

Changes were made late in the statement preparation which erroneously grossed up both receivables and payables relative to inter-company accounts. Amendments are being filed to appropriately reflect the net balances due to/from parents and affiliates. Pages affected were 2, 3, 20 – 20.4 General Interrogatories (specifically question 23.2), 22 and 23. This correction has no impact on income, surplus or RBC.



ANNUAL STATEMENT

For the Year Ended December 31, 2020

of the Condition and Affairs of the

MOTORISTS LIFE INSURANCE COMPANY

NAIC Group Code.....0291, 0291
(Current Period) (Prior Period)

NAIC Company Code..... 66311

Employer's ID Number..... 31-0717055

Organized under the Laws of OH

State of Domicile or Port of Entry OH

Country of Domicile US

Licensed as Business Type:

Life, Accident & Health

Incorporated/Organized..... October 27, 1965

Commenced Business..... January 24, 1967

Statutory Home Office

471 East Broad Street .. Columbus .. OH .. US .. 43215
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office

471 East Broad Street .. Columbus .. OH .. US .. 43215
(Street and Number) (City or Town, State, Country and Zip Code)

614-225-8211

(Area Code) (Telephone Number)

Mail Address

471 East Broad Street .. Columbus .. OH .. US .. 43215
(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records

471 East Broad Street .. Columbus .. OH .. US .. 43215
(Street and Number) (City or Town, State, Country and Zip Code)

614-225-8211

(Area Code) (Telephone Number)

Internet Web Site Address

encova.com

Statutory Statement Contact

Amy E Kuhlman

614-225-8285

(Name)
accounting@encova.com
(E-Mail Address)

(Area Code) (Telephone Number) (Extension)

614-225-8330

(Fax Number)

OFFICERS

Name
1. Thomas Joseph Obrokta, Jr
3. James Christopher Howat

Title
Chief Executive Officer
Treasurer

Name
2. Marchelle Elaine Moore
4. Michael Joseph Agan

Title
Secretary
President

Gregory Arthur Burton

Executive Chair

OTHER

Michael Joseph Agan
Thomas Joseph Obrokta, Jr

Jeffrey Leigh Benintendi #
Matthew Carl Wilcox #

Grady Brendan Campbell #

James Christopher Howat #

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

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

(Signature)
Thomas Joseph Obrokta, Jr
1. (Printed Name)
Chief Executive Officer
(Title)

(Signature)
Marchelle Elaine Moore
2. (Printed Name)
Secretary
(Title)

(Signature)
James Christopher Howat
3. (Printed Name)
Treasurer
(Title)

Subscribed and sworn to before me
This 2nd day of March 2021

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

Yes [] No [X]

2

3/3/2021

6

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).....	524,811,142		524,811,142	510,794,765
2. Stocks (Schedule D):				
2.1 Preferred stocks.....			0	
2.2 Common stocks.....			0	
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens.....			0	
3.2 Other than first liens.....			0	
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....			0	
4.2 Properties held for the production of income (less \$.....0 encumbrances).....			0	
4.3 Properties held for sale (less \$.....0 encumbrances).....			0	
5. Cash (\$....951,716, Schedule E-Part 1), cash equivalents (\$....22,857,224, Schedule E-Part 2) and short-term investments (\$.....0, Schedule DA).....	23,808,940		23,808,940	28,803,683
6. Contract loans (including \$.....0 premium notes).....	17,127,080	168,708	16,958,372	16,952,536
7. Derivatives (Schedule DB).....			0	
8. Other invested assets (Schedule BA).....	28,155,726	286,894	27,868,833	9,000,000
9. Receivables for securities.....	.77,070		.77,070	.5,000
10. Securities lending reinvested collateral assets (Schedule DL).....			0	
11. Aggregate write-ins for invested assets.....	.0	.0	.0	.0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	593,979,959	455,602	593,524,357	565,555,983
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	.5,032,237		.5,032,237	.4,791,025
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	(352,519)	3,866	(356,385)	(548,088)
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....	18,533,106	437,150	18,095,956	17,464,091
15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0).....			0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....	1,313,254	342,618	970,636	1,171,297
16.2 Funds held by or deposited with reinsured companies.....			0	
16.3 Other amounts receivable under reinsurance contracts.....	.216,308		.216,308	.223,061
17. Amounts receivable relating to uninsured plans.....			0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0	.157,952
18.2 Net deferred tax asset.....	.6,287,411		.6,287,411	6,020,397
19. Guaranty funds receivable or on deposit.....	120,148		120,148	120,148
20. Electronic data processing equipment and software.....	1,526,322	1,526,322	0	
21. Furniture and equipment, including health care delivery assets (\$.....0).....	2,557	2,557	0	
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0	
23. Receivables from parent, subsidiaries and affiliates.....	.77,850		.77,850	.416,686
24. Health care (\$.....0) and other amounts receivable.....	.396,953	.393,392	.3,561	
25. Aggregate write-ins for other-than-invested assets.....	.118,432	.0	.118,432	.134,481
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	627,252,017	3,161,506	624,090,511	595,507,034
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. TOTAL (Lines 26 and 27).....	627,252,017	3,161,506	624,090,511	595,507,034

