	21,119	12,320,093	0	12,488,236	0
DETAILS OF WRITE-INS							
58001.	XXX						
58002.	XXX						
58003.	XXX						
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX	0	0	0	0	0	0
9401.	XXX						
9402.	XXX						
9403.	XXX						
9498. Summary of remaining write-ins for Line 94 from overflow page	XXX	0	0	0	0	0	0
9499. Totals (Lines 9401 through 9403 plus 9498)(Line 94 above)	XXX	0	0	0	0	0	0

(a) Active Status Counts:

L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 47 R - Registered - Non-domiciled RRGs..... 0
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state..... 0 Q - Qualified - Qualified or accredited reinsurer..... 0
N - None of the above - Not allowed to write business in the state..... 10

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

State of Residence

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America

The Order of United Commercial Travelers of America

FEIN: 31-4273120
NAIC: 56383
Ohio

UCT Charities

FEIN: 31-1486573
Ohio

**UCT Insurance Oversight
Board LLC**

FEIN: 83-3057701
Ohio

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE The Order Of United Commercial Travelers Of America
OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Exhibit 2 Line 9.3

	Insurance			5 All Other Lines of Business	6 Investment	7 Fraternal			
	1 Life	Accident and Health							
		2 Cost Containment	3 All Other						
09.304. Agent Services	2,298	0	35,917	0	0	.0			
09.305. Product Development	45,000	0	30,000	0	0	0			
09.306. Temporary Workers	1,012	0	15,809	0	0	0			
09.307. Claims Outsourcing .....	.0	0	382,244	0	0	.382,244		
09.308. Records Storage	1,218	0	19,029	0	0	.401			
09.309. Benevolent Payments .....	.0	0	.0	0	0	.32,676		
09.310. UCT Foundation .....	.0	0	.0	0	0	.262		
09.311. Charitable Contributions .....	.9	0	141	0	0	0		
09.312. Lodge Supplies .....	.0	0	.0	0	0	2,835		
09.313. Canada Discontinuation	7,202	0	112,546	0	0	.0			
09.397. Summary of remaining write-ins for Line 9.3 from overflow page	56,739	0	595,686	0	0	36,174			
						688,599			