DETAILS OF WRITE-INS

1101.			0	
1102.			0	
1103.			0	
1198. Summary of remaining write-ins for Line 11 from overflow page.....	.0	.0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....	.0	.0	0	0
2501. MISCELLANEOUS RECEIVABLE.....	118,432		118,432	134,481
2502.			0	
2503.			0	
2598. Summary of remaining write-ins for Line 25 from overflow page.....	.0	.0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	118,432	.0	.118,432	.134,481

MOTORISTS LIFE INSURANCE COMPANY
LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Aggregate reserve for life contracts \$....504,360,125 (Exhibit 5, Line 9999999) less \$.....0 included in Line 6.3 (including \$.....0 Modco Reserve).....	504,360,125	500,732,497
2. Aggregate reserve for accident and health contracts (including \$.....0 Modco Reserve).....	734,990	768,699
3. Liability for deposit-type contracts (Exhibit 7, Line 14, Col. 1) (including \$.....0 Modco Reserve).....	.....	.....
4. Contract claims:		
4.1 Life (Exhibit 8, Part 1, Line 4.4, Col. 1 less sum of Cols. 9, 10 and 11).....	4,670,551	3,724,047
4.2 Accident and health (Exhibit 8, Part 1, Line 4.4, sum of Cols. 9, 10 and 11).....	.....	.....
5. Policyholders' dividends/refunds to members \$.....0 and coupons \$.....0 due and unpaid (Exhibit 4, Line 10).....	.....	.....
6. Provision for policyholders' dividends, refunds to members and coupons payable in following calendar year - estimated amounts:		
6.1 Policyholders' dividends and refunds to members apportioned for payment (including \$.....0 Modco).....	1,206,204	1,417,637
6.2 Policyholders' dividends and refunds to members not yet apportioned (including \$.....0 Modco).....	.....	.....
6.3 Coupons and similar benefits (including \$.....0 Modco).....	.....	.....
7. Amount provisionally held for deferred dividend policies not included in Line 6.....	.....	.....
8. Premiums and annuity considerations for life and accident and health contracts received in advance less \$.....0 discount; including \$.....0 accident and health premiums (Exhibit 1, Part 1, Col. 1, sum of Lines 4 and 14).....	143,759	145,688
9. Contract liabilities not included elsewhere:		
9.1 Surrender values on canceled contracts.....	.....	.....
9.2 Provision for experience rating refunds, including the liability of \$.....0 accident and health experience rating refunds of which \$.....0 is for medical loss ratio rebate per the Public Health Service Act.....	.....	.....
9.3 Other amounts payable on reinsurance, including \$.....0 assumed and \$.....0 ceded.....	.....	.....
9.4 Interest Maintenance Reserve (IMR, Line 6).....	4,894,024	4,214,884
10. Commissions to agents due or accrued - life and annuity contracts \$....604,621, accident and health \$.....0 and deposit-type contract funds \$.....0.....	604,621	771,648
11. Commissions and expense allowances payable on reinsurance assumed.....	.....	.....
12. General expenses due or accrued (Exhibit 2, Line 12, Col. 7).....	1,771,059	1,302,181
13. Transfers to Separate Accounts due or accrued (net) (including \$.....0 accrued for expense allowances recognized in reserves, net of reinsured allowances).....	.....	.....
14. Taxes, licenses and fees due or accrued, excluding federal income taxes (Exhibit 3, Line 9, Col. 6).....	234,939	461,378
15.1 Current federal and foreign income taxes, including \$....(9,168) on realized capital gains (losses).....	373,381	.....
15.2 Net deferred tax liability.....	.....	.....
16. Unearned investment income.....	.....	.....
17. Amounts withheld or retained by reporting entity as agent or trustee.....	236,509	296,357
18. Amounts held for agents' account, including \$.....0 agents' credit balances.....	.....	.....
19. Remittances and items not allocated.....	2,024,613	1,883,252
20. Net adjustment in assets and liabilities due to foreign exchange rates.....	.....	.....
21. Liability for benefits for employees and agents if not included above.....	.....	.....
22. Borrowed money \$.....0 and interest thereon \$.....0.....	.....	.....
23. Dividends to stockholders declared and unpaid.....	.....	.....
24. Miscellaneous liabilities:		
24.01 Asset valuation reserve (AVR Line 16, Col. 7).....	3,376,338	2,634,873
24.02 Reinsurance in unauthorized and certified (\$.....0) companies.....	.....	.....
24.03 Funds held under reinsurance treaties with unauthorized and certified (\$.....0) reinsurers.....	.....	.....
24.04 Payable to parent, subsidiaries and affiliates.....	17,179,415	941,687
24.05 Drafts outstanding.....	.....	.....
24.06 Liability for amounts held under uninsured plans.....	.....	.....
24.07 Funds held under coinsurance.....	.....	.....
24.08 Derivatives.....	.....	.....
24.09 Payable for securities.....	5,109,043	2,489,600
24.10 Payable for securities lending.....	.....	.....
24.11 Capital notes \$.....0 and interest thereon \$.....0.....	.....	.....
25. Aggregate write-ins for liabilities.....	709,934	381,228
26. Total liabilities excluding Separate Accounts business (Lines 1 to 25).....	547,629,503	522,165,656
27. From Separate Accounts Statement.....	.....	.....
28. Total liabilities (Line 26 and 27).....	547,629,503	522,165,656
29. Common capital stock.....	1,200,000	1,200,000
30. Preferred capital stock.....	.....	0
31. Aggregate write-ins for other-than-special surplus funds.....	0	0
32. Surplus notes.....	.....	.....
33. Gross paid in and contributed surplus (Page 3, Line 33, Col. 2 plus Page 4, Line 51.1, Col. 1).....	23,018,060	23,018,060
34. Aggregate write-ins for special surplus funds.....	0	0
35. Unassigned funds (surplus).....	52,242,947	49,123,318
36. Less treasury stock, at cost:		
36.1 ....0.000 shares common (value included in Line 29 \$.....0).....	.....	.....
36.2 ....0.000 shares preferred (value included in Line 30 \$.....0).....	.....	.....
37. Surplus (Total Lines 31 + 32 + 33 + 34 + 35 - 36) (including \$.....0 in Separate Accounts Statement).....	75,261,007	72,141,378
38. Totals of Lines 29, 30 and 37 (Page 4, Line 55).....	76,461,007	73,341,378
39. Totals of Lines 28 and 38 (Page 2, Line 28, Col. 3).....	624,090,511	595,507,034

DETAILS OF WRITE-INS

2501. INTEREST DUE ON DEATH CLAIMS.....	305,158	273,917
2502. MISCELLANEOUS LIABILITIES.....	404,776	107,311
2503. .....	.....	.....
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	709,934	381,228
3101. .....	.....	.....
3102. .....	.....	.....
3103. .....	.....	.....
3198. Summary of remaining write-ins for Line 31 from overflow page.....	0	0
3199. Totals (Lines 3101 through 3103 plus 3198) (Line 31 above).....	0	0
3401. .....	.....	.....
3402. .....	.....	.....
3403. .....	.....	.....
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0

MOTORISTS LIFE INSURANCE COMPANY

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 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). 06/02/2020
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 [] N/A [X]

4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.11 sales of new business? Yes [] No [X]
4.12 renewals? Yes [] No [X]

4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.21 sales of new business? Yes [] No [X]
4.22 renewals? Yes [] No [X]

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

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

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

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

7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes [] No [X]
7.2 If yes,
7.21 State the percentage of foreign control _____ %
7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).

1 Nationality	2 Type of Entity

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

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

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

9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
KPMG LLP, 191 W. NATIONWIDE BLVD SUITE 500 COLUMBUS, OH 43215

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

10.3 Has the insurer been granted any exemptions related to other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation? Yes [] No [X]
10.4 If the response to 10.3 is yes, provide information related to this exemption:

PART 1 - COMMON INTERROGATORIES

10.5	Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws?	Yes [X]	No []	N/A []	
10.6	If the response to 10.5 is no or n/a, please explain:				
11.	What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification? <u>JASON B. ADAMSON, CORPORATE ACTUARY</u>				
12.1	Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?	Yes []	No [X]		
12.11	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 []		
13.3	Have there been any changes made to any of the trust indentures during the year?	Yes []	No []		
13.4	If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?	Yes []	No []	N/A []	
14.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?	Yes [X]	No []		
14.11	If the response to 14.1 is no, please explain:				
14.2	Has the code of ethics for senior managers been amended?	Yes []	No [X]		
14.21	If the response to 14.2 is yes, provide information related to amendment(s).				
14.3	Have any provisions of the code of ethics been waived for any of the specified officers?	Yes []	No [X]		
14.31	If the response to 14.3 is yes, provide the nature of any waiver(s).				
15.1	Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List?	Yes []	No [X]		
15.2	If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.				
	1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount	
			\$	0	
BOARD OF DIRECTORS					
16.	Is the purchase or sale of all investments of the reporting entity passed upon either by the Board of Directors or a subordinator committee thereof?	Yes [X]	No []		
17.	Does the reporting entity keep a complete permanent record of the proceedings of its Board of Directors and all subordinate committees thereof?	Yes [X]	No []		
18.	Has the reporting entity an established procedure for disclosure to its Board of Directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person?	Yes [X]	No []		
FINANCIAL					
19.	Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)?	Yes []	No [X]		
20.1	Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):				
20.11	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 <i>Annual Statement Instructions</i> 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 [X]	No []		

MOTORISTS LIFE INSURANCE COMPANY

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$ 77,850

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 []

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 []

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

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 []

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

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

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

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

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

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

25.21 Subject to repurchase agreements \$ 0

25.22 Subject to reverse repurchase agreements \$ 0

25.23 Subject to dollar repurchase agreements \$ 0

25.24 Subject to reverse dollar repurchase agreements \$ 0

25.25 Placed under option agreements \$ 0

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

25.27 FHLB Capital Stock \$ 0

25.28 On deposit with states \$ 2,513,945

25.29 On deposit with other regulatory bodies \$ 0

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

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

25.32 Other \$ 0

25.3 For category (25.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
		\$ <u></u>

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

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

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

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

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

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

26.42 Permitted accounting practice Yes [] No []

26.43 Other accounting guidance Yes [] No []

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

• The reporting entity has obtained explicit approval from the domiciliary state. Yes [] No []

• Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21. Yes [] No []

• Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guidance Conditional Tail Expectation Amount. Yes [] No []

• Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts. Yes [] No []

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 []

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 []

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
BNY Mellon	500 Grant Street One Mellon Center, Suite #1035, Pittsburgh, PA 15258

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	2	3

GENERAL INTERROGATORIES**PART 1 - COMMON INTERROGATORIES**

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

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

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

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

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

1 Name of Firm or Individual	2 Affiliation
Conning Asset Management Co.	U
New England Asset Management, Inc.	U
Voya Investment 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
107423	Conning Asset Management Co.	2549003I2299B6776G77	SEC	No
105900	New England Asset Management, Inc.	KUR85E5PS4GQFZTFC130	SEC	No
2882	Voya Investment Management LLC	MZJU01BGQ7J1KULQSB89	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		\$

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

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

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

		1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1	Bonds	\$ 530,361,101	\$ 611,406,680	\$ 81,045,579
30.2	Preferred Stocks	\$ 0	\$ 0	\$ 0
30.3	Totals	\$ 530,361,101	\$ 611,406,680	\$ 81,045,579

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

FAIR MARKET VALUES ARE OBTAINED USING AN EXTERNAL PRICING SERVICE, BNY MELLON; OR USING AN EXTERNAL INVESTMENT SERVICE, S&P.

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

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

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

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

32.2 If no, list exceptions:

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

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

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

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

- a. The security was purchased prior to January 1, 2018.
- b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.

MOTORISTS LIFE INSURANCE COMPANY

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

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

Has the reporting entity self-designated PLGI securities?

Yes [] No [X]

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

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

OTHER

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

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
	\$ _____

38.1 Amount of payments for legal expenses, if any? \$ _____ 30,351

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
DAVIS & HARMAN LLP	\$ 27,222

39.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? \$ _____ 10,828

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
American Council of Life Insurers	\$ 10,828

MOTORISTS LIFE INSURANCE COMPANY
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).....	1,562,189	1,560,530	1,561,645	1,550,342	1,537,607
2. Ordinary - term (Line 21, Col. 4, less Line 34, Col. 4).....	4,969,929	5,000,931	4,969,920	4,896,420	4,771,250
3. Credit life (Line 21, Col. 6).....					
4. Group, excluding FEGLI/SGLI (Line 21, Col. 9 less Lines 43 & 44, Col. 4).....	282,411	276,598	281,159	163,520	186,200
5. Industrial (Line 21, Col. 2).....					
6. FEGLI/SGLI (Lines 43 & 44, Col. 4).....					
7. Total (Line 21, Col. 10).....	6,814,530	6,838,059	6,812,725	6,610,282	6,495,057
7.1 Total in force for which VM-20 deterministic/stochastic reserves are calculated.....					XXX.....
New Business Issued (Exhibit of Life Insurance)					
8. Ordinary - whole life and endowment (Line 34, Col. 2).....	65,615	83,946	93,016	89,556	108,321
9. Ordinary - term (Line 2, Col. 4, less Line 34, Col. 2).....	281,936	344,091	355,820	374,217	270,554
10. Credit life (Line 2, Col. 6).....					
11. Group (Line 2, Col. 9).....					
12. Industrial (Line 2, Col. 2).....					
13. Total (Line 2, Col. 10).....	347,551	428,037	448,836	463,773	378,875
Premium Income - Lines of Business (Exhibit 1-Part 1)					
14. Industrial life (Line 20.4, Col. 2).....					
15.1 Ordinary life insurance (Line 20.4, Col. 3).....	35,509,505	37,891,740	38,596,141	39,218,371	42,882,773
15.2 Ordinary individual annuities (Line 20.4, Col. 4).....	7,053,501	5,548,761	115,091,404	(2,938,795)	9,776,302
16. Credit life (group and individual) (Line 20.4, Col. 5).....					
17.1 Group life insurance (Line 20.4, Col. 6).....	163,882	416,965	566,692	376,926	401,318
17.2 Group annuities (Line 20.4, Col. 7).....					
18.1 A&H - group (Line 20.4, Col. 8).....					
18.2 A&H - credit (group and individual) (Line 20.4, Col. 9).....					
18.3 A&H - other (Line 20.4, Col. 10).....					
19. Aggregate of all other lines of business (Line 20.4, Col. 11).....					
20. Total.....	42,726,887	43,857,466	154,254,237	36,656,502	53,060,393
Balance Sheet (Pages 2 and 3)					
21. Total admitted assets excluding Separate Accounts business (Page 2, Line 26, Col. 3).....	624,090,511	595,507,034	590,380,534	471,688,136	467,352,042
22. Total liabilities excluding Separate Accounts business (Page 3, Line 26).....	547,629,503	522,165,656	521,929,908	403,070,698	405,151,371
23. Aggregate life reserves (Page 3, Line 1).....	504,360,125	500,732,497	501,876,426	382,355,842	383,184,396
23.1 Excess VM-20 deterministic/stochastic reserve over NPR related to Line 7.1.....					XXX.....
24. Aggregate A&H reserves (Page 3, Line 2).....					
25. Deposit-type contract funds (Page 3, Line 3).....	734,990	768,699	760,664	946,412	1,095,574
26. Asset valuation reserve (Page 3, Line 24.01).....	3,376,338	2,634,873	4,041,056	5,342,036	5,239,298
27. Capital (Page 3, Lines 29 & 30).....	1,200,000	1,200,000	1,200,000	1,200,000	1,200,000
28. Surplus (Page 3, Line 37).....	75,261,007	72,141,378	67,250,625	67,417,438	61,000,671
Cash Flow (Page 5)					
29. Net cash from operations (Line 11).....	6,723,431	(204,266)	125,002,855	4,033,715	21,220,359
Risk-Based Capital Analysis					
30. Total adjusted capital.....	80,440,446	76,685,069	73,157,977	74,582,804	68,022,593
31. Authorized control level risk-based capital.....	6,552,025	7,543,560	9,247,332	5,234,344	5,446,822
Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Line No. /Page 2, Line 12, Col. 3) x 100.0					
32. Bonds (Line 1).....	88.4	90.3	91.5	86.6	91.7
33. Stocks (Lines 2.1 and 2.2).....			2.6	3.6	3.0
34. Mortgage loans on real estate (Lines 3.1 and 3.2).....					
35. Real estate (Line 4.1, 4.2 and 4.3).....					
36. Cash, cash equivalents and short-term investments (Line 5).....	4.0	5.1	3.0	6.2	1.8
37. Contract loans (Line 6).....	2.9	3.0	2.9	3.6	3.4
38. Derivatives (Line 7).....					
39. Other invested assets (Line 8).....	4.7	1.6			
40. Receivables for securities (Line 9).....	0.0	0.0	0.0	0.0	0.0
41. Securities lending reinvested collateral assets (Line 10).....					
42. Aggregate write-ins for invested assets (Line 11).....					
43. Cash, cash equivalents and invested assets (Line 12).....	100.0	100.0	100.0	100.0	100.0

MOTORISTS LIFE INSURANCE COMPANY
FIVE-YEAR HISTORICAL DATA

(continued)

	1 2020	2 2019	3 2018	4 2017	5 2016
Investments in Parent, Subsidiaries and Affiliates					
44. Affiliated bonds (Sch. D Summary, Line 12, Col. 1).....	.....	.....	.....	.....	.....
45. Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1).....	.....	.....	.....	.....	.....
46. Affiliated common stocks (Sch. D Summary, Line 24, Col. 1).....	.....	.....	.....	.....	.....
47. Affiliated short-term investments (subtotal included in Sch. DA, Verif., Col. 5, Line 10).....	.....	.....	.....	.....	.....
48. Affiliated mortgage loans on real estate .....	.....	.....	.....	.....	.....
49. All other affiliated.....	286,894	305,751	306,334	176,594	150,791
50. Total of above Lines 44 to 49.....	286,894	305,751	306,334	176,594	150,791
51. Total investment in parent included in Lines 44 to 49 above.....	.....	.....	.....	.....	.....
Total Nonadmitted and Admitted Assets					
52. Total nonadmitted assets (Page 2, Line 28, Col. 2).....	3,161,506	4,025,425	3,578,094	1,915,415	1,930,704
53. Total admitted assets (Page 2, Line 28, Col. 3).....	624,090,511	595,507,034	590,380,534	471,688,136	467,352,042
Investment Data					
54. Net investment income (Exhibit of Net Investment Income).....	22,502,121	23,441,638	19,884,623	22,256,862	18,044,562
55. Realized capital gains (losses) (Page 4, Line 34, Column 1).....	(20,536)	6,007,226	375,218	65,148	863,338
56. Unrealized capital gains (losses) (Page 4, Line 38, Column 1).....	387,925	(4,236,944)	(1,370,186)	2,329,492	90,358
57. Total of above Lines 54, 55 and 56.....	22,869,510	25,211,920	18,889,654	24,651,502	18,998,258
Benefits and Reserve Increase (Page 6)					
58. Total contract/certificate benefits - life (Lines 10, 11, 12, 13, 14 and 15, Col. 1 minus Lines 10, 11, 12, 13, 14 and 15, Cols. 6, 7 & 8).....	46,316,607	52,772,316	38,403,256	44,770,101	33,519,963
59. Total contract/certificate benefits - A&H (Lines 13 & 14, Col. 6).....	.....	.....	.....	.....	.....
60. Increase in life reserves - other than group and annuities (Line 19, Col. 2).....	9,806,772	11,216,983	12,367,036	13,770,554	16,622,394
61. Increase in A&H reserves (Line 19, Col. 6).....	.....	.....	.....	.....	.....
62. Dividends to policyholders and refunds to members (Line 30, Col 1).....	1,184,073	1,395,623	1,314,340	1,236,586	1,152,779
Operating Percentages					
63. Insurance expense percent (Page 6, Col. 1, Lines 21, 22, & 23 less Line (6) / (Page 6, Col. 1, Line 1 plus Exhibit 7, Col. 2, Line 2) x 100.00).....	26.9	27.1	4.8	27.2	26.6
64. Lapse percent (ordinary only) [(Exhibit of Life Insurance, Col. 4, Lines 14 & 15) / 1/2 (Exhibit of Life Insurance, Col. 4, Lines 1 & 21)] x 100.00.....	5.8	6.0	5.5	4.9	5.4
65. A&H loss percent (Schedule H, Part 1, Lines 5 & 6, Col. 2).....	.....	.....	.....	.....	.....
66. A&H cost containment percent (Schedule H, Part 1, Line 4, Col. 2).....	.....	.....	.....	.....	.....
67. A&H expense percent excluding cost containment expenses (Schedule H, Part 1, Line 10, Col. 2).....	.....	.....	.....	.....	.....
A&H Claim Reserve Adequacy					
68. Incurred losses on prior years' claims - group health (Sch. H, Part 3, Line 3.1, Col. 2).....	.....	.....	.....	.....	.....
69. Prior years' claim liability and reserve - group health (Sch. H, Part 3, Line 3.2, Col. 2).....	.....	.....	.....	.....	.....
70. Incurred losses on prior years' claims - health other than group (Sch. H, Part 3, Line 3.1, Col. 1 less Col. 2).....	.....	.....	.....	.....	.....
71. Prior years' claim liability and reserve - health other than group (Sch. H, Part 3, Line 3.2, Col. 1 less Col. 2).....	.....	.....	.....	.....	.....
Net Gains From Operations After Dividends to Policyholders/Members' Refunds and Federal Income Taxes by Lines of Business (Page 6.x, Line 33)					
72. Industrial life (Page 6.1, Col. 2).....	.....	.....	.....	.....	.....
73. Ordinary - life (Page 6.1, Col. 1 less Cols. 2, 10 and 12).....	1,060,081	53,674	2,449,989	1,112,103	(2,150,649)
74. Ordinary - individual annuities (Page 6, Col. 4).....	1,225,133	1,395,019	1,983,776	1,704,638	(369,656)
75. Ordinary - supplementary contracts.....	XXX	XXX	373,762	78,822	35,886
76. Credit life (Page 6.1, Col. 10 plus Page 6.2, Col. 7).....	.....	.....	.....	.....	.....
77. Group life (Page 6.2, Col. 1 less Col. 7 less Col. 9).....	90,151	286,210	419,778	280,088	440,632
78. Group annuities (Page 6, Col. 5).....	.....	.....	.....	.....	.....
79. A&H - group (Page 6.5, Col. 3).....	.....	.....	.....	.....	.....
80. A&H - credit (Page 6.5, Col. 10).....	.....	.....	.....	.....	.....
81. A&H - other (Page 6.5, Col. 1 less Cols. 3 and 10).....	.....	.....	.....	.....	.....
82. Aggregate of all other lines of business (Page 6, Col. 8).....	.....	.....	.....	.....	.....
83. Fraternal (Page 6, Col. 7).....	.....	.....	.....	.....	.....
84. Total (Page 6, Col. 1).....	2,375,365	1,734,903	5,227,305	3,175,651	(2,043,787)

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: