



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

Family Heritage Life Insurance Company of America

NAIC Group Code02900290NAIC Company Code77968Employer's ID Number34-1626521
(Current)(Prior)

Organized under the Laws ofOHIO, State of Domicile or Port of EntryOH

Country of DomicileUnited States of America

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

Incorporated/Organized08/22/1989Commenced Business11/17/1989

Statutory Home Office6001 East Royalton Road, Suite 200Cleveland, OH, US 44147-3529
(Street and Number)(City or Town, State, Country and Zip Code)

Main Administrative Office6001 East Royalton Road, Suite 200Cleveland, OH, US 44147-3529440-922-5200
(Street and Number)(City or Town, State, Country and Zip Code)(Area Code) (Telephone Number)

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

Primary Location of Books and Records3700 South Stonebridge DriveMcKinney, TX, US 75070-8080469-617-4407
(Street and Number)(City or Town, State, Country and Zip Code)(Area Code) (Telephone Number)

Internet Website Addresswww.FamilyHeritageLife.com

Statutory Statement ContactBrett Turner469-617-4407
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OFFICERS

PresidentJames Eric "Bo" McPartland

SecretaryJoel Patrick Scarborough

TreasurerMichael Shane Henrie

Appointed ActuaryBarbara Sue Emig

OTHER

David Kendall Carlson, Divisional Senior Vice President

David Robert Cochrane, Divisional Senior Vice President

Seamus Fitzpatrick, Division Senior Vice President

Tony Michael Martella, Division Senior Vice President

Jeffrey Scott Morris, Divisional Senior Vice President

William Michael Pressley, Divisonal Vice President

DIRECTORS OR TRUSTEES

James Eric "Bo" McPartland

Michael Shane Henrie

Joel Patrick Scarborough

Thomas Peter Kalmbach

Jeffrey Scott Morris

Maria Rose Burnett

State ofTexas

County ofCollin

SS:

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.

James Eric "Bo" McPartland
President

Michael Shane Henrie
Treasurer

Joel Patrick Scarborough
Secretary

Subscribed and sworn to before me this
24th day of February, 2021

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

Yes [X] No []

Michelle Batiste
Notary Public
January 12, 2024

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D)	1,281,666,537		1,281,666,537	1,189,940,040
2. Stocks (Schedule D):				
2.1 Preferred stocks			0	0
2.2 Common stocks			0	0
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens	15,958,231		15,958,231	13,147,492
3.2 Other than first liens			0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ encumbrances)			0	0
4.2 Properties held for the production of income (less \$ encumbrances)			0	0
4.3 Properties held for sale (less \$ encumbrances)			0	0
5. Cash (\$(9,798,815) , Schedule E - Part 1), cash equivalents (\$17,622,743 , Schedule E - Part 2) and short-term investments (\$, Schedule DA)	7,823,928		7,823,928	(3,952,893)
6. Contract loans (including \$ premium notes)	176,107		176,107	153,899
7. Derivatives (Schedule DB)			0	0
8. Other invested assets (Schedule BA)	71,543,928		71,543,928	47,134,340
9. Receivables for securities			0	0
10. Securities lending reinvested collateral assets (Schedule DL)			0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	1,377,168,731	0	1,377,168,731	1,246,422,878
13. Title plants less \$ charged off (for Title insurers only)			0	0
14. Investment income due and accrued	13,392,891		13,392,891	12,788,045
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	10,227,252		10,227,252	9,128,086
15.2 Deferred premiums and agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)	1,148,998		1,148,998	1,237,894
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$)			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers			0	0
16.2 Funds held by or deposited with reinsured companies			0	0
16.3 Other amounts receivable under reinsurance contracts			0	0
17. Amounts receivable relating to uninsured plans			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon			0	2,087,652
18.2 Net deferred tax asset	48,636,000	31,002,000	17,634,000	14,264,000
19. Guaranty funds receivable or on deposit	770,256		770,256	952,696
20. Electronic data processing equipment and software	3,713,440	3,266,330	447,110	377,484
21. Furniture and equipment, including health care delivery assets (\$)	22,014	22,014	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23. Receivables from parent, subsidiaries and affiliates	15,000,000		15,000,000	50,434
24. Health care (\$) and other amounts receivable			0	0
25. Aggregate write-ins for other than invested assets	15,808,194	15,808,194	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	1,485,887,776	50,098,538	1,435,789,238	1,287,309,169
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28. Total (Lines 26 and 27)	1,485,887,776	50,098,538	1,435,789,238	1,287,309,169
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. Agent Balances	14,573,559	14,573,559	0	0
2502. Prepaid Expenses	1,194,138	1,194,138	0	0
2503. Other Assets Nonadmitted	40,497	40,497	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	15,808,194	15,808,194	0	0

LIABILITIES, SURPLUS AND OTHER FUNDS

	1	2
	Current Year	Prior Year
1. Aggregate reserve for life contracts \$12,003,643 (Exh. 5, Line 9999999) less \$ included in Line 6.3 (including \$ Modco Reserve)	12,003,643	10,159,373
2. Aggregate reserve for accident and health contracts (including \$ 0 Modco Reserve)	1,235,511,279	1,121,544,599
3. Liability for deposit-type contracts (Exhibit 7, Line 14, Col. 1) (including \$ Modco Reserve)		
4. Contract claims:		
4.1 Life (Exhibit 8, Part 1, Line 4.4, Col. 1 less sum of Cols. 9, 10 and 11)	1,648,000	1,704,000
4.2 Accident and health (Exhibit 8, Part 1, Line 4.4, sum of Cols. 9, 10 and 11)	26,464,281	25,764,888
5. Policyholders' dividends/refunds to members \$ and coupons \$ due and unpaid (Exhibit 4, Line 10)	0	0
6. Provision for policyholders' dividends, refunds to members and coupons payable in following calendar year - estimated amounts:		
6.1 Policyholders' dividends and refunds to members apportioned for payment (including \$ Modco)		
6.2 Policyholders' dividends and refunds to members not yet apportioned (including \$ Modco)		
6.3 Coupons and similar benefits (including \$ Modco)		
7. Amount provisionally held for deferred dividend policies not included in Line 6		
8. Premiums and annuity considerations for life and accident and health contracts received in advance less \$ discount; including \$0 accident and health premiums (Exhibit 1, Part 1, Col. 1, sum of lines 4 and 14)	0	0
9. Contract liabilities not included elsewhere:		
9.1 Surrender values on canceled contracts		
9.2 Provision for experience rating refunds, including the liability of \$ accident and health experience rating refunds of which \$ 0 is for medical loss ratio rebate per the Public Health Service Act		
9.3 Other amounts payable on reinsurance, including \$ assumed and \$147,880 ceded	147,880	163,026
9.4 Interest maintenance reserve (IMR, Line 6)	1,874,269	1,497,774
10. Commissions to agents due or accrued-life and annuity contracts \$30,761 accident and health \$2,342,836 and deposit-type contract funds \$	2,373,597	2,171,246
11. Commissions and expense allowances payable on reinsurance assumed		
12. General expenses due or accrued (Exhibit 2, Line 12, Col. 7)	4,330,173	2,494,247
13. Transfers to Separate Accounts due or accrued (net) (including \$ accrued for expense allowances recognized in reserves, net of reinsured allowances)		
14. Taxes, licenses and fees due or accrued, excluding federal income taxes (Exhibit 3, Line 9, Col. 6)	1,147,490	1,142,498
15.1 Current federal and foreign income taxes, including \$ on realized capital gains (losses)	836,508	
15.2 Net deferred tax liability		
16. Unearned investment income		
17. Amounts withheld or retained by reporting entity as agent or trustee	835	630
18. Amounts held for agents' account, including \$ agents' credit balances		
19. Remittances and items not allocated	523,127	472,050
20. Net adjustment in assets and liabilities due to foreign exchange rates		
21. Liability for benefits for employees and agents if not included above	994,338	621,257
22. Borrowed money \$ and interest thereon \$		70,000
23. Dividends to stockholders declared and unpaid		
24. Miscellaneous liabilities:		
24.01 Asset valuation reserve (AVR, Line 16, Col. 7)	9,942,930	8,310,792
24.02 Reinsurance in unauthorized and certified (\$0) companies	0	0
24.03 Funds held under reinsurance treaties with unauthorized and certified (\$) reinsurers		
24.04 Payable to parent, subsidiaries and affiliates		
24.05 Drafts outstanding		
24.06 Liability for amounts held under uninsured plans		
24.07 Funds held under coinsurance		
24.08 Derivatives	0	0
24.09 Payable for securities	354,732	494,069
24.10 Payable for securities lending		
24.11 Capital notes \$ and interest thereon \$		
25. Aggregate write-ins for liabilities	1,706,007	957,895
26. Total liabilities excluding Separate Accounts business (Lines 1 to 25)	1,299,859,089	1,177,568,344
27. From Separate Accounts Statement		
28. Total liabilities (Lines 26 and 27)	1,299,859,089	1,177,568,344
29. Common capital stock	2,556,000	2,556,000
30. Preferred capital stock		
31. Aggregate write-ins for other than special surplus funds	0	0
32. Surplus notes	30,000,000	30,000,000
33. Gross paid in and contributed surplus (Page 3, Line 33, Col. 2 plus Page 4, Line 51.1, Col. 1)	67,647,000	52,647,000
34. Aggregate write-ins for special surplus funds	0	0
35. Unassigned funds (surplus)	35,727,149	24,537,825
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 29 \$)		
36.2 shares preferred (value included in Line 30 \$)		
37. Surplus (Total Lines 31+32+33+34+35-36) (including \$ in Separate Accounts Statement)	133,374,149	107,184,825
38. Totals of Lines 29, 30 and 37 (Page 4, Line 55)	135,930,149	109,740,825
39. Totals of Lines 28 and 38 (Page 2, Line 28, Col. 3)	1,435,789,238	1,287,309,169
DETAILS OF WRITE-INS		
2501. Unclaimed Property	1,706,007	957,895
2502.		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	1,706,007	957,895
3101.		
3102.		
3103.		
3198. Summary of remaining write-ins for Line 31 from overflow page	0	0
3199. Totals (Lines 3101 thru 3103 plus 3198)(Line 31 above)	0	0
3401.		
3402.		
3403.		
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0

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)	321,840,335	298,707,093
2. Considerations for supplementary contracts with life contingencies	0	0
3. Net investment income (Exhibit of Net Investment Income, Line 17)	55,661,020	52,486,340
4. Amortization of Interest Maintenance Reserve (IMR, Line 5)	216,047	406,675
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)	988,356	995,542
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	0	0
9. Total (Lines 1 to 8.3)	378,705,758	352,595,650
10. Death benefits	434,260	538,199
11. Matured endowments (excluding guaranteed annual pure endowments)	0	0
12. Annuity benefits (Exhibit 8, Part 2, Line 6.4, Cols. 4 + 8)	0	0
13. Disability benefits and benefits under accident and health contracts	103,456,049	100,266,215
14. Coupons, guaranteed annual pure endowments and similar benefits	0	0
15. Surrender benefits and withdrawals for life contracts	299,327	180,123
16. Group conversions	0	0
17. Interest and adjustments on contract or deposit-type contract funds	853	1,287
18. Payments on supplementary contracts with life contingencies	0	0
19. Increase in aggregate reserves for life and accident and health contracts	115,810,949	104,948,188
20. Totals (Lines 10 to 19)	220,001,438	205,934,012
21. Commissions on premiums, annuity considerations, and deposit-type contract funds (direct business only) (Exhibit 1, Part 2, Line 31, Col. 1)	72,118,328	67,133,988
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)	34,000,717	31,437,187
24. Insurance taxes, licenses and fees, excluding federal income taxes (Exhibit 3, Line 7, Cols. 1 + 2 + 3 + 5)	7,050,010	6,689,434
25. Increase in loading on deferred and uncollected premiums	(1,530)	(250,344)
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)	333,168,963	310,944,277
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28)	45,536,795	41,651,373
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)	45,536,795	41,651,373
32. Federal and foreign income taxes incurred (excluding tax on capital gains)	9,330,355	9,782,130
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)	36,206,440	31,869,243
34. Net realized capital gains (losses) (excluding gains (losses) transferred to the IMR) less capital gains tax of \$(418,791) (excluding taxes of \$238,397 transferred to the IMR)	25,600	155,536
35. Net income (Line 33 plus Line 34)	36,232,040	32,024,779
CAPITAL AND SURPLUS ACCOUNT		
36. Capital and surplus, December 31, prior year (Page 3, Line 38, Col. 2)	109,740,825	125,441,833
37. Net income (Line 35)	36,232,040	32,024,779
38. Change in net unrealized capital gains (losses) less capital gains tax of \$9,000	33,286	(62,577)
39. Change in net unrealized foreign exchange capital gain (loss)		
40. Change in net deferred income tax	1,393,000	5,524,000
41. Change in nonadmitted assets	7,446,594	(19,874,550)
42. Change in liability for reinsurance in unauthorized and certified companies		
43. Change in reserve on account of change in valuation basis, (increase) or decrease	0	0
44. Change in asset valuation reserve	(1,632,138)	(1,633,267)
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		
47. Other changes in surplus in Separate Accounts Statement		
48. Change in surplus notes		
49. Cumulative effect of changes in accounting principles		
50. Capital changes:		
50.1 Paid in		
50.2 Transferred from surplus (Stock Dividend)		
50.3 Transferred to surplus		
51. Surplus adjustment:		
51.1 Paid in	15,000,000	0
51.2 Transferred to capital (Stock Dividend)		
51.3 Transferred from capital		
51.4 Change in surplus as a result of reinsurance		
52. Dividends to stockholders	(32,024,000)	(31,493,000)
53. Aggregate write-ins for gains and losses in surplus	(259,458)	(186,393)
54. Net change in capital and surplus for the year (Lines 37 through 53)	26,189,324	(15,701,008)
55. Capital and surplus, December 31, current year (Lines 36 + 54) (Page 3, Line 38)	135,930,149	109,740,825
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
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398)(Line 8.3 above)	0	0
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. Change in Executive Benefit Plans	(329,458)	(235,393)
5302. Change in Executive Benefit Plans - Deferred FIT	70,000	49,000
5303.		
5398. Summary of remaining write-ins for Line 53 from overflow page	0	0
5399. Totals (Lines 5301 thru 5303 plus 5398)(Line 53 above)	(259,458)	(186,393)

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	320,797,270	298,048,006
2. Net investment income	48,245,178	44,124,831
3. Miscellaneous income	988,356	995,542
4. Total (Lines 1 through 3)	370,030,804	343,168,379
5. Benefit and loss related payments	103,527,916	100,733,220
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	111,588,349	106,040,841
8. Dividends paid to policyholders	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	6,225,801	12,476,006
10. Total (Lines 5 through 9)	221,342,066	219,250,067
11. Net cash from operations (Line 4 minus Line 10)	148,688,738	123,918,312
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	37,053,292	19,811,470
12.2 Stocks	0	0
12.3 Mortgage loans	4,568,771	0
12.4 Real estate	0	0
12.5 Other invested assets	2,535,633	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0
12.7 Miscellaneous proceeds	0	(40,851)
12.8 Total investment proceeds (Lines 12.1 to 12.7)	44,157,696	19,770,619
13. Cost of investments acquired (long-term only):		
13.1 Bonds	118,464,024	83,404,363
13.2 Stocks	0	0
13.3 Mortgage loans	7,287,197	2,018,135
13.4 Real estate	0	0
13.5 Other invested assets	29,777,536	19,016,556
13.6 Miscellaneous applications	494,069	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	156,022,826	104,439,054
14. Net increase (decrease) in contract loans and premium notes	22,208	43,084
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(111,887,338)	(84,711,519)
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	0	0
16.5 Dividends to stockholders	32,024,000	31,493,000
16.6 Other cash provided (applied)	6,999,421	(15,308,881)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(25,024,579)	(46,801,881)
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)	11,776,821	(7,595,088)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	(3,952,893)	3,642,195
19.2 End of year (Line 18 plus Line 19.1)	7,823,928	(3,952,893)

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

20.0001. Bond for bond exchanges excluded from investments sold and investments acquired	26,844,148	17,515,504
20.0002. Unsettled bond purchases excluded from investments acquired and miscellaneous proceeds	354,732	494,069
20.0003. Non-cash capitalized Interest excluded from investments acquired and net investment income	106,708	0

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - SUMMARY

	1	2	3	4	5	6	7	8	9
	Total	Individual Life	Group Life	Individual Annuities	Group Annuities	Accident and Health	Fraternal	Other Lines of Business	YRT Mortality Risk Only
1. Premiums and annuity considerations for life and accident and health contracts	321,840,335	4,171,360	0			317,668,975			0
2. Considerations for supplementary contracts with life contingencies	0	XXX	XXX			XXX	XXX		XXX
3. Net investment income	55,661,020	583,289	0			55,077,731			0
4. Amortization of Interest Maintenance Reserve (IMR)	216,047	2,264	0			213,783			0
5. Separate Accounts net gain from operations excluding unrealized gains or losses	0	0	0			0	XXX		0
6. Commissions and expense allowances on reinsurance ceded	988,356	139	0			988,217	XXX	0	0
7. Reserve adjustments on reinsurance ceded	0	0	0			0	XXX		0
8. Miscellaneous Income:									
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts	0	0	0			0	XXX		0
8.2 Charges and fees for deposit-type contracts	0	0	0			XXX	XXX		0
8.3 Aggregate write-ins for miscellaneous income	0	0	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3)	378,705,758	4,757,052	0	0	0	373,948,706	0	0	0
10. Death benefits	434,260	434,260	0			XXX	XXX		0
11. Matured endowments (excluding guaranteed annual pure endowments)	0	0	0			XXX	XXX		0
12. Annuity benefits	0	XXX	XXX			XXX	XXX		XXX
13. Disability benefits and benefits under accident and health contracts	103,456,049	0	0			103,456,049	XXX		0
14. Coupons, guaranteed annual pure endowments and similar benefits	0	0	0			0	XXX		0
15. Surrender benefits and withdrawals for life contracts	299,327	299,327	0			XXX	XXX		0
16. Group conversions	0	0	0			0	XXX		0
17. Interest and adjustments on contract or deposit-type contract funds	853	853	0			0	XXX		0
18. Payments on supplementary contracts with life contingencies	0	0	0			XXX	XXX		0
19. Increase in aggregate reserves for life and accident and health contracts	115,810,949	1,844,270	0			113,966,679	XXX		0
20. Totals (Lines 10 to 19)	220,001,438	2,578,710	0	0	0	217,422,728	XXX	0	0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)	72,118,328	949,180				71,169,148	0	0	XXX
22. Commissions and expense allowances on reinsurance assumed	0	0	0			0	XXX	0	0
23. General insurance expenses and fraternal expenses	34,000,718	715,189	0			33,285,529			0
24. Insurance taxes, licenses and fees, excluding federal income taxes	7,050,010	88,125	0			6,961,885			0
25. Increase in loading on deferred and uncollected premiums	(1,530)	(1,530)	0			0	XXX		0
26. Net transfers to or (from) Separate Accounts net of reinsurance	0	0	0			0	XXX		0
27. Aggregate write-ins for deductions	0	0	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27)	333,168,964	4,329,674	0	0	0	328,839,290	0	0	0
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28)	45,536,794	427,378	0	0	0	45,109,416	0	0	0
30. Dividends to policyholders and refunds to members	0	0	0			0	XXX		0
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)	45,536,794	427,378	0	0	0	45,109,416	0	0	0
32. Federal income taxes incurred (excluding tax on capital gains)	9,330,355	87,569	0			9,242,786			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)	36,206,439	339,809	0	0	0	35,866,630	0	0	0
34. Policies/certificates in force end of year	532,867	14,799	0			518,068	XXX		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
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
2701.									
2702.									
2703.									
2798. Summary of remaining write-ins for Line 27 from overflow page	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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America

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

	1	2	3	4	5	6	7	8	9	10	11	12
	Total	Industrial Life	Whole Life	Term Life	Indexed Life	Universal Life	Universal Life With Secondary Guarantees	Variable Life	Variable Universal Life	Credit Life (c)	Other Individual Life	YRT Mortality Risk Only
1. Premiums for life contracts ^(a)	4,171,360		4,171,360									
2. Considerations for supplementary contracts with life contingencies	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Net investment income	583,289		583,289									
4. Amortization of Interest Maintenance Reserve (IMR)	2,264		2,264									
5. Separate Accounts net gain from operations excluding unrealized gains or losses	0											
6. Commissions and expense allowances on reinsurance ceded	139	0	139									
7. Reserve adjustments on reinsurance ceded	0											
8. Miscellaneous Income:												
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts	0											
8.2 Charges and fees for deposit-type contracts	0											
8.3 Aggregate write-ins for miscellaneous income	0	0	0	0	0	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3)	4,757,052	0	4,757,052	0	0	0	0	0	0	0	0	0
10. Death benefits	434,260		434,260									
11. Matured endowments (excluding guaranteed annual pure endowments)	0											
12. Annuity benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Disability benefits and benefits under accident and health contracts	0											
14. Coupons, guaranteed annual pure endowments and similar benefits	0											
15. Surrender benefits and withdrawals for life contracts	299,327		299,327									
16. Group conversions	0											
17. Interest and adjustments on contract or deposit-type contract funds	853		853									
18. Payments on supplementary contracts with life contingencies	0											
19. Increase in aggregate reserves for life and accident and health contracts	1,844,270		1,844,270									
20. Totals (Lines 10 to 19)	2,578,710	0	2,578,710	0	0	0	0	0	0	0	0	0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)	949,180	0	949,180									XXX
22. Commissions and expense allowances on reinsurance assumed	0	0										
23. General insurance expenses	715,189		715,189									
24. Insurance taxes, licenses and fees, excluding federal income taxes	88,125		88,125									
25. Increase in loading on deferred and uncollected premiums	(1,530)		(1,530)									
26. Net transfers to or (from) Separate Accounts net of reinsurance	0											
27. Aggregate write-ins for deductions	0	0	0	0	0	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27)	4,329,674	0	4,329,674	0	0	0	0	0	0	0	0	0
29. Net gain from operations before dividends to policyholders, refunds to members and federal income taxes (Line 9 minus Line 28)	427,378	0	427,378	0	0	0	0	0	0	0	0	0
30. Dividends to policyholders and refunds to members	0											
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)	427,378	0	427,378	0	0	0	0	0	0	0	0	0
32. Federal income taxes incurred (excluding tax on capital gains)	87,569		87,569									
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)	339,809	0	339,809	0	0	0	0	0	0	0	0	0
34. Policies/certificates in force end of year	14,799		14,799									
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

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

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

Analysis of Operations by Lines of Business - Group Life Insurance

N O N E

Analysis of Operations by Lines of Business - Individual Annuities

N O N E

Analysis of Operations by Lines of Business - Group Annuities

N O N E

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America
ANALYSIS OF OPERATIONS BY LINES OF BUSINESS - ACCIDENT AND HEALTH (a)

	1	Comprehensive		4	5	6	7	8	9	10	11	12	13
		2	3										
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health
1. Premiums for accident and health contracts	317,668,975												317,668,975
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	55,077,731												55,077,731
4. Amortization of Interest Maintenance Reserve (IMR)	213,783												213,783
5. Separate Accounts net gain from operations excluding unrealized gains or losses	0												
6. Commissions and expense allowances on reinsurance ceded	988,217									0			988,217
7. Reserve adjustments on reinsurance ceded	0												
8. Miscellaneous Income:													
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts	0												
8.2 Charges and fees for deposit-type contracts	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8.3 Aggregate write-ins for miscellaneous income	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3)	373,948,706	0	0	0	0	0	0	0	0	0	0	0	373,948,706
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	103,456,049												103,456,049
14. Coupons, guaranteed annual pure endowments and similar benefits	0												
15. Surrender benefits and withdrawals for life contracts	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
16. Group conversions	0												
17. Interest and adjustments on contract or deposit-type contract funds	0												
18. Payments on supplementary contracts with life contingencies	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
19. Increase in aggregate reserves for life and accident and health contracts	113,966,679												113,966,679
20. Totals (Lines 10 to 19)	217,422,728	0	0	0	0	0	0	0	0	0	0	0	217,422,728
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)	71,169,148									0			71,169,148
22. Commissions and expense allowances on reinsurance assumed	0									0			
23. General insurance expenses	33,285,529												33,285,529
24. Insurance taxes, licenses and fees, excluding federal income taxes	6,961,885												6,961,885
25. Increase in loading on deferred and uncollected premiums	0												
26. Net transfers to or (from) Separate Accounts net of reinsurance	0												
27. Aggregate write-ins for deductions	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27)	328,839,290	0	0	0	0	0	0	0	0	0	0	0	328,839,290
29. Net gain from operations before dividends to policyholders, and refunds to members and federal income taxes (Line 9 minus Line 28)	45,109,416	0	0	0	0	0	0	0	0	0	0	0	45,109,416
30. Dividends to policyholders and refunds to members	0												
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)	45,109,416	0	0	0	0	0	0	0	0	0	0	0	45,109,416
32. Federal income taxes incurred (excluding tax on capital gains)	9,242,786												9,242,786
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)	35,866,630	0	0	0	0	0	0	0	0	0	0	0	35,866,630
34. Policies/certificates in force end of year	518,068												518,068
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	0
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above)	0	0	0	0	0	0	0	0	0	0	0	0	0
2701.													
2702.													
2703.													
2798. Summary of remaining write-ins for Line 27 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America

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

	1	2	3	4	5	6	7	8	9	10	11	12
	Total	Industrial Life	Whole Life	Term Life	Indexed Life	Universal Life	Universal Life With Secondary Guarantees	Variable Life	Variable Universal Life	Credit Life ^(b) (N/A Fraternal)	Other Individual Life	YRT Mortality Risk Only
Involving Life or Disability Contingencies (Reserves) (Net of Reinsurance Ceded)												
1. Reserve December 31 of prior year	10,159,373	0	10,159,373	0	0	0	0	0	0	0	0	0
2. Tabular net premiums or considerations	2,970,944		2,970,944									
3. Present value of disability claims incurred	0											
4. Tabular interest	420,167		420,167									
5. Tabular less actual reserve released	0											
6. Increase in reserve on account of change in valuation basis	0											
6.1 Change in excess of VM-20 deterministic/stochastic reserve over net premium reserve	0	XXX								XXX		
7. Other increases (net)	0											
8. Totals (Lines 1 to 7)	13,550,484	0	13,550,484	0	0	0	0	0	0	0	0	0
9. Tabular cost	763,545		763,545									
10. Reserves released by death	59,977		59,977									
11. Reserves released by other terminations (net)	723,318		723,318									
12. Annuity, supplementary contract and disability payments involving life contingencies	0											
13. Net transfers to or (from) Separate Accounts	0											
14. Total Deductions (Lines 9 to 13)	1,546,840	0	1,546,840	0	0	0	0	0	0	0	0	0
15. Reserve December 31 of current year	12,003,644	0	12,003,644	0	0	0	0	0	0	0	0	0
Cash Surrender Value and Policy Loans												
16. CSV Ending balance December 31, current year	4,358,053		4,358,053									
17. Amount Available for Policy Loans Based upon Line 16 CSV	4,358,053		4,358,053									

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

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

Analysis of Increase in Reserves During the Year - Group Life Insurance
N O N E

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

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

EXHIBIT OF NET INVESTMENT INCOME

		1	2
		Collected During Year	Earned During Year
1.	U.S. Government bonds	(a) .....2,517,993	.....2,518,008
1.1	Bonds exempt from U.S. tax	(a) .....	.....
1.2	Other bonds (unaffiliated)	(a) .....54,743,225	.....55,338,369
1.3	Bonds of affiliates	(a) .....	.....
2.1	Preferred stocks (unaffiliated)	(b) .....	.....
2.11	Preferred stocks of affiliates	(b) .....	.....
2.2	Common stocks (unaffiliated) .....	.....	.....
2.21	Common stocks of affiliates .....	.....	.....
3.	Mortgage loans	(c) .....1,050,955	.....1,058,134
4.	Real estate	(d) .....	.....
5	Contract loans .....	.....13,124	.....13,124
6	Cash, cash equivalents and short-term investments	(e) .....141,917	.....141,335
7	Derivative instruments	(f) .....	.....
8.	Other invested assets .....	.....2,505,855	.....2,508,945
9.	Aggregate write-ins for investment income .....	.....1,132,046	.....1,132,046
10.	Total gross investment income	62,105,115	62,709,961
11.	Investment expenses		(g) .....2,519,326
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g) .....0
13.	Interest expense		(h) .....2,055,875
14.	Depreciation on real estate and other invested assets		(i)
15.	Aggregate write-ins for deductions from investment income .....		.....2,473,740
16.	Total deductions (Lines 11 through 15) .....		.....7,048,941
17.	Net investment income (Line 10 minus Line 16)		55,661,020
DETAILS OF WRITE-INS			
0901.	Agent Balances .....	.....1,131,994	.....1,131,994
0902.	Policy Reinstatement Interest .....	.....52	.....52
0903.	.....	
0998.	Summary of remaining write-ins for Line 9 from overflow page .....	.....0	.....0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	1,132,046	1,132,046
1501.	Amortization of Tax Credit Fund .....		.....2,473,740
1502.	.....	
1503.	.....	
1598.	Summary of remaining write-ins for Line 15 from overflow page .....		.....0
1599.	Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above)		2,473,740

- (a) Includes \$11,004,411 accrual of discount less \$1,981,025 amortization of premium and less \$805,336 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 \$92,313 accrual of discount less \$0 amortization of premium and less \$0 paid for accrued interest on purchases.
- (d) Includes \$0 for company's occupancy of its own buildings; and excludes \$0 interest on encumbrances.
- (e) Includes \$0 accrual of discount less \$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	2	3	4	5
		Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds .....	.....0	.....0	.....0	.....0	.....0
1.1	Bonds exempt from U.S. tax .....	.....	.....	.....0	.....	.....
1.2	Other bonds (unaffiliated) .....	.....830,939	.....0	.....830,939	.....0	.....0
1.3	Bonds of affiliates .....	.....0	.....0	.....0	.....0	.....0
2.1	Preferred stocks (unaffiliated) .....	.....0	.....0	.....0	.....0	.....0
2.11	Preferred stocks of affiliates .....	.....0	.....0	.....0	.....0	.....0
2.2	Common stocks (unaffiliated) .....	.....0	.....0	.....0	.....0	.....0
2.21	Common stocks of affiliates .....	.....0	.....0	.....0	.....0	.....0
3.	Mortgage loans .....	.....0	.....0	.....0	.....0	.....0
4.	Real estate .....	.....	.....0	.....0	.....	.....0
5.	Contract loans .....	.....	.....	.....0	.....	.....
6.	Cash, cash equivalents and short-term investments .....	.....	.....	.....0	.....	.....
7.	Derivative instruments .....	.....	.....	.....0	.....	.....
8.	Other invested assets .....	.....(393,190)	.....0	.....(393,190)	.....42,286	.....0
9.	Aggregate write-ins for capital gains (losses) .....	.....0	.....0	.....0	.....0	.....0
10.	Total capital gains (losses)	437,749	0	437,749	42,286	0
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 Family Heritage Life Insurance Company of America

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

	Insurance											
	1	2	Ordinary		5	Group		Accident and Health			11	12
			3	4		6	7	8	9	10		
	Total	Industrial Life	Life Insurance	Individual Annuities	Credit Life (Group and Individual)	Life Insurance	Annuities	Group	Credit (Group and Individual)	Other	Aggregate of All Other Lines of Business	Fraternal (Fraternal Benefit Societies Only)
FIRST YEAR (other than single)												
1. Uncollected	1,831,179		28,488					56,283		1,746,408		
2. Deferred and accrued	23,328		23,328									
3. Deferred , accrued and uncollected:												
3.1 Direct	1,866,567		51,816					56,297		1,758,454		
3.2 Reinsurance assumed	0											
3.3 Reinsurance ceded	12,060							14		12,046		
3.4 Net (Line 1 + Line 2)	1,854,507	0	51,816	0	0	0	0	56,283	0	1,746,408	0	0
4. Advance	0											
5. Line 3.4 - Line 4	1,854,507	0	51,816	0	0	0	0	56,283	0	1,746,408	0	0
6. Collected during year:												
6.1 Direct	55,055,582		814,068					2,367,894		51,873,620		
6.2 Reinsurance assumed	0											
6.3 Reinsurance ceded	424,593							1,810		422,783		
6.4 Net	54,630,989	0	814,068	0	0	0	0	2,366,084	0	51,450,837	0	0
7. Line 5 + Line 6.4	56,485,496	0	865,884	0	0	0	0	2,422,367	0	53,197,245	0	0
8. Prior year (uncollected + deferred and accrued - advance)	1,734,177	0	46,247	0	0	0	0	90,757	0	1,597,173	0	0
9. First year premiums and considerations:												
9.1 Direct	55,177,454		819,637					2,333,298		52,024,519		
9.2 Reinsurance assumed	0											
9.3 Reinsurance ceded	426,135							1,688		424,447		
9.4 Net (Line 7 - Line 8)	54,751,319	0	819,637	0	0	0	0	2,331,610	0	51,600,072	0	0
SINGLE												
10. Single premiums and considerations:												
10.1 Direct	0											
10.2 Reinsurance assumed	0											
10.3 Reinsurance ceded	0											
10.4 Net	0	0	0	0	0	0	0	0	0	0	0	0
RENEWAL												
11. Uncollected	8,439,878		90,164					372,595		7,977,119		
12. Deferred and accrued	1,410,379		1,410,379									
13. Deferred, accrued and uncollected:												
13.1 Direct	9,917,325		1,501,484					374,459		8,041,382		
13.2 Reinsurance assumed	0											
13.3 Reinsurance ceded	67,068		941					1,864		64,263		
13.4 Net (Line 11 + Line 12)	9,850,257	0	1,500,543	0	0	0	0	372,595	0	7,977,119	0	0
14. Advance	0											
15. Line 13.4 - Line 14	9,850,257	0	1,500,543	0	0	0	0	372,595	0	7,977,119	0	0
16. Collected during year:												
16.1 Direct	268,778,142		3,526,928					13,159,387		252,091,827		
16.2 Reinsurance assumed	0											
16.3 Reinsurance ceded	2,577,537		88,319					77,045		2,412,173		
16.4 Net	266,200,605	0	3,438,609	0	0	0	0	13,082,342	0	249,679,654	0	0
17. Line 15 + Line 16.4	276,050,862	0	4,939,152	0	0	0	0	13,454,937	0	257,656,773	0	0
18. Prior year (uncollected + deferred and accrued - advance)	8,961,846	0	1,587,429	0	0	0	0	337,204	0	7,037,213	0	0
19. Renewal premiums and considerations:												
19.1 Direct	269,667,225		3,440,042					13,194,470		253,032,713		
19.2 Reinsurance assumed	0											
19.3 Reinsurance ceded	2,578,209		88,319					76,737		2,413,153		
19.4 Net (Line 17 - Line 18)	267,089,016	0	3,351,723	0	0	0	0	13,117,733	0	250,619,560	0	0
TOTAL												
20. Total premiums and annuity considerations:												
20.1 Direct	324,844,679	0	4,259,679	0	0	0	0	15,527,768	0	305,057,232	0	0
20.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0
20.3 Reinsurance ceded	3,004,344	0	88,319	0	0	0	0	78,425	0	2,837,600	0	0
20.4 Net (Lines 9.4 + 10.4 + 19.4)	321,840,335	0	4,171,360	0	0	0	0	15,449,343	0	302,219,632	0	0

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America

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

	Insurance											
	1	2	Ordinary		5	Group		Accident and Health			11	12
	Total	Industrial Life	3	4	Credit Life (Group and Individual)	6	7	8	9	10	Aggregate of All Other Lines of Business	Fraternal (Fraternal Benefit Societies Only)
			Life Insurance	Individual Annuities		Life Insurance	Annuities	Group	Credit (Group and Individual)	Other		
POLICYHOLDERS' DIVIDENDS, REFUNDS TO MEMBERS AND COUPONS APPLIED (included in Part 1)												
21. To pay renewal premiums	0											
22. All other	0											
REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES INCURRED												
23. First year (other than single):												
23.1 Reinsurance ceded	380,771		(2)					1,524		379,249		
23.2 Reinsurance assumed	0											
23.3 Net ceded less assumed	380,771	0	(2)	0	0	0	0	1,524	0	379,249	0	0
24. Single:												
24.1 Reinsurance ceded	0											
24.2 Reinsurance assumed	0											
24.3 Net ceded less assumed	0	0	0	0	0	0	0	0	0	0	0	0
25. Renewal:												
25.1 Reinsurance ceded	607,585		142					18,765		588,678		
25.2 Reinsurance assumed	0											
25.3 Net ceded less assumed	607,585	0	142	0	0	0	0	18,765	0	588,678	0	0
26. Totals:												
26.1 Reinsurance ceded (Page 6, Line 6)	988,356	0	140	0	0	0	0	20,289	0	967,927	0	0
26.2 Reinsurance assumed (Page 6, Line 22)	0	0	0	0	0	0	0	0	0	0	0	0
26.3 Net ceded less assumed	988,356	0	140	0	0	0	0	20,289	0	967,927	0	0
COMMISSIONS INCURRED (direct business only)												
27. First year (other than single)	43,625,128		614,189					1,875,353		41,135,586		
28. Single	0											
29. Renewal	28,493,200		334,991					1,416,645		26,741,564		
30. Deposit-type contract funds	0											
31. Totals (to agree with Page 6, Line 21)	72,118,328	0	949,180	0	0	0	0	3,291,998	0	67,877,150	0	0

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America

EXHIBIT 2 - GENERAL EXPENSES

		Insurance				5	6	7
		1	Accident and Health		4			
			2	3				
		Life	Cost Containment	All Other	All Other Lines of Business	Investment	Fraternal	Total
1.	Rent	7,974		629,959				637,933
2.	Salaries and wages	197,363		15,591,669				15,789,032
3.11	Contributions for benefit plans for employees	18,495		1,461,102				1,479,597
3.12	Contributions for benefit plans for agents							0
3.21	Payments to employees under non-funded benefit plans							0
3.22	Payments to agents under non-funded benefit plans							0
3.31	Other employee welfare			225,045				225,045
3.32	Other agent welfare							0
4.1	Legal fees and expenses			904,834				904,834
4.2	Medical examination fees							0
4.3	Inspection report fees	67,808						67,808
4.4	Fees of public accountants and consulting actuaries			330,403				330,403
4.5	Expense of investigation and settlement of policy claims			202,921				202,921
5.1	Traveling expenses			265,353				265,353
5.2	Advertising			132,512				132,512
5.3	Postage, express, telegraph and telephone			470,959				470,959
5.4	Printing and stationery			352,704				352,704
5.5	Cost or depreciation of furniture and equipment			7,815				7,815
5.6	Rental of equipment			108,614				108,614
5.7	Cost or depreciation of EDP equipment and software			2,920,894				2,920,894
6.1	Books and periodicals			34,395				34,395
6.2	Bureau and association fees			1,404				1,404
6.3	Insurance, except on real estate			87,526				87,526
6.4	Miscellaneous losses							0
6.5	Collection and bank service charges					311,326		311,326
6.6	Sundry general expenses			438,831				438,831
6.7	Group service and administration fees							0
6.8	Reimbursements by uninsured plans							0
7.1	Agency expense allowance							0
7.2	Agents' balances charged off (less \$ recovered)			(4,579)				(4,579)
7.3	Agency conferences other than local meetings	12,484		986,252				998,736
8.1	Official publication (Fraternal Benefit Societies Only)	XXX	XXX	XXX	XXX	XXX		0
8.2	Expense of supreme lodge meetings (Fraternal Benefit Societies Only)	XXX	XXX	XXX	XXX	XXX		0
9.1	Real estate expenses							0
9.2	Investment expenses not included elsewhere					2,208,000		2,208,000
9.3	Aggregate write-ins for expenses	411,064	0	8,136,916	0	0	0	8,547,980
10.	General expenses incurred	715,188	0	33,285,529	0	2,519,326	(b) 0	(a) 36,520,043
11.	General expenses unpaid Dec. 31, prior year	27,925		2,446,322		20,000		2,494,247
12.	General expenses unpaid Dec. 31, current year	24,765		4,285,408		20,000		4,330,173
13.	Amounts receivable relating to uninsured plans, prior year							0
14.	Amounts receivable relating to uninsured plans, current year							0
15.	General expenses paid during year (Lines 10+11-12-13+14)	718,348	0	31,446,443	0	2,519,326	0	34,684,117
DETAILS OF WRITE-INS								
09.301.	Sales Awards and Incentives	92,540		7,310,688				7,403,228
09.302.	Recruiting Expenses			375,132				375,132
09.303.	Life Administrator Fees	318,524						318,524
09.398.	Summary of remaining write-ins for Line 9.3 from overflow page	0	0	451,096	0	0	0	451,096
09.399.	Totals (Lines 09.301 thru 09.303 plus 09.398) (Line 9.3 above)	411,064	0	8,136,916	0	0	0	8,547,980

(a) Includes management fees of \$ 5,388,000 to affiliates and \$ 0 to non-affiliates.

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

1. Charitable \$; 2. Institutional \$; 3. Recreational and Health \$; 4. Educational \$;

5. Religious \$; 6. Membership \$; 7. Other \$; 8. Total \$

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

		Insurance			4	5	6
		1	2	3			
		Life	Accident and Health	All Other Lines of Business	Investment	Fraternal	Total
1.	Real estate taxes						0
2.	State insurance department licenses and fees	3,494	276,028				279,522
3.	State taxes on premiums	73,704	5,822,609				5,896,313
4.	Other state taxes, including \$ for employee benefits	373	29,442				29,815
5.	U.S. Social Security taxes	8,002	632,167				640,169
6.	All other taxes	2,552	201,639				204,191
7.	Taxes, licenses and fees incurred	88,125	6,961,885	0	0	0	7,050,010
8.	Taxes, licenses and fees unpaid Dec. 31, prior year	14,281	1,128,217				1,142,498
9.	Taxes, licenses and fees unpaid Dec. 31, current year	14,344	1,133,146				1,147,490
10.	Taxes, licenses and fees paid during year (Lines 7 + 8 - 9)	88,062	6,956,956	0	0	0	7,045,018

EXHIBIT 4 - DIVIDENDS OR REFUNDS

	1	2
	Life	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)		

EXHIBIT 5 - AGGREGATE RESERVE FOR LIFE CONTRACTS

(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 \$; Annuities \$; Supplementary Contracts with Life Contingencies \$; Accidental Death Benefits \$; Disability - Active Lives \$; Disability - Disabled Lives \$; Miscellaneous Reserves \$

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America

EXHIBIT 5 - INTERROGATORIES

1.1

Has the reporting entity ever issued both participating and non-participating contracts?

Yes [] No [X]

1.2

If not, state which kind is issued.

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.

3.

Does the reporting entity at present issue or have in force contracts that contain non-guaranteed elements?

Yes [] No [X]

If so, attach a statement that contains the determination procedures, answers to the interrogatories and an actuarial opinion as described in the instructions.

4.

Has the reporting entity any assessment or stipulated premium contracts in force?

Yes [] No [X]

If so, state:

4.1

Amount of insurance?

\$

4.2

Amount of reserve?

\$

4.3

Basis of reserve:

4.4

Basis of regular assessments:

4.5

Basis of special assessments:

4.6

Assessments collected during the year

\$

5.

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

6.

Does the reporting entity hold reserves for any annuity contracts that are less than the reserves that would be held on a standard basis?

Yes [] No [X]

6.1

If so, state the amount of reserve on such contracts on the basis actually held:

\$

6.2

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

\$

Attach statement of methods employed in their valuation.

7.

Does the reporting entity have any Synthetic GIC contracts or agreements in effect as of December 31 of the current year?

Yes [] No [X]

7.1

If yes, state the total dollar amount of assets covered by these contracts or agreements

\$

7.2

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

7.3

State the amount of reserves established for this business:

\$

7.4

Identify where the reserves are reported in the blank:

8.

Does the reporting entity have any Contingent Deferred Annuity contracts or agreements in effect as of December 31 of the current year?

Yes [] No [X]

8.1

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

\$

8.2

State the amount of reserves established for this business:

\$

8.3

Identify where the reserves are reported in the blank:

9.

Does the reporting entity have any Guaranteed Lifetime Income Benefit contracts, agreements or riders in effect as of December 31 of the current year?

Yes [] No [X]

9.1

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

\$

9.2

State the amount of reserves established for this business:

\$

9.3

Identify where the reserves are reported in the blank:

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

1	Valuation Basis		4
	2	3	
Description of Valuation Class	Changed From	Changed To	Increase in Actuarial Reserve Due to Change
NONE			
9999999 - Total (Column 4, only)			

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America

EXHIBIT 6 - AGGREGATE RESERVES FOR ACCIDENT AND HEALTH CONTRACTS ^(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										
ACTIVE LIFE RESERVE													
1. Unearned premium reserves	18,119,884												18,119,884
2. Additional contract reserves (b)	1,220,698,146												1,220,698,146
3. Additional actuarial reserves-Asset/Liability analysis	0												
4. Reserve for future contingent benefits	0												
5. Reserve for rate credits	0												
6. Aggregate write-ins for reserves	0	0	0	0	0	0	0	0	0	0	0	0	0
7. Totals (Gross)	1,238,818,030	0	0	0	0	0	0	0	0	0	0	0	1,238,818,030
8. Reinsurance ceded	6,503,286												6,503,286
9. Totals (Net)	1,232,314,744	0	0	0	0	0	0	0	0	0	0	0	1,232,314,744
CLAIM RESERVE													
10. Present value of amounts not yet due on claims	3,196,535												3,196,535
11. Additional actuarial reserves-Asset/Liability analysis	0												
12. Reserve for future contingent benefits	0												
13. Aggregate write-ins for reserves	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Totals (Gross)	3,196,535	0	0	0	0	0	0	0	0	0	0	0	3,196,535
15. Reinsurance ceded	0												
16. Totals (Net)	3,196,535	0	0	0	0	0	0	0	0	0	0	0	3,196,535
17. TOTAL (Net)	1,235,511,279	0	0	0	0	0	0	0	0	0	0	0	1,235,511,279
18. TABULAR FUND INTEREST	46,562,128												46,562,128
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	0
0699. TOTALS (Lines 0601 thru 0603 plus 0698) (Line 6 above)	0	0	0	0	0	0	0	0	0	0	0	0	0
1301.													
1302.													
1303.													
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
1399. TOTALS (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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

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

See Note 21 C.

EXHIBIT 7 - DEPOSIT TYPE CONTRACTS

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America

EXHIBIT 8 - CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

PART 1 - Liability End of Current Year											
	1	2	Ordinary			6	Group		Accident and Health		
			3	4	5		7	8	9	10	11
	Total	Industrial Life	Life Insurance	Individual Annuities	Supplementary Contracts	Credit Life (Group and Individual)	Life Insurance	Annuities	Group	Credit (Group and Individual)	Other
1. Due and unpaid:											
1.1 Direct	3,468,342								33,774		3,434,568
1.2 Reinsurance assumed	0										
1.3 Reinsurance ceded	196										196
1.4 Net	3,468,146	0	0	0	0	0	0	0	33,774	0	3,434,372
2. In course of settlement:											
2.1 Resisted											
2.11 Direct	0										
2.12 Reinsurance assumed	0										
2.13 Reinsurance ceded	0										
2.14 Net	0	0	(b) 0	(b) 0	0	(b) 0	(b) 0	0	0	0	0
2.2 Other											
2.21 Direct	173,380								3,240		170,140
2.22 Reinsurance assumed	0										
2.23 Reinsurance ceded	0										
2.24 Net	173,380	0	(b) 0	(b) 0	0	(b) 0	(b) 0	0	(b) 3,240	(b) 0	(b) 170,140
3. Incurred but unreported:											
3.1 Direct	24,929,128		1,836,000						1,370,644		21,722,484
3.2 Reinsurance assumed	0										
3.3 Reinsurance ceded	458,373		188,000						7,000		263,373
3.4 Net	24,470,755	0	(b) 1,648,000	(b) 0	0	(b) 0	(b) 0	0	(b) 1,363,644	(b) 0	(b) 21,459,111
4. TOTALS											
4.1 Direct	28,570,850	0	1,836,000	0	0	0	0	0	1,407,658	0	25,327,192
4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	458,569	0	188,000	0	0	0	0	0	7,000	0	263,569
4.4 Net	28,112,281	(a) 0	(a) 1,648,000	0	0	0	(a) 0	0	1,400,658	0	25,063,623

(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 Family Heritage Life Insurance Company of America

EXHIBIT 8 - CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

PART 2 - Incurred During the Year

	1 Total	2 Industrial Life (a)	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health		
			3 Life Insurance (b)	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance (c)	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other
1. Settlements During the Year:											
1.1 Direct	103,565,906		497,605						1,514,605		101,553,696
1.2 Reinsurance assumed	0										
1.3 Reinsurance ceded	318,990		7,345						6,120		305,525
1.4 Net	(d) 103,246,916	0	490,260	0	0	0	0	0	1,508,485	0	101,248,171
2. Liability December 31, current year from Part 1:											
2.1 Direct	28,570,850	0	1,836,000	0	0	0	0	0	1,407,658	0	25,327,192
2.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
2.3 Reinsurance ceded	458,569	0	188,000	0	0	0	0	0	7,000	0	263,569
2.4 Net	28,112,281	0	1,648,000	0	0	0	0	0	1,400,658	0	25,063,623
3. Amounts recoverable from reinsurers December 31, current year	0										
4. Liability December 31, prior year:											
4.1 Direct	27,946,915	0	1,940,000	0	0	0	0	0	1,140,026	0	24,866,889
4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	478,027	0	236,000	0	0	0	0	0	7,000	0	235,027
4.4 Net	27,468,888	0	1,704,000	0	0	0	0	0	1,133,026	0	24,631,862
5. Amounts recoverable from reinsurers December 31, prior year	0										
6. Incurred Benefits											
6.1 Direct	104,189,841	0	393,605	0	0	0	0	0	1,782,237	0	102,013,999
6.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
6.3 Reinsurance ceded	299,532	0	(40,655)	0	0	0	0	0	6,120	0	334,067
6.4 Net	103,890,309	0	434,260	0	0	0	0	0	1,776,117	0	101,679,932

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

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America

EXHIBIT OF NON-ADMITTED ASSETS

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D)			0
2. Stocks (Schedule D):			
2.1 Preferred stocks			0
2.2 Common stocks			0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens			0
3.2 Other than first liens			0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company			0
4.2 Properties held for the production of income			0
4.3 Properties held for sale			0
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)			0
6. Contract loans			0
7. Derivatives (Schedule DB)			0
8. Other invested assets (Schedule BA)			0
9. Receivables for securities			0
10. Securities lending reinvested collateral assets (Schedule DL)			0
11. Aggregate write-ins for invested assets	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	0	0	0
13. Title plants (for Title insurers only)			0
14. Investment income due and accrued			0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection			0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due ..			0
15.3 Accrued retrospective premiums and contracts subject to redetermination			0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers			0
16.2 Funds held by or deposited with reinsured companies			0
16.3 Other amounts receivable under reinsurance contracts			0
17. Amounts receivable relating to uninsured plans			0
18.1 Current federal and foreign income tax recoverable and interest thereon			0
18.2 Net deferred tax asset	31,002,000	32,918,000	1,916,000
19. Guaranty funds receivable or on deposit			0
20. Electronic data processing equipment and software	3,266,330	2,549,518	(716,812)
21. Furniture and equipment, including health care delivery assets	22,014	9,943	(12,071)
22. Net adjustment in assets and liabilities due to foreign exchange rates			0
23. Receivables from parent, subsidiaries and affiliates			0
24. Health care and other amounts receivable			0
25. Aggregate write-ins for other than invested assets	15,808,194	22,067,671	6,259,477
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	50,098,538	57,545,132	7,446,594
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0
28. Total (Lines 26 and 27)	50,098,538	57,545,132	7,446,594
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. Agents Balances	14,573,559	21,499,995	6,926,436
2502. Prepaid Expenses	1,194,138	527,179	(666,959)
2503. Other Assets Nonadmitted	40,497	40,497	0
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	15,808,194	22,067,671	6,259,477

NOTES TO FINANCIAL STATEMENTS

NOTE 1 Summary of Significant Accounting Policies and Going Concern

- A. Accounting Practices
The accompanying financial statements have been completed in conformity with the accounting practices and procedures permitted by the NAIC's Accounting Practices and Procedures manual and the State of Ohio.
- | | SSAP # | F/S
Page | F/S
Line # | 2020 | 2019 |
|---|--------|-------------|---------------|----------------|----------------|
| NET INCOME | | | | | |
| (1) State basis (Page 4, Line 35, Columns 1 & 2) | XXX | XXX | XXX | \$ 36,232,040 | \$ 32,024,779 |
| (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 | \$ 36,232,040 | \$ 32,024,779 |
| SURPLUS | | | | | |
| (5) State basis (Page 3, Line 38, Columns 1 & 2) | XXX | XXX | XXX | \$ 135,930,149 | \$ 109,740,825 |
| (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 | \$ 135,930,149 | \$ 109,740,825 |
- B. Use of Estimates in the Preparation of the Financial Statements
The preparation of financial statements in conformity with the Annual Statement Instructions and Accounting Practices and Procedures annual requires the use of management's estimates.
- C. Accounting Policy
- Short-terms investments are stated at cost or amortized cost.
 - Bonds not backed by other loans are valued at amortized cost using the scientific method.
 - Common stocks are carried at market.
 - Preferred stocks are carried at cost or amortized cost.
 - Mortgage loans are reported at unpaid principal balances, net of any unamortized discount or premium and allowance for loan losses. The loans are secured by the underlying real estate.
 - Loan-backed and other structured securities are stated at amortized cost or the lower of amortized cost or fair value. Anticipated prepayments are used at the time of purchase to determine the effective yield. Changes in the timing of expected cash flows after original acquisition are accounted for using the retrospective method. Securities that are determined to be other-than-temporarily impaired are accounted for using the prospective method.
 - Common stocks of unconsolidated subsidiaries and affiliates in which the Company has an interest of 20% or more are carried on the equity basis.
 - Investments in joint ventures, partnerships and limited liability companies are accounted for using the equity basis.
 - The Company does not have any derivatives.
 - The Company anticipates investment income as a factor in the premium deficiency calculation, in accordance with SSAP No. 54, for Individual and Group Accident and Health Contracts.
 - The Company uses both a developmental lag method (for short-tailed lines of business) and a tabular reserve method (for long-tailed lines of business) in calculating claim liabilities for accident and health contracts. Loss adjustment expenses are calculated as a percentage of paid claims based on historical experience.
 - The Company has not modified its capitalization policy from the prior period.
 - The Company does not have any pharmaceutical rebates receivable so no estimates are made for these.
- D. Going Concern
After evaluating the Company's ability to continue as a going concern, management was not aware of any conditions or events which raises substantial doubts concerning the Company's ability to continue as a going concern as of the date of the filing of this statement.

NOTE 2 Accounting Changes and Corrections of Errors
There were no material changes in accounting principles or corrections of error in 2020.

NOTE 3 Business Combinations and Goodwill Not applicable

NOTE 4 Discontinued Operations Not applicable

NOTE 5 Investments

- A. Mortgage Loans, including Mezzanine Real Estate Loans
- (1) During 2020, the minimum and maximum rates of interest received for new commercial mortgage loans was none.
- (2) During 2020, the maximum percentage of any one loan to the value of collateral at the time of the loan was none.

	Current Year	Prior Year
(3) Taxes, assessments and any amounts advanced and not included in the mortgage loan total	\$ -	\$ -

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

	Farm	Residential		Commercial		Mezzanine	Total
		Insured	All Other	Insured	All Other		
a. Current Year							
1. Recorded Investment (All)							
(a) Current					\$15,958,231		\$15,958,231
(b) 30 - 59 Days Past Due							\$ -
(c) 60 - 89 Days Past Due							\$ -
(d) 90 - 179 Days Past Due							\$ -
(e) 180+ Days Past Due							\$ -

NOTES TO FINANCIAL STATEMENTS

2. Accruing Interest 90 - 179 Days Past Due								
(a) Recorded Investment							\$	-
(b) Interest Accrued							\$	-
3. Accruing Interest 180+ Days Past Due								
(a) Recorded Investment							\$	-
(b) Interest Accrued							\$	-
4. Interest Reduced								
(a) Recorded Investment							\$	-
(b) Number of Loans							\$	-
(c) Percent Reduced	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%
5. Participant or Co-lender in a Mortgage Loan Agreement								
(a) Recorded Investment						\$15,958,231		\$15,958,231
b. Prior Year								
1. Recorded Investment (All)								
(a) Current	\$ -	\$ -	\$ -	\$ -	\$13,147,492	\$ -	\$ -	\$13,147,492
(b) 30 - 59 Days Past Due	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(c) 60 - 89 Days Past Due	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(d) 90 - 179 Days Past Due	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(e) 180+ Days Past Due	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Due								
(a) Recorded Investment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(b) Interest Accrued	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
3. Accruing Interest 180+ Days Past Due								
(a) Recorded Investment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(b) Interest Accrued	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
4. Interest Reduced								
(a) Recorded Investment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(b) Number of Loans	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(c) Percent Reduced	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%
5. Participant or Co-lender in a Mortgage Loan Agreement								
(a) Recorded Investment	\$ -	\$ -	\$ -	\$ -	\$13,147,492	\$ -	\$ -	\$13,147,492

- (5) Investment in Impaired Loans With or Without Allowance for Credit Losses and Impaired Loans Subject to a Participant or Co-lender Mortgage Loan Agreement for Which the Reporting Entity is Restricted from Unilaterally Foreclosing on the Mortgage Loan:Agreement: None
- (6) Investment in Impaired Loans – Average Recorded Investment, Interest Income Recognized, Recorded Investment on Nonaccrual Status and Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting: None
- (7) Allowance for credit losses: None
- (8) Mortgage Loans Derecognized as a Result of Foreclosure: None
- (9) Interest income on mortgage loans is accrued and recorded net of servicing fees. Interest that is 180 days past due but that is still deemed collectible is accrued, but non-admitted. Any interest deemed uncollectible is written off as a charge against investment income.

- B. Debt Restructuring Not applicable
- C. Reverse Mortgages Not applicable
- D. Loan-Backed Securities

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

- (1) Prepayment assumptions for loan-backed securities were obtained from Hub Data. Call, redemption and sinking fund information for other structured securities were obtained from Bloomberg and bond prospectuses.
- (2) Recognized OTTI, intent to sell or inability to hold None
- (3) Recognized OTTI securities, present value of cash flows less than amortized cost None
- (4) a) The aggregate amount of unrealized losses:
- | | |
|------------------------|--------------|
| 1. Less than 12 Months | \$ (87,157) |
| 2. 12 Months or Longer | \$ (545,473) |
- b) The aggregate related fair value of securities with unrealized losses:
- | | |
|------------------------|--------------|
| 1. Less than 12 Months | \$ 2,807,843 |
| 2. 12 Months or Longer | \$ 2,244,527 |
- (5) Several sources of information are considered when determining if impairments are, or are not, other-than-temporary. These include, but are not limited to, the following: Credit rating agency information related to the security is reviewed, in addition to direct discussions with the rating analyst as needed. Reports from third party research providers and sell-side research analysts are reviewed. Market and trading information on the securities and other like-securities is monitored to assess trends impacting the securities. Market liquidity is analyzed to gauge how much it is impacting prices versus actual credit quality changes. Some sources of information will not be available for all securities. Where applicable, additional information is gathered for collateralized investments. This includes analysis of the individual underlying collateral and estimates of potential future collateral performance. Multiple cash flow scenarios are calculated based on various loss rate assumptions and used to assess the likelihood of future possible impairment.

- E. Dollar Repurchase Agreements and/or Securities Lending Transactions Not applicable
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing Not applicable
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing Not applicable
- H. Repurchase Agreements Transactions Accounted for as a Sale Not applicable
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale Not applicable
- J. Real Estate Not applicable
- K. Low Income Housing tax Credits (LIHTC)
- (1) There are 12 years of remaining unexpired tax credits for low-income housing investments, with a required holding period of 17 years.
- (2) The amount of LIHTC and other tax benefits recognized were \$2,652,570 and \$1,338,344 during 2020 and 2019, respectively.

NOTES TO FINANCIAL STATEMENTS

- (3) The balance of the investment recognized in the statement of financial position at December 31, 2020 and 2019 was \$14,207,854 and \$5,874,847, respectively.
- (4) Currently the LIHTC property is not subject to any regulatory reviews.
- (5) Not applicable
- (6) Not applicable
- (7) Not applicable

L. Restricted Assets

1. Restricted Assets (Including Pledged)

Restricted Asset Category	Gross (Admitted & Nonadmitted) Restricted						
	Current Year					6	7
	1	2	3	4	5		
	Total General Account (G/A)	G/A Supporting S/A Activity (a)	Total Separate Account (S/A) Restricted Assets	S/A Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year	Increase/ (Decrease) (5 minus 6)
a. Subject to contractual obligation for which liability is not shown					\$ -	\$ -	\$ -
b. Collateral held under security lending agreements					\$ -	\$ -	\$ -
c. Subject to repurchase agreements					\$ -	\$ -	\$ -
d. Subject to reverse repurchase agreements					\$ -	\$ -	\$ -
e. Subject to dollar repurchase agreements					\$ -	\$ -	\$ -
f. Subject to dollar reverse repurchase agreements					\$ -	\$ -	\$ -
g. Placed under option contracts					\$ -	\$ -	\$ -
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock					\$ -	\$ -	\$ -
i. FHLB capital stock					\$ -	\$ -	\$ -
j. On deposit with states	\$ 3,610,393				\$ 3,610,393	\$ 3,590,444	\$ 19,949
k. On deposit with other regulatory bodies					\$ -	\$ -	\$ -
l. Pledged collateral to FHLB (including assets backing funding agreements)					\$ -	\$ -	\$ -
m. Pledged as collateral not captured in other categories					\$ -	\$ -	\$ -
n. Other restricted assets					\$ -	\$ -	\$ -
o. Total Restricted Assets	\$ 3,610,393	\$ -	\$ -	\$ -	\$ 3,610,393	\$ 3,590,444	\$ 19,949

- (a) Subset of Column 1
- (b) Subset of Column 3

Restricted Asset Category	Current Year			
	8	9	Percentage	
			10	11
	Total Non-admitted Restricted	Total Admitted Restricted (5 minus 8)	Gross (Admitted & Non-admitted) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (d)
a. Subject to contractual obligation for which liability is not shown		\$ -	0.000%	0.000%
b. Collateral held under security lending agreements		\$ -	0.000%	0.000%
c. Subject to repurchase agreements		\$ -	0.000%	0.000%
d. Subject to reverse repurchase agreements		\$ -	0.000%	0.000%
e. Subject to dollar repurchase agreements		\$ -	0.000%	0.000%
f. Subject to dollar reverse repurchase agreements		\$ -	0.000%	0.000%
g. Placed under option contracts		\$ -	0.000%	0.000%
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock		\$ -	0.000%	0.000%
i. FHLB capital stock		\$ -	0.000%	0.000%
j. On deposit with states		\$ 3,610,393	0.243%	0.251%
k. On deposit with other regulatory bodies		\$ -	0.000%	0.000%
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	\$ -	\$ 3,610,393	0.243%	0.251%

- (c) Column 5 divided by Asset Page, Column 1, Line 28
- (d) Column 9 divided by Asset Page, Column 3, Line 28

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

- M. Working Capital Finance Investments Not applicable
- N. Offsetting and Netting of Assets and Liabilities Not applicable

NOTES TO FINANCIAL STATEMENTS

- O. 5GI SecuritiesNot applicable
- P. Short SalesNot applicable
- Q. Prepayment Penalty and Acceleration Fees

	General Account	Separate Account
1. Number of CUSIPs	51	0
2. Aggregate Amount of Investment Income	\$ 157,713	\$ -

NOTE 6 Joint Ventures, Partnerships and Limited Liability CompaniesNot Applicable

NOTE 7 Investment Income

- A. All investment income due and accrued on bonds with amounts 90 days past due are excluded from surplus.
- B. The total amount of due and accrued investment income excluded from surplus at December 31, 2020 was \$0.

NOTE 8 Derivative InstrumentsNot applicable

NOTE 9 Income Taxes

- A. The components of the net deferred tax asset/(liability) at the end of current period are as follows:
1.

	As of End of Current Period			12/31/2019			Change		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
	Ordinary	Capital	(Col. 1 + 2) Total	Ordinary	Capital	(Col. 4 + 5) Total	(Col. 1 - 4) Ordinary	(Col. 2 - 5) Capital	(Col. 7 + 8) Total
(a) Gross Deferred Tax Assets	\$47,911,000	\$ 8,433,000	\$56,344,000	\$45,976,000	\$ 9,434,000	\$55,410,000	\$ 1,935,000	\$(1,001,000)	\$ 934,000
(b) Statutory Valuation Allowance Adjustment	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	\$47,911,000	\$ 8,433,000	\$56,344,000	\$45,976,000	\$ 9,434,000	\$55,410,000	\$ 1,935,000	\$(1,001,000)	\$ 934,000
(d) Deferred Tax Assets Nonadmitted	\$23,574,000	\$ 7,428,000	\$31,002,000	\$23,951,000	\$ 8,967,000	\$32,918,000	\$ (377,000)	\$(1,539,000)	\$(1,916,000)
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	\$24,337,000	\$ 1,005,000	\$25,342,000	\$22,025,000	\$ 467,000	\$22,492,000	\$ 2,312,000	\$ 538,000	\$ 2,850,000
(f) Deferred Tax Liabilities	\$ 6,703,000	\$ 1,005,000	\$ 7,708,000	\$ 7,761,000	\$ 467,000	\$ 8,228,000	\$(1,058,000)	\$ 538,000	\$ (520,000)
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$17,634,000	\$ -	\$17,634,000	\$14,264,000	\$ -	\$14,264,000	\$ 3,370,000	\$ -	\$ 3,370,000

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

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

	As of End of Current Period			12/31/2019			Change		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
	Ordinary	Capital	(Col. 1 + 2) Total	Ordinary	Capital	(Col. 4 + 5) Total	(Col. 1 - 4) Ordinary	(Col. 2 - 5) Capital	(Col. 7 + 8) Total
Admission Calculation Components SSAP No. 101									
(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	\$17,634,000	\$ -	\$17,634,000	\$14,264,000	\$ -	\$14,264,000	\$ 3,370,000	\$ -	\$ 3,370,000
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date.	\$20,704,000	\$ 1,787,000	\$22,491,000	\$15,401,000	\$ -	\$15,401,000	\$ 5,303,000	\$ 1,787,000	\$ 7,090,000
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX	\$17,631,000	XXX	XXX	\$14,264,000	XXX	XXX	\$ 3,367,000
(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	\$ 6,703,000	\$ 1,005,000	\$ 7,708,000	\$ 7,761,000	\$ 467,000	\$ 8,228,000	\$(1,058,000)	\$ 538,000	\$ (520,000)
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$24,337,000	\$ 1,005,000	\$25,342,000	\$22,025,000	\$ 467,000	\$22,492,000	\$ 2,312,000	\$ 538,000	\$ 2,850,000

3.
- 2020

2019

a. Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount.1135.000%1035.000%

b. Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above.\$ 128,239,079\$ 103,787,617

4.
- | | As of End of Current Period | | 12/31/2019 | | Change | |
|---|-----------------------------|--------------|---------------|--------------|--------------------------|-------------------------|
| | (1) | (2) | (3) | (4) | (5) | (6) |
| | Ordinary | Capital | Ordinary | Capital | (Col. 1 - 3)
Ordinary | (Col. 2 - 4)
Capital |
| Impact of Tax Planning Strategies: | | | | | | |
| (a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage. | | | | | | |
| 1. Adjusted Gross DTAs amount from Note 9A1(c) | \$ 47,911,000 | \$ 8,433,000 | \$ 45,976,000 | \$ 9,434,000 | \$ 1,935,000 | \$ (1,001,000) |

NOTES TO FINANCIAL STATEMENTS

	12/31/2020	12/31/2019	Change
(1) Current income taxes incurred	\$ 9,149,961	\$ 10,187,209	\$ (1,037,248)
(2) Change in deferred income tax (without tax on unrealized gains and losses or foreign exchange gains and losses)	\$ (1,393,000)	\$ (5,524,000)	\$ 4,131,000
(3) Total income tax reported	\$ 7,756,961	\$ 4,663,209	\$ 3,093,752
(4) Net gain from operations before federal income tax on realized gains	\$ 45,536,794	\$ 41,651,373	\$ 3,885,421

NOTES TO FINANCIAL STATEMENTS

(5) Realized Capital gains (losses) before federal income tax, after transfer to IMR	\$	(154,793)	\$	560,616	\$	(715,409)
(6) Income before taxes	\$	45,382,001	\$	42,211,989	\$	3,170,012
		21%		21%		
Expected Income tax expense (benefit) at the statutory rate	\$	9,530,220	\$	8,864,518	\$	665,702
(7) Increase (decrease) in actual tax reported resulting from						
a. Tax Adjustment for IMR	\$	79,000	\$	116,000	\$	(37,000)
b. Deferred tax benefit on nonadmitted assets	\$	1,161,000	\$	(3,104,000)	\$	4,265,000
c. Change in Deferred Taxes due to Tax Reform	\$	-	\$	-	\$	-
d. Prior year adjustments	\$	173,000	\$	17,000	\$	156,000
e. Nondeductible expenses	\$	68,000	\$	111,000	\$	(43,000)
f. Tax-Exempt Interest	\$	(387,000)	\$	(227,000)	\$	(160,000)
g. Tax credits	\$	(2,301,000)	\$	(1,067,000)	\$	(1,234,000)
h. Stock based compensation	\$	(568,000)	\$	(48,000)	\$	(520,000)
i. Other	\$	1,741	\$	691	\$	1,050
(8) Total income tax reported	\$	7,756,961	\$	4,663,209	\$	3,093,752

- E. (1) As of 12/31/2020, the Company has no net operating loss or tax credit carryforwards.
(2) The amount of Federal income taxes incurred that are available for recoupment in the event of future net losses are
\$ - for 2020
\$ 407,000 for 2019, and
\$ 198,000 for 2018
(3) The aggregate amount of deposits admitted under Section 6603 of the Internal Revenue Code = None
- F. (1) The Company's federal income tax return is consolidated with its ultimate parent, Globe Life Inc. (formerly Torchmark Corporation), as well as its affiliated subsidiaries including Liberty National Life Insurance Company, American Income Life Insurance Company, United American Insurance Company, National Income Life Insurance Company, Globe Life And Accident Insurance Company, TMK Buildings Corporation, Brown Service Funeral Homes Company, Inc., Torchmark Insurance Agency, Inc., Specialized Advertising Group, Inc., Globe Marketing Services, Inc., AILIC Receivables Corporation, American Income Marketing Services, Inc., Liberty National Auto Club, Inc., Globe Life Insurance Agency, Inc., Globe Life Insurance Company of New York (formerly First United American Insurance Company), TMK Re, Ltd., and American Life and Health Group, Inc.

(2) Each Company pays a share of the total tax liability determined as if computed separately. Companies that would report a loss are reimbursed to the extent that their losses are utilized by affiliates with taxable income. The calculation is made pursuant to Federal Income Tax Regulation 1.1552-1(a)(2) and 1.1502-33(d)(3)(i).
- G. Federal or foreign income tax loss contingencies None
- H. Repatriation Transition Tax (RTT)
The Company doesn't owe RTT for the year
- I. Alternative Minimum Tax (AMT) Credit
The Company had no AMT credit carryforwards as of the beginning of the year. As a result, no AMT credits were recovered during the year or exists as of the end of the year.

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

- A. Common stock ownership of the Company and affiliates is shown in the chart on Schedule Y. All companies are 100% owned except where indicated otherwise.
- B. The Company declared common stock dividends to Globe Life And Accident Insurance Company in the amounts of \$9,029,779, \$4,000,000, \$3,495,000, \$5,200,000 and \$2,813,046 on March 13, March 26, April 16, July 1 and October 16, 2020, respectively

The Company declared an extraordinary cash dividend to Globe Life And Accident Insurance Company in the amount of \$7,846,175 on October 16, 2020.

Globe Life Inc. loaned the Company \$5,000,000 on April 3, 2020 at an interest rate of 3.25%. The borrowing was repaid in full on August 5, 2020.

Globe Life Inc. loaned the Company \$10,000,000 on April 14, 2020 at an interest rate of 3.25%. A partial payment of \$5,000,000 was repaid on the borrowing on September 24, 2020. The remaining balance was repaid in full on October 13, 2020.

Globe Life Inc. loaned the Company \$10,000,000 on April 24, 2020 at an interest rate of 3.25%. The borrowing was repaid in full on October 23, 2020.

Globe Life Inc. loaned the Company \$5,000,000 on May 12, 2020 at an interest rate of 3.25%. The borrowing was repaid in full on November 10, 2020.

Globe Life Inc. loaned the Company \$7,000,000 on October 13, 2020 at an interest rate of 3.25%. The borrowing was repaid in full on December 15, 2020.

Globe Life Inc. loaned the Company \$5,000,000 on October 23, 2020 at an interest rate of 3.25%. The borrowing was repaid in full on December 15, 2020.

Globe Life Inc. loaned the Company \$5,000,000 on November 10, 2020 at an interest rate of 3.25%. The borrowing was repaid in full on December 15, 2020.

Globe Life Inc. loaned the Company \$8,000,000 on November 16, 2020 at an interest rate of 3.25%. The borrowing was repaid in full on December 17, 2020.

On December 15, 2020, the Company sold \$10,000,000 of agents balances to its ultimate parent, Globe Life Inc., for a purchase price of \$9,826,161, discounted at 3.25% interest. As of December 31, 2020, the entire balances sold were outstanding.

in 2020, Globe Life And Accident Insurance Company made a capital contribution to the Company in the amount of \$15,000,000. See Note 22 for additional discussion.
- C. Not Applicable
- D. The Company has the following inter-Company Receivable
Globe Life And Accident Insurance Company - \$15,000,000. See Note 22 for additional discussion.
- E. Guarantees of undertaking - None
- F. The Company's investment management function is managed by Globe Life Inc. under a master services agreement with Globe Life Inc. discussed below. The fee for these services is based on the total value of the securities managed. For 2020, investment fees paid to Globe Life Inc. totaled \$2,208,000.

The Company has a separate service agreement with Globe Life Inc. to provide a wide variety of possible services. The Globe Life Inc. agreement is a master services agreement with the Company and the other insurance subsidiaries. The fee charged to the Company is based on the ratio of certain expenses at the affiliate level to comparable Globe Life Inc. consolidated expenses applied to Globe Life Inc.'s total operating expenses for the prior year. For 2020, management fees paid to Globe Life Inc. totaled \$3,180,000.

The Company is party to a services agreement by and between American Income Life Insurance Company, Globe Life And Accident Insurance Company, Liberty National Life Insurance Company, Globe Life Inc. and United American Insurance Company.
- G. Nature of relationships that could affect operations - None
- H. The Company does not own shares of stock of an upstream or ultimate parent

NOTES TO FINANCIAL STATEMENTS

- I. Investment in affiliates greater than 10% of admitted assets - None
- J. Write-downs for impairments of investments in affiliates - None
- K. Foreign insurance subsidiary valued using CARVM - Not applicable
- L. Downstream holding company valued using look-through method - Not applicable
- M. All SCA Investments Not applicable
- N. Investment in Insurance SCAs Not applicable
- O. SCA or SSAP 48 Entity Loss Tracking Not applicable

NOTE 11 Debt

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

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

- A. Defined Benefit Plan Not applicable
- B. Description of investment policies and strategies Not applicable
- C. The fair value of each class of plan assets Not applicable
- D. Rate of return assumptions Not applicable
- E. Defined Contribution Plan
The Company participates in a defined contribution thrift plan covering substantially all employees. The liability for the plan is maintained at the holding compny level. The thrift plan is funded by employee contributions that are matched by the Company based on percentage of such contributions. Company contributions were \$201,084 and \$211,913 for the years ended December 31, 2020 and 2019, respectively.
- F. Multiemployer Plans Not applicable
- G. Consolidated/Holding Company Plans
The Company participates in a Supplemental Executive Retirement Plan (SERP) which provides a limited number of executives an additional supplemental defined pension benefit. The supplemental benefit is based on the participant's qualified plan benefit without consideration to regulatory limits on compensation and benefit payments applicable to qualified plans, except that eligible compensation is capped at \$1 million. The Company's liability for the plan was \$994,338 and \$621,257 at December 31, 2020 and 2019, respectively. Pension costs is determined in the same manner as the defined benefit plan. Expense recognized for the plan was \$43,606 and \$23,127 for the years ended December 31, 2020 and 2019, respectively.
- H. Postemployment Benefits and Compensated Absences
Compensated absences/vacation pay is recorded in accordance with SSAP No. 11.
- I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)
The Company does not offer postretirement benefits to retired employees over age sixty-five. Therefore, passage of the Medical Prescription Drug Improvement and Modernization Act of 2003 has no effect on its benefit obligations

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

- A. The Company has 1,000 common shares authorized and 213 common shares issued and outstanding. The par value is \$12,000 per share.
- B. The Company has no preferred shares.
- C. Statutory regulations in the state of Ohio limit the payment of dividends by stock life insurance companies in any one year to an amount equal to the greater of statutory net income from the previous year or 10% of surplus as regards policyholders reported for the previous year, subject to the amount of unassigned surplus reported for the previous year. Dividends in excess of these limitations are not available without special approval by the Ohio Department of Insurance. The maximum dividend that can be made without prior approval in 2021 is \$35,727,149.
- D. Dividend paid in 2020 - See Note 10.
- E. Amount of ordinary dividends that may be paid - See C. above
- F. Restrictions on unassigned funds - Not applicable
- G. Mutual surplus advances - Not applicable
- H. The Company does not hold any of its own stock.
- I. The Company has no special surplus funds in 2020.
- J. The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is \$ 93,277

- K. The Company issued the following surplus debentures or similar obligations:

1	2		4	5	6	7	8
Item Number	Date Issued	3 Interest Rate	Original Issue Amount of Note	Is Surplus Note Holder a Related Party (Y/N)	Carrying Value of Note Prior Year	Carrying Value of Note Current Year*	Unapproved Interest And/Or Principal
0001	09/30/2016	5.250%	\$ 15,000,000	Yes	\$ 15,000,000	\$ 15,000,000	\$ -
0002	09/30/2016	5.250%	\$ 15,000,000	Yes	\$ 15,000,000	\$ 15,000,000	\$ -
Total	XXX	XXX	\$ 30,000,000	XXX	\$ 30,000,000	\$ 30,000,000	\$ -

* Total should agree with Page 3, Line 32.

1	9	10	11	12	13	14
Item Number	Current Year Interest Expense Recognized	Life-To-Date Interest Expense Recognized	Current Year Interest Offset Percentage (not including amounts paid to a 3rd party liquidity provider)	Current Year Principal Paid	Life-To-Date Principal Paid	Date of Maturity
0001	\$ 787,500	\$ 3,314,063	0.000%	\$ -	\$ -	09/30/2046
0002	\$ 787,500	\$ 3,314,063	0.000%	\$ -	\$ -	09/30/2046
Total	\$ 1,575,000	\$ 6,628,126	XXX	\$ -	\$ -	XXX

NOTES TO FINANCIAL STATEMENTS

1	15	16	17	18	19
Item Number	Are Surplus Note Payments Contractually Linked? (Y/N)	Surplus Note Payments Subject to Administrative Offsetting Provisions? (Y/N)	Were Surplus Note Proceeds Used to Purchase an Asset Directly From the Holder of the Surplus Note? (Y/N)	Is Asset Issuer a Related Party (Y/N)	Type of Assets Received Upon Issuance
0001	No	No	No	No	Not Applicable
0002	No	No	No	No	Not Applicable
Total	XXX	XXX	XXX	XXX	XXX

1	20	21	22
Item Number	Principal Amount of Assets Received Upon Issuance	Book/Adjusted Carry Value of Assets	Is Liquidity Source a Related Party to the Surplus Note Issuer? (Y/N)
0001	\$ -	\$ -	No
0002	\$ -	\$ -	No
Total	\$ -	\$ -	XXX

The surplus note in the amount of \$15,000,000, listed above as item 0001, is held by American Income Life Insurance Company (an affiliate).

The surplus note in the amount of \$15,000,000, listed above as item 0002, is held by Liberty National Life Insurance Company (an affiliate).

The surplus notes have the following repayment conditions and restrictions:

1. Payments of principal and interest can only be made from the issuer's available surplus when the amount of surplus remaining after repayment is equal to or greater than the surplus existing immediately after the issuance of the security.
2. Payments can only be made with the prior approval of the Ohio Department of Insurance. Semi-annual interest payments are due June 15 and December 15 and commenced on June 15, 2017.

The surplus notes are direct, unsecured obligations of the Company. In the event of liquidation, the notes are subordinate to holders of policy claims, other indebtedness and other creditor claims.

The surplus notes were issued pursuant to Rule 144A under the Securities Act of 1933 in exchange for cash.

L. The impact of any restatement due to prior quasi-reorganizations is as follows: Not applicable

M. Date of quasi-reorganization Not applicable

NOTE 14 Liabilities, Contingencies and Assessments

A. Contingent Commitments

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

(1) Total commitments: \$ 74,641,850

(2) None

(3) None

B. Assessments

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

(2) a. Assets recognized from paid and accrued premium tax offsets and policy surcharges prior year-end \$ 952,696

b. Decreases current year:

Premium Tax offset applied \$ 275,166

Reversal of prior year accrual \$ 41,931

c. Increases current year:

Assessments paid \$ 134,657

d. Assets recognized from paid and accrued premium tax offsets and policy surcharges current year-end \$ 770,256

(3)

a. Discount Rate Applied 0.0%

b. The Undiscounted and Discounted Amount of the Guaranty Fund Assessments and Related Assets by Insolvency None

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

C. Gain Contingencie None

D. Claims related extra contractual obligations and bad faith losses stemming from lawsuits Not applicable

E. Joint and Several Liabilities None

F. All Other Contingencies

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

NOTES TO FINANCIAL STATEMENTS

NOTE 15 Leases

- A. Lessee Operating Lease:
- (1) The Company has entered into various operating leases. Lease expense for 2020 and 2019 was \$696,516 and \$739,885 respectively.
- (2) a. At December 31, 2020, the minimum aggregate rental commitments are as follows:

	Operating Leases
1. 2021	\$ 454,762
2. 2022	\$ 369,719
3. 2023	\$ 373,788
4. 2024	\$ 375,696
5. 2025	\$ 373,285
6. Total	\$ 3,188,143

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

- B. Lessor Leases None

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

None

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

- A. Transfers of receivables reported as sales None
- B. Transfer and servicing of financial assets None
- C. Wash Sales None

NOTE 18 Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans None

NOTE 19 Direct Premium Written/Produced by Managing General Agents/Third Party Administrators None

NOTE 20 Fair Value Measurements

- A. Fair values for securities are based on quoted market prices when available and otherwise are based on quoted market prices of comparable instruments in active markets, quotes in inactive markets, or other observable criteria.

(1) Fair Value Measurements at Reporting Date

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value					
Cash equivalents - money market mutual funds				\$ 17,622,743	\$ 17,622,743
Total assets at fair value/NAV	\$ -	\$ -	\$ -	\$ 17,622,743	\$ 17,622,743

- (2) Fair Value Measurements in (Level 3) of the Fair Value hierarchy
As of year end, the Company did not have securities categorized as Level 3 that are measured and reported at fair value on the statement of financial position.
- (3) During the year, the Company did not have any transfers into or out of Level 3 for assets measured and reported at fair value on the statement of financial position.
- (4) The majority of the Company's securities are not actively traded and direct quotes are not generally available. Management therefore determines the fair values of securities after consideration of data provided by third-party pricing services, independent broker/dealers, and other resources. Prices provided by third-party pricing services are not binding offers but are estimated exit values. They are based on observable market data inputs which can vary by security type. Such inputs include benchmark yields, available trades, broker/dealer quotes, issuer spreads, benchmark securities, bids, offers and other inputs that are corroborated in the market. All fair value measurements based on prices determined with observable market data are reported as Level 1 or Level 2 measurements. When third-party vendor prices are not available, the Company attempts to obtain valuations from other sources, including but not limited to broker/dealers, broker quotes, and prices on comparable securities.

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

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

- B. Fair Value combination disclosure None

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

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	\$ 1,552,422,269	\$ 1,281,666,537		\$ 1,488,770,985	\$ 63,651,284		
Mortgage loans ***	\$ 15,958,231	\$ 15,958,231			\$ 15,958,231		
Cash, cash equivalents & short term investments	\$ 7,823,928	\$ 7,823,928	\$ (9,798,815)			\$ 17,622,743	
Policy loans	\$ 176,107	\$ 176,107					\$ 176,107
Other invested assets - surplus notes	\$ 47,620,663	\$ 39,087,277		\$ 47,620,663			
Other invested assets - non guaranteed LIHTC's	\$ 22,971,786	\$ 14,207,854			\$ 22,971,786		
Receivable - affiliated	\$ 15,000,000	\$ 15,000,000			\$ 15,000,000		

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

NOTES TO FINANCIAL STATEMENTS

D. Not Practicable to Estimate Fair Value

Type or Class of Financial Instrument	Carrying Value	Effective Interest Rate	Maturity Date	Explanation
Policy loans	\$ 176,107	0.000%		There 's no reliable market for these type of instruments.

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

NOTE 21 Other Items

- A. Unusual or Infrequent Items None
- B. Troubled Debt Restructuring: Debtors None
- C. Other Disclosures

Exhibit 6 - Active Life Reserve, Line 2, Additional Contract Reserves, Valuation Standard

Statement of Reserve Bases, Interest Rates and Methods

A. Interest Rates

All Products

- Issue Years 1989 through 1992 - 5.5%
- Issue Years 1993 through 1994 - 5.0%
- Issue Years 1995 through 2005 - 4.5%
- Issue Years 2006 through 2012 - 4.0%
- Issue Years 2013 through 2020 - 3.5%

B. Mortality and Lapse

Issue Years 1989 through 2005

- 1980 Commissioners Standard Ordinary Mortality
- Lapse Rates - Lesser of 8% or 80% of anticipated total termination rates

Issue Years 2006 through 2020

- 2001 Commissioners Standard Ordinary Mortality Joint 70% Male 15% Female 15%
- Lapse Rates - Lesser of 8% or 80% of anticipated total termination rates

C. Morbidity

Cancer Benefits

- Issue Years 1989 through 2017 - 1985 NAIC Cancer Claim Cost Table
- Issue Years 2018 through 2020 - 2016 NAIC Cancer Claim Cost Valuation Table

Other Benefits - 1974 Medical Expense Tables, 1959 Accidental Death Benefits Table, and where no valuation table is specified, anticipated experience plus valuation load

D. Reserve Methods

Return of Premium and Cash Value Benefits

- Issue Years 1989 through 1991 - Two year full preliminary term method, mid-terminal reserves
- Issue Years 1992 through 2020 - Two year full preliminary term method, when maturity period is 20 years and greater, one year full preliminary term method otherwise. Mid-terminal reserves.
- All Other Benefits - Two year full preliminary term method, mid-terminal reserves

E. Determination of Additional Reserve

The additional reserve is calculated as the tabular reserve using the bases, interest rates and methods described above, plus the net unearned premiums and less the gross unearned premiums.

D. Business Interruption Insurance Recoveries None

E. State Transferable and Non-transferable Tax Credits None

F. Subprime Mortgage Related Risk Exposure

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

G. Retained Assets None

H. Insurance-Linked Securities (ILS) Contracts None

I. The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy

None

NOTE 22 Events Subsequent

Type I - Recognized Subsequent Events:

Subsequent events have been considered through 02/24/2021 for the statutory statement issued on 02/25/2021

The Company accrued a receivable from its parent, Globe Life And Accident Insurance Company, for a capital contribution of \$15,000,000 with an effective date of 12/31/2020. The cash was settled on 02/16/2021. The transaction received approval from the Ohio Department of Insurance, and therefore, the receivable was reported as an admitted asset at 12/31/2020.

Type II - Nonrecognized Subsequent Events:

		Current Year	Prior Year
A. Did the reporting entity write accident and health insurance premium that is subject to Section 9010 of the Federal Affordable Care Act (YES/NO)?	No		
B. ACA fee assessment payable for the upcoming year		\$ -	\$ -
C. ACA fee assessment paid		\$ -	\$ -
D. Premium written subject to ACA 9010 assessment		\$ -	\$ -
E. Total Adjusted Capital before surplus adjustment (Five-Year Historical Line 30)		\$ -	\$ -
F. Total Adjusted Capital after surplus adjustment (Five-Year Historical Line 30 minus 22B above)		\$ -	\$ -

NOTES TO FINANCIAL STATEMENTS

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 - Genetal Interrogatories
(1) Are any of the reinsurers, listed in Schedule S as non-affiliated, owned in excess of 10% or controlled, either directly or indirectly, by the Company or by any representative, officer, trustee or director of the Company? Yes () No (X)
(2) Have any of the 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) which is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor or an insured or any other person not primarily engaged in the insurance business? Yes () No (X)

Section 2 - Ceded Reinsurance Report - Part A
(1) Does the Company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credits? Yes () No (X)
(2) Does the Company have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts which, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies? Yes () No (X)

Section 3 - Ceded Reinsurance Report - Part B
(1) What is the estimated amount of the aggregate reduction in surplus, for agreements, not 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. \$638,333.
(2) Have any new agreement been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts which were in-force or which had existing reserves established by the Company as of the effective date of the agreement? Yes () No (X)

B. Uncollectible Reinsurance None

C. Commutation of Reinsurance Reflected in Income and Expenses. Not Applicable

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

E. Reinsurance of Variable Annuity contracts None

F. Reserve Credit for Variable Annuities None

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

H. Reinsurance Credit

(1) Disclose any reinsurance contracts (or multiple contracts with the same reinsurer or its affiliates) subject to A-791 that includes a provision, which limits the reinsurer's assumption of significant risks identified as in A-791. Examples of risk limiting features include provisions such as a deductible, a loss ratio corridor, a loss cap, an aggregate limit or similar effect. If true, indicate the number of reinsurance contracts to which such provisions apply. For contracts subject to A-791, indicate if deposit accounting was applied for all contracts, which limit significant risks.

There are no such contracts.

(2) Disclose any reinsurance contracts (or multiple contracts with the same reinsurer or its affiliates) not subject to A-791, for which reinsurance accounting was applied and includes a provision that limits the reinsurer's assumption of risk. Examples of risk limiting features include provisions such as a deductible, a loss ratio corridor, a loss cap, an aggregate limit or similar effect. If true, indicate the number of reinsurance contracts to which such provisions apply. If affirmative, indicate if the reinsurance credit was reduced for the risk limiting features.

There are no such contracts.

(3) Disclose if any reinsurance contracts contain features (except reinsurance contracts with a federal or state facility) described below which result in delays in payment in form or in fact:

• Provisions which permit the reporting of losses, or settlements are made, less frequently than quarterly or payments due from the reinsurer are not made in cash within ninety (90) days of the settlement date (unless there is no activity during the period).

There are no such contracts.

• Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity.

There are no such contracts.

(4) Disclose if the reporting entity has reflected reinsurance accounting credit for any contracts not subject to Appendix A-791 and not yearly renewable term, which meet the risk transfer requirements of SSAP No. 61R and identify the type of contracts and the reinsurance contracts.

• Assumption Reinsurance – new for the reporting period.

There are no such contracts

(5) Disclose if the reporting entity ceded any risk which is not subject to A-791 and not yearly renewable term reinsurance, under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:

• Accounted for that contract as reinsurance under statutory accounting principles (“SAP”) and as a deposit under generally accepted accounting principles (“GAAP”); or

There are no such contracts.

• Accounted for that contract as reinsurance under GAAP and as a deposit under SAP.

There are no such contracts.

(6) If affirmative disclosure is required for Paragraph 23H(5) above, explain why the contract(s) is treated differently for GAAP and SAP.

Not Applicable.

NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination

- A. Method of estimating premium adjustments Not applicable

B. Adjustment to written or to earned premiums Not applicable

C. Amount and percent of net retrospective premiums Not applicable

D. Medical loss ratio rebates required pursuant to the Public Health Service Act. Not applicable

E. Risk Sharing Provisions of the Affordable Care Act

NOTES TO FINANCIAL STATEMENTS

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

Yes ☐ No ☒
- (2) Impact of Risk Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year

Not applicable
- (3) Roll forward of prior year ACA risk sharing provisions for the following asset (gross of any nonadmission) and liability balances along with the reasons for adjustments to prior year balance

Not applicable
- (4) Roll-Forward of Risk Corridors Asset and Liability Balances by Program Benefit Year

Not applicable
- (5) ACA Risk Corridors Receivable as of Reporting Date

Not applicable

NOTE 25 Change in Incurred Losses and Loss Adjustment Expenses

- A. Reserves on accident and health contracts for incurred losses and loss adjustment expenses attributable to insured events or prior years developed during 2020. See Schedule H,Part 3 and the Five Year Historical Data. Original estimates are increased or decreased as additional information becomes available regardig individual claims. However, no significant trends or unanticipated events were noted in 2020. None of the Company's accident and health contracts are subject to retrospective rating or experience refunds.
- B. No change

NOTE 26 Intercompany Pooling ArrangementsNone

NOTE 27 Structured SettlementsNone

NOTE 28 Health Care ReceivablesNot applicable

NOTE 29 Participating PoliciesNone

NOTE 30 Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves\$-
2. Date of the most recent evaluation of this liability12/31/2020
3. Was anticipated investment income utilized in the calculation?Yes ☐ No ☒

NOTE 31 Reserves for Life Contracts and Annuity Contracts

- (1) The Company waives deduction of deferred fractional premiums upon death of insured. It returns any portion of the final premium beyond the date of death where required only. Surrender values are not promised in excess of the legally computed reserves.
- (2) The Company does not currently issue substandard policies and does not have any in force.
- (3) As of December 31, 2020, the Company had no insurance in force for which the gross premiums are less than the net premiums according to the standard valuation set by the State of Ohio.
- (4) The Tabular Interest has been determined by formula as described in the instructions.
The Tabular Less Actual Reserve Released has been determined by formula as described in the instructions.
The Tabular Cost has been determined by formula as described in the instructions.
- (5) For the determination of Tabular Interest on funds not involving life contingencies for each valuation rate of interest, the tabular interest is calculated as one hundredth of the product of such valuation rate of interest times the mean of the amount of funds subject to such valuation rate of interest held at the beginning and end of the year of valuation.
- (6) The details for other changes:None

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

- A. Individual AnnuitiesNone
- B. Group AnnuitiesNone
- C. Deposit-Type Contracts (no life contingencies):None
- D. Life & Accident & Health Annual Statement:None

NOTE 33 Analysis of Life Actuarial Reserves by Withdrawal Characteristics

	Account Value	Cash Value	Reserve
A. General Account			
(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		\$4,512,627	\$11,925,003
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	\$94,511
c. Disability - Active Lives	XXX	XXX	
d. Disability - Disabled Lives	XXX	XXX	
e. Miscellaneous Reserves	XXX	XXX	
(3) Total (gross: direct + assumed)	\$-	\$4,512,627	\$12,019,514
(4) Reinsurance ceded			\$15,871
(5) Total (net) (3) - (4)	\$-	\$4,512,627	\$12,003,643
B. Separate Account with Guarantees - Not applicable			
C. Separate Account Nonguaranteed - Not applicable			
D. Life & Accident & Health Annual Statement:		Amount	

NOTES TO FINANCIAL STATEMENTS

(1) Exhibit 5, Life Insurance Section, Total (net)	\$ 11,909,132
(2) Exhibit 5, Accidental Death Benefits Section, Total (net)	\$ 94,511
(3) Exhibit 5, Disability - Active Lives Section, Total (net)	\$ -
(4) Exhibit 5, Disability - Disabled Lives Section, Total (net)	\$ -
(5) Exhibit 5, Miscellaneous reserves Section, Total (net)	\$ -
(6) Subtotal	\$ 12,003,643
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))	\$ 12,003,643

NOTE 34 Premium & Annuity Considerations Deferred and Uncollected

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

Type	Gross	Net of Loading
(1) Industrial		
(2) Ordinary new business	\$ 51,816	\$ 8,343
(3) Ordinary renewal	\$ 1,501,485	\$ 1,216,165
(4) Credit Life		
(5) Group Life		
(6) Group Annuity		
(7) Totals	\$ 1,553,301	\$ 1,224,508

NOTE 35 Separate Accounts

A. Separate Account Activity Not applicable

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 2019 was \$1,455,468 and \$1,296,325, respectively.

The Company incurred \$5,827,899 and paid \$5,668,757 of claim adjustment expenses in the current year, of which \$1,075,479 of paid amount was attributable to insured or covered events of prior years.

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

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?
If yes, complete Schedule Y, Parts 1, 1A and 2

Yes ☒ No ☐

1.2

If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent, or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations?

Yes ☒ No ☐ N/A ☐

1.3

State Regulating?

Ohio

1.4

Is the reporting entity publicly traded or a member of a publicly traded group?

Yes ☒ No ☐

1.5

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

0000320335

2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes ☐ No ☒

2.2

If yes, date of change:

3.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2019

3.2

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

12/31/2015

3.3

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

02/28/2017

3.4

By what department or departments?
Ohio

3.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

Yes ☐ No ☐ N/A ☒

3.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes ☐ No ☐ N/A ☒

4.1

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

Yes ☐ No ☒
Yes ☐ No ☒

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?
4.22 renewals?

Yes ☐ No ☒
Yes ☐ No ☒

5.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?
If yes, complete and file the merger history data file with the NAIC.

Yes ☐ No ☒

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 ☒

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 ☒

7.2

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

1 Nationality	2 Type of Entity

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America

GENERAL INTERROGATORIES

8.1

Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes [] No [X]

8.2

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

8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes [] No [X]

8.4

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

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

9.

What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?

Deloitte & Touche, LLP
2200 Ross Avenue, Suite 1600
Dallas, TX 75201

10.1

Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation?

Yes [] No [X]

10.2

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

10.3

Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation?

Yes [] No [X]

10.4

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

10.5

Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws?

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

10.6

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

11.

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

Barbara Sue Emig, Officer
Family Heritage Life Insurance Company of America
6001 East Royalton Road, Suite 200
Cleveland, OH 44147-3529

12.1

Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?

Yes [X] No []

12.11

Name of real estate holding company

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

12.12

Number of parcels involved

12.13

Total book/adjusted carrying value

\$ 67,213,848

12.2

If, yes provide explanation:

The Company invests in securities of real estate holding companies and REITS.

13.

FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:

13.1

What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?

13.2

Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located?

Yes [] No []

13.3

Have there been any changes made to any of the trust indentures during the year?

Yes [] No []

13.4

If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?

Yes [] No [] N/A []

14.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?

Yes [X] No []

a.

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

b.

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

c.

Compliance with applicable governmental laws, rules and regulations;

d.

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

e.

Accountability for adherence to the code.

14.11

If the response to 14.1 is No, please explain:

14.2

Has the code of ethics for senior managers been amended?

Yes [] No [X]

14.21

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

14.3

Have any provisions of the code of ethics been waived for any of the specified officers?

Yes [] No [X]

14.31

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America

GENERAL INTERROGATORIES

- 15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? Yes ☐ No ☒
- 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 ☒ 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 ☒ 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 ☒ 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 ☒
- 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 ☒
- 21.2 If yes, state the amount thereof at December 31 of the current year:

21.21 Rented from others\$

21.22 Borrowed from others\$

21.23 Leased from others\$

21.24 Other \$
- 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 ☒
- 22.2 If answer is yes:

22.21 Amount paid as losses or risk adjustment \$

22.22 Amount paid as expenses \$

22.23 Other amounts paid \$
- 23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes ☒ No ☐
- 23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$ 15,000,000

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. \$
- 24.05 For the reporting entity's securities lending program, report amount of collateral for other programs. \$
- 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 ☒

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company 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	\$	
		25.22 Subject to reverse repurchase agreements	\$	
		25.23 Subject to dollar repurchase agreements	\$	
		25.24 Subject to reverse dollar repurchase agreements	\$	
		25.25 Placed under option agreements	\$	
		25.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock	\$	
		25.27 FHLB Capital Stock	\$	
		25.28 On deposit with states	\$	3,610,393
		25.29 On deposit with other regulatory bodies	\$	
		25.30 Pledged as collateral - excluding collateral pledged to an FHLB	\$	
		25.31 Pledged as collateral to FHLB - including assets backing funding agreements	\$	
		25.32 Other	\$	

25.3 For category (25.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount

26.1 Does the reporting entity have any hedging transactions reported on Schedule DB?

Yes [] No [X]

26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?

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

If no, attach a description with this statement.

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

26.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity? ..

Yes [] No [X]

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

26.41 Special accounting provision of SSAP No. 108	Yes [] No []
26.42 Permitted accounting practice	Yes [] No []
26.43 Other accounting guidance	Yes [] No []

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

Yes [] No []

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

27.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity?

Yes [] No [X]

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

\$

28. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?

Yes [X] No []

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

1 Name of Custodian(s)	2 Custodian's Address
The Northern Trust Company	50 South LaSalle Street, Chicago, IL 60603

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America

GENERAL INTERROGATORIES

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

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

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

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

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

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

1 Name of Firm or Individual	2 Affiliation
Globe Life Inc.	A.....
Prudential Private Placement Investors, LP	U.....
Blackrock Investment Management, LLC	U.....
Alliance Bernstein, LP	U.....

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

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

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

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
	Globe Life Inc.	5493001JFHK00PP6XA71	Not Registered	DS.....
106442	Prudential Private Placement Investors, LP		U.S. Securities & Exchange Commission	NO.....
108928	Blackrock Investment Management, LLC		U.S. Securities & Exchange Commission	NO.....
108477	Alliance Bernstein, LP	0JK55UGWIS1NF3X7KLQ85	U.S. Securities & Exchange Commission	NO.....

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

29.2 If yes, complete the following schedule:

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America

GENERAL INTERROGATORIES

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

	1	2	3
	Statement (Admitted) Value	Fair Value	Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1 Bonds	1,281,666,537	1,552,422,269	270,755,732
30.2 Preferred stocks	0		0
30.3 Totals	1,281,666,537	1,552,422,269	270,755,732

30.4 Describe the sources or methods utilized in determining the fair values:
The Company primarily used ICE and Refinitiv (which are third party vendors) and certain private placements were valued by a broker

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

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

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

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

32.2 If no, list exceptions:
.....

33. By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:
a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
b. Issuer or obligor is current on all contracted interest and principal payments.
c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.
Has the reporting entity self-designated 5GI securities? Yes [] No [X]

34. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:
a. The security was purchased prior to January 1, 2018.
b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.
Has the reporting entity self-designated PLGI securities? Yes [] No [X]

35. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:
a. The shares were purchased prior to January 1, 2019.
b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
d. The fund only or predominantly holds bonds in its portfolio.
e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.
Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [] No [X]

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 [] N/A [X]

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America

GENERAL INTERROGATORIES

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?\$870,414

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
Phillips Murrah PC .....	.....372,006
.....

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 Family Heritage Life Insurance Company of America

GENERAL INTERROGATORIES

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

Life, Accident and Health Companies/Fraternal Benefit Societies:

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

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

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

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. \$

1.5 Indicate total incurred claims on all Medicare Supplement insurance. \$0

1.6 Individual policies:

Most current three years:

1.61 Total premium earned \$0

1.62 Total incurred claims \$0

1.63 Number of covered lives 0

All years prior to most current three years

1.64 Total premium earned \$0

1.65 Total incurred claims \$0

1.66 Number of covered lives 0

1.7 Group policies:

Most current three years:

1.71 Total premium earned \$0

1.72 Total incurred claims \$0

1.73 Number of covered lives 0

All years prior to most current three years

1.74 Total premium earned \$0

1.75 Total incurred claims \$0

1.76 Number of covered lives 0

2. Health Test:

	1 Current Year	2 Prior Year
2.1 Premium Numerator	0	0
2.2 Premium Denominator	321,840,335	298,707,093
2.3 Premium Ratio (2.1/2.2)	0.000	0.000
2.4 Reserve Numerator	44,584,165	43,259,062
2.5 Reserve Denominator	1,275,627,203	1,159,172,860
2.6 Reserve Ratio (2.4/2.5)	0.035	0.037

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

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

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

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)"? \$

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: \$

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	

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ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America

GENERAL INTERROGATORIES

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

- 5.1 Do you act as a custodian for health savings accounts? Yes [] No [X]
- 5.2 If yes, please provide the amount of custodial funds held as of the reporting date.\$
- 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.\$
- 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\$4,259,679
- 7.2 Total Incurred Claims\$393,605
- 7.3 Number of Covered Lives14,799

*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 gurantee)
Universal Life (with or without secondary gurantee)
Variable Universal Life (with or without secondary gurantee)

8. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? Yes [X] No []
- 8.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? Yes [] No []

Life, Accident and Health Companies Only:

- 9.1 Are personnel or facilities of this reporting entity used by another entity or entities or are personnel or facilities of another entity or entities used by this reporting entity (except for activities such as administration of jointly underwritten group contracts and joint mortality or morbidity studies)? Yes [X] No []
- 9.2 Net reimbursement of such expenses between reporting entities:
- 9.21 Paid\$20,362,695
- 9.22 Received\$0
- 10.1 Does the reporting entity write any guaranteed interest contracts? Yes [] No [X]
- 10.2 If yes, what amount pertaining to these lines is included in:
- 10.21 Page 3, Line 1\$
- 10.22 Page 4, Line 1\$
11. For stock reporting entities only:
- 11.1 Total amount paid in by stockholders as surplus funds since organization of the reporting entity:\$52,647,000
12. Total dividends paid stockholders since organization of the reporting entity:
- 12.11 Cash\$331,140,999
- 12.12 Stock\$0
- 13.1 Does the reporting entity reinsure any Workers' Compensation Carve-Out business defined as: Yes [] No [X]
- Reinsurance (including retrocessional reinsurance) assumed by life and health insurers of medical, wage loss and death benefits of the occupational illness and accident exposures, but not the employers liability exposures, of business originally written as workers' compensation insurance.
- 13.2 If yes, has the reporting entity completed the Workers' Compensation Carve-Out Supplement to the Annual Statement? Yes [] No []
- 13.3 If 13.1 is yes, the amounts of earned premiums and claims incurred in this statement are:
- | | 1
Reinsurance
Assumed | 2
Reinsurance
Ceded | 3
Net
Retained |
|---|-----------------------------|---------------------------|----------------------|
| 13.31 Earned premium | 0 | 0 | 0 |
| 13.32 Paid claims | 0 | 0 | 0 |
| 13.33 Claim liability and reserve (beginning of year) | 0 | 0 | 0 |
| 13.34 Claim liability and reserve (end of year) | 0 | 0 | 0 |
| 13.35 Incurred claims | 0 | 0 | 0 |

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America

GENERAL INTERROGATORIES

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

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

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

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

Fraternal Benefit Societies Only:

14. Is the reporting entity organized and conducted on the lodge system, with ritualistic form of work and representative form of government? Yes [] No []

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

30.2 If yes, when?
.....

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

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

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

32.3 If yes, explain
.....

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

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

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

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

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

Date	Outstanding Lien Amount
.....

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)	414,420	378,010	345,761	8,970,385	7,018,717
2. Ordinary - term (Line 21, Col. 4, less Line 34, Col. 4)	0	6	30	4,306,355	3,481,177
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)	414,420	378,016	345,791	13,276,740	10,499,894
7.1 Total in force for which VM-20 deterministic/stochastic reserves are calculated	132,041	71,850			XXX
New Business Issued (Exhibit of Life Insurance)					
8. Ordinary - whole life and endowment (Line 34, Col. 2)	87,900	84,898	80,742	83,988	103,967
9. Ordinary - term (Line 2, Col. 4, less Line 34, Col. 2)	0	0	0	0	0
10. Credit life (Line 2, Col. 6)	0	0	0	0	0
11. Group (Line 2, Col. 9)	0	0	0	0	0
12. Industrial (Line 2, Col. 2)	0	0	0	0	0
13. Total (Line 2, Col. 10)	87,900	84,898	80,742	83,988	103,967
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)	4,171,360	3,663,028	(105,526,924)	28,341,465	27,947,753
15.2 Ordinary-individual annuities (Line 20.4, Col. 4)	0	0	0	0	0
16. Credit life (group and individual) (Line 20.4, Col. 5)	0	0	0	0	0
17.1 Group life insurance (Line 20.4, Col. 6)	0	0	0	0	0
17.2 Group annuities (Line 20.4, Col. 7)	0	0	0	0	0
18.1 A & H-group (Line 20.4, Col. 8)	15,449,343	14,793,957	13,466,363	11,753,852	10,124,774
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)	302,219,632	280,250,108	262,109,433	244,171,664	226,545,997
19. Aggregate of all other lines of business (Line 20.4,Col. 11)	0	0	0	0	0
20. Total	321,840,335	298,707,093	170,048,872	284,266,981	264,618,524
Balance Sheet (Pages 2 & 3)					
21. Total admitted assets excluding Separate Accounts business (Page 2, Line 26, Col. 3)	1,435,789,238	1,287,309,169	1,196,815,928	1,290,358,205	1,108,816,313
22. Total liabilities excluding Separate Accounts business (Page 3, Line 26)	1,299,859,089	1,177,568,344	1,071,374,095	1,190,035,284	1,004,588,622
23. Aggregate life reserves (Page 3, Line 1)	12,003,643	10,159,373	8,233,765	133,670,851	76,043,877
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)	1,235,511,279	1,121,544,599	1,018,522,019	918,756,792	814,110,199
25. Deposit-type contract funds (Page 3, Line 3)			0	0	0
26. Asset valuation reserve (Page 3, Line 24.01)	9,942,930	8,310,792	6,677,525	5,315,180	3,928,304
27. Capital (Page 3, Lines 29 and 30)	2,556,000	2,556,000	2,556,000	2,556,950	2,556,950
28. Surplus (Page 3, Line 37)	133,374,149	107,184,825	122,885,833	97,765,971	101,670,741
Cash Flow (Page 5)					
29. Net Cash from Operations (Line 11)	148,688,738	123,918,312	172,065,725	152,631,675	132,988,201
Risk-Based Capital Analysis					
30. Total adjusted capital	145,873,079	118,051,617	132,119,358	105,638,101	108,155,995
31. Authorized control level risk - based capital	11,300,830	10,027,392	9,008,597	7,651,746	6,689,299
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)	93.1	95.5	96.2	96.9	97.5
33. Stocks (Lines 2.1 and 2.2)	0.0	0.0	0.0	0.0	0.0
34. Mortgage loans on real estate(Lines 3.1 and 3.2)	1.2	1.1	1.0	0.3	0.0
35. Real estate (Lines 4.1, 4.2 and 4.3)	0.0	0.0	0.0	0.0	0.1
36. Cash, cash equivalents and short-term investments (Line 5)	0.6	(0.3)	0.3	0.8	0.6
37. Contract loans (Line 6)	0.0	0.0	0.0	0.0	0.0
38. Derivatives (Page 2, Line 7)	0.0	0.0	0.0	0.0	0.0
39. Other invested assets (Line 8)	5.2	3.8	2.5	2.0	1.8
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
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
48. Affiliated mortgage loans on real estate			0	0	0
49. All other affiliated			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
Total Nonadmitted and Admitted Assets					
52. Total nonadmitted assets (Page 2, Line 28, Col. 2)	50,098,538	57,545,132	37,670,582	31,282,107	55,824,470
53. Total admitted assets (Page 2, Line 28, Col. 3)	1,435,789,238	1,287,309,169	1,196,815,928	1,290,358,205	1,108,816,313
Investment Data					
54. Net investment income (Exhibit of Net Investment Income)	55,661,020	52,486,340	50,299,064	45,306,592	38,585,438
55. Realized capital gains (losses) (Page 4, Line 34, Column 1)	25,600	155,536	(1,029,619)	269,730	(66,528)
56. Unrealized capital gains (losses) (Page 4, Line 38, Column 1)	33,286	(62,577)	126,295	136,732	2,377
57. Total of above Lines 54, 55 and 56	55,719,906	52,579,299	49,395,740	45,713,054	38,521,287
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)	733,587	718,322	668,505	697,397	664,154
59. Total contract/certificate benefits - A & H (Lines 13 & 14, Col. 6)	103,456,049	100,266,215	83,516,774	70,490,406	59,903,413
60. Increase in life reserves - other than group and annuities (Line 19, Col. 2)	1,844,270	1,925,608	(125,437,086)	57,626,974	43,063,976
61. Increase in A & H reserves (Line 19, Col. 6)	113,966,679	103,022,580	99,765,227	104,646,593	97,286,710
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	32.7	32.7	53.6	29.4	28.7
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	12.1	13.7	38.2	29.1	32.9
65. A & H loss percent (Schedule H, Part 1, Lines 5 and 6, Col. 2)	68.4	68.8	66.1	68.1	66.4
66. A & H cost containment percent (Schedule H, Pt. 1, Line 4, Col. 2)	0.0	0.0	0.0	0.0	0.0
67. A & H expense percent excluding cost containment expenses (Schedule H, Pt. 1, Line 10, Col. 2)	34.8	34.9	35.5	35.2	34.1
A & H Claim Reserve Adequacy					
68. Incurred losses on prior years' claims - group health (Schedule H, Part 3, Line 3.1 Col. 2)	831,907	638,839	560,371	541,733	439,220
69. Prior years' claim liability and reserve - group health (Schedule H, Part 3, Line 3.2 Col. 2)	1,287,977	1,394,099	1,227,594	846,852	836,390
70. Incurred losses on prior years' claims-health other than group (Schedule H, Part 3, Line 3.1 Col. 1 less Col. 2)	23,762,149	24,844,691	21,040,722	19,210,038	17,156,307
71. Prior years' claim liability and reserve-health other than group (Schedule H, Part 3, Line 3.2 Col. 1 less Col. 2)	27,430,702	27,103,259	24,096,979	21,124,673	19,072,409
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)	339,809	137,931	766,685	627,867	931,728
74. Ordinary - individual annuities (Page 6, Col. 4)	0	0	0	0	0
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	1,197,857	788,340	972,525
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)	35,866,630	31,731,313	30,558,386	21,309,364	21,980,391
82. Aggregate of all other lines of business (Page 6, Col. 8)	0	0	0	0	0
83. Fraternal (Page 6, Col. 7)	0	0			
84. Total (Page 6, Col. 1)	36,206,439	31,869,244	32,522,928	22,725,571	23,884,644

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 Family Heritage Life Insurance Company of America

EXHIBIT OF LIFE INSURANCE

(\$000 Omitted for Amounts of Life Insurance)

	Industrial		Ordinary		Credit Life (Group and Individual)		Group			10 Total Amount of Insurance
	1	2	3	4	5	6	Number of		9	
	Number of Policies	Amount of Insurance	Number of Policies	Amount of Insurance	Number of Individual Policies and Group Certificates	Amount of Insurance	7 Policies	8 Certificates	Amount of Insurance	
1. In force end of prior year	0	0	13,567	378,016	0	0	0	0	0	378,016
2. Issued during year		0	2,959	87,900		0			0	87,900
3. Reinsurance assumed										0
4. Revived during year			2	40						40
5. Increased during year (net)										0
6. Subtotals, Lines 2 to 5	0	0	2,961	87,940	0	0	0	0	0	87,940
7. Additions by dividends during year	XXX		XXX		XXX		XXX	XXX		0
8. Aggregate write-ins for increases	0	0	0	0	0	0	0	0	0	0
9. Totals (Lines 1 and 6 to 8)	0	0	16,528	465,956	0	0	0	0	0	465,956
Deductions during year:										
10. Death			15	522			XXX			522
11. Maturity							XXX			0
12. Disability							XXX			0
13. Expiry			1	606						606
14. Surrender			388	14,931						14,931
15. Lapse			1,229	32,899						32,899
16. Conversion							XXX	XXX	XXX	0
17. Decreased (net)			96	2,578						2,578
18. Reinsurance										0
19. Aggregate write-ins for decreases	0	0	0	0	0	0	0	0	0	0
20. Totals (Lines 10 to 19)	0	0	1,729	51,536	0	0	0	0	0	51,536
21. In force end of year (b) (Line 9 minus Line 20)	0	0	14,799	414,420	0	0	0	0	0	414,420
22. Reinsurance ceded end of year	XXX		XXX	20,545	XXX		XXX	XXX		20,545
23. Line 21 minus Line 22	XXX	0	XXX	393,875	XXX	(a) 0	XXX	XXX	0	393,875
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	0
0899. TOTALS (Lines 0801 thru 0803 plus 0898) (Line 8 above)	0	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	0
1999. TOTALS (Lines 1901 thru 1903 plus 1998) (Line 19 above)	0	0	0	0	0	0	0	0	0	0

Life, Accident and Health Companies Only:
(a) Group \$0 ; Individual \$0
Fraternal Benefit Societies Only:
(b) Paid-up insurance included in the final totals of Line 21 (including additions to certificates) number of certificates , Amount \$
Additional accidental death benefits included in life certificates were in amount \$, Does the society collect any contributions from members for general expenses of the society under fully paid-up certificates? Yes [] No []
If not, how are such expenses met?
.....

EXHIBIT OF LIFE INSURANCE

(\$000 Omitted for Amounts of Life Insurance) (Continued)
ADDITIONAL INFORMATION ON INSURANCE IN FORCE END OF YEAR

	Industrial		Ordinary	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance
24. Additions by dividends	XXX		XXX	
25. Other paid-up insurance			68	469
26. Debit ordinary insurance	XXX	XXX		

ADDITIONAL INFORMATION ON ORDINARY INSURANCE

Term Insurance Excluding Extended Term Insurance	Issued During Year (Included in Line 2)		In Force End of Year (Included in Line 21)	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance
27. Term policies - decreasing				
28. Term policies - other				
29. Other term insurance - decreasing	XXX		XXX	
30. Other term insurance	XXX		XXX	
31. Totals (Lines 27 to 30)	0	0	0	0
Reconciliation to Lines 2 and 21:				
32. Term additions	XXX		XXX	
33. Totals, extended term insurance	XXX	XXX		
34. Totals, whole life and endowment	2,959	87,900	14,799	414,420
35. Totals (Lines 31 to 34)	2,959	87,900	14,799	414,420

CLASSIFICATION OF AMOUNT OF INSURANCE BY PARTICIPATING STATUS

	Issued During Year (Included in Line 2)		In Force End of Year (Included in Line 21)	
	1 Non-Participating	2 Participating	3 Non-Participating	4 Participating
36. Industrial				
37. Ordinary	87,900		414,420	
38. Credit Life (Group and Individual)				
39. Group				
40. Totals (Lines 36 to 39)	87,900	0	414,420	0

ADDITIONAL INFORMATION ON CREDIT LIFE AND GROUP INSURANCE

	Credit Life		Group	
	1 Number of Individual Policies or Group Certificates	2 Amount of Insurance	3 Number of Certificates	4 Amount of Insurance
41. Amount of insurance included in Line 2 ceded to other companies	XXX		XXX	
42. Number in force end of year if the number under insured groups is limited 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	114,064
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BASIS OF CALCULATION OF ORDINARY TERM INSURANCE

47. State basis of calculation of (47.1) decreasing term insurance contracts contained in Family Income 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 included in Line 2	
47.1	
47.2	

POLICIES WITH DISABILITY PROVISIONS

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

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America

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

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

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

ACCIDENT AND HEALTH INSURANCE						
	Group		Credit		Other	
	1 Certificates	2 Premiums in Force	3 Policies	4 Premiums in Force	5 Policies	6 Premiums in Force
1. In force end of prior year	19,979	15,491,185	0		440,292	294,012,844
2. Issued during year	4,148	2,433,946			125,290	67,772,995
3. Reinsurance assumed						
4. Increased during year (net)		XXX		XXX		XXX
5. Totals (Lines 1 to 4)	24,127	XXX	0	XXX	565,582	XXX
Deductions during year:						
6. Conversions		XXX	XXX	XXX	XXX	XXX
7. Decreased (net)	2,828	XXX		XXX	68,813	XXX
8. Reinsurance ceded		XXX		XXX		XXX
9. Totals (Lines 6 to 8)	2,828	XXX	0	XXX	68,813	XXX
10. In force end of year (line 5 minus line 9)	21,299	(a) 16,007,344	0	(a)	496,769	(a) 319,332,765

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

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America

SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS (b)

Allocated by States and Territories

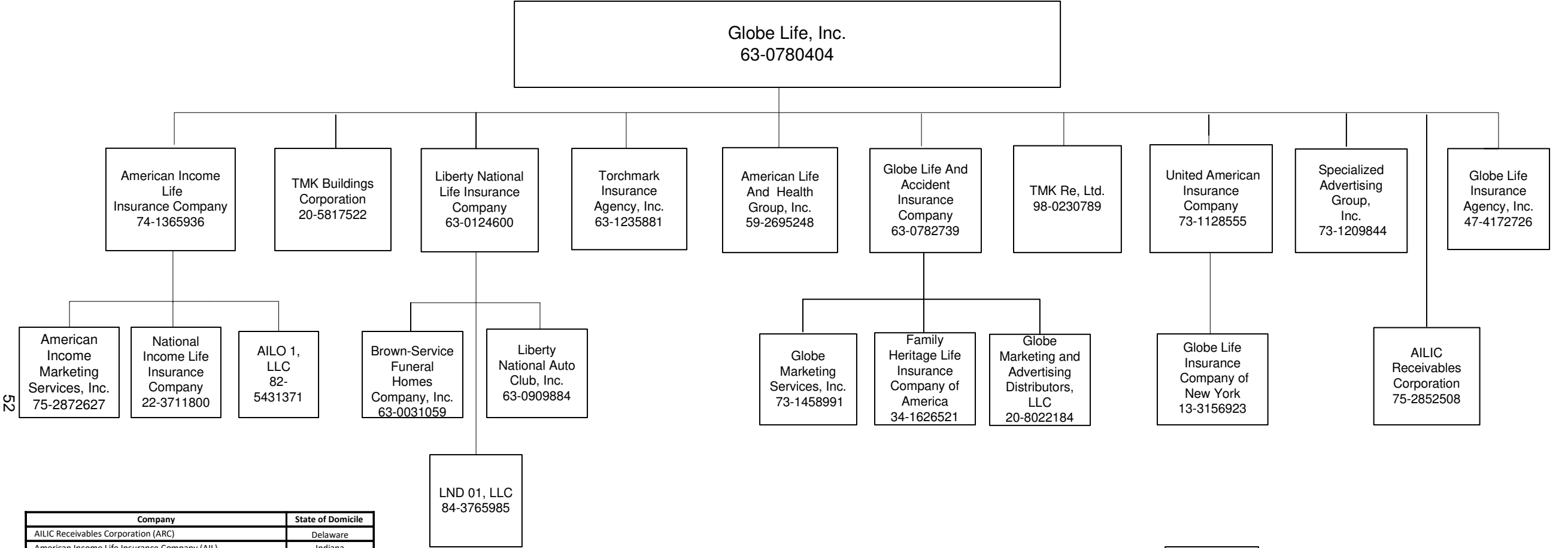
States, Etc.			1	Life Contracts		Direct Business Only			
				2	3	4	5	6	7
1.	Alabama	AL	L	44,306	0	3,042,674	0	3,086,980	0
2.	Alaska	AK	L	0	0	55,636	0	55,636	0
3.	Arizona	AZ	L	96,920	0	5,563,563	0	5,660,483	0
4.	Arkansas	AR	L	260,982	0	9,015,119	0	9,276,101	0
5.	California	CA	L	57,162	0	7,528,567	0	7,585,729	0
6.	Colorado	CO	L	66,590	0	9,011,646	0	9,078,236	0
7.	Connecticut	CT	L	84	0	15,141	0	15,225	0
8.	Delaware	DE	L	1,928	0	487,701	0	489,629	0
9.	District of Columbia	DC	L	0	0	16,435	0	16,435	0
10.	Florida	FL	L	93,226	0	10,328,902	0	10,422,128	0
11.	Georgia	GA	L	161,330	0	11,299,947	0	11,461,277	0
12.	Hawaii	HI	L	1,331	0	75,049	0	76,380	0
13.	Idaho	ID	L	6,971	0	1,564,173	0	1,571,144	0
14.	Illinois	IL	L	100,256	0	12,521,034	0	12,621,290	0
15.	Indiana	IN	L	24,746	0	10,021,917	0	10,046,663	0
16.	Iowa	IA	L	43,491	0	7,984,060	0	8,027,551	0
17.	Kansas	KS	L	115,995	0	10,675,686	0	10,791,681	0
18.	Kentucky	KY	L	167,532	0	8,669,392	0	8,836,924	0
19.	Louisiana	LA	L	33,194	0	7,796,281	0	7,829,475	0
20.	Maine	ME	L	1,228	0	504,354	0	505,582	0
21.	Maryland	MD	L	5,875	0	1,659,044	0	1,664,919	0
22.	Massachusetts	MA	L	1,250	0	29,790	0	31,040	0
23.	Michigan	MI	L	4,272	0	2,109,828	0	2,114,100	0
24.	Minnesota	MN	L	48,785	0	17,184,025	0	17,232,810	0
25.	Mississippi	MS	L	15,930	0	1,221,108	0	1,237,038	0
26.	Missouri	MO	L	109,048	0	9,960,937	0	10,069,985	0
27.	Montana	MT	L	14,042	0	3,179,871	0	3,193,913	0
28.	Nebraska	NE	L	22,359	0	9,901,485	0	9,923,844	0
29.	Nevada	NV	L	9,607	0	1,202,913	0	1,212,520	0
30.	New Hampshire	NH	L	10,443	0	480,001	0	490,444	0
31.	New Jersey	NJ	L	1,474	0	105,866	0	107,340	0
32.	New Mexico	NM	L	18,834	0	1,877,999	0	1,896,833	0
33.	New York	NY	N	0	0	0	0	0	0
34.	North Carolina	NC	L	134,658	0	11,403,038	0	11,537,696	0
35.	North Dakota	ND	L	5,610	0	1,940,893	0	1,946,503	0
36.	Ohio	OH	L	88,156	0	22,391,988	0	22,480,144	0
37.	Oklahoma	OK	L	87,673	0	4,434,628	0	4,522,301	0
38.	Oregon	OR	L	6,953	0	1,741,727	0	1,748,680	0
39.	Pennsylvania	PA	L	20,407	0	2,939,527	0	2,959,934	0
40.	Rhode Island	RI	L	0	0	52,732	0	52,732	0
41.	South Carolina	SC	L	81,650	0	3,435,578	0	3,517,228	0
42.	South Dakota	SD	L	13,122	0	6,345,621	0	6,358,743	0
43.	Tennessee	TN	L	149,295	0	6,520,445	0	6,669,740	0
44.	Texas	TX	L	1,912,631	0	65,896,644	0	67,809,275	0
45.	Utah	UT	L	3,542	0	4,546,337	0	4,549,879	0
46.	Vermont	VT	L	1,684	0	34,531	0	36,215	0
47.	Virginia	VA	L	90,598	0	5,494,562	0	5,585,160	0
48.	Washington	WA	L	104,428	0	4,137,898	0	4,242,326	0
49.	West Virginia	WV	L	76,382	0	3,904,534	0	3,980,916	0
50.	Wisconsin	WI	L	13,235	0	6,337,973	0	6,351,208	0
51.	Wyoming	WY	L	11,781	0	2,823,066	0	2,834,847	0
52.	American Samoa	AS	N	0	0	0	0	0	0
53.	Guam	GU	N	0	0	0	0	0	0
54.	Puerto Rico	PR	L	0	0	20,862	0	20,862	0
55.	U.S. Virgin Islands	VI	N	0	0	0	0	0	0
56.	Northern Mariana Islands	MP	N	0	0	0	0	0	0
57.	Canada	CAN	N	0	0	0	0	0	0
58.	Aggregate Other Alien	OT	XXX	0	0	0	0	0	0
59.	Subtotal	XXX		4,340,996	0	319,492,728	0	323,833,724	0
90.	Reporting entity contributions for employee benefits plans	XXX						0	
91.	Dividends or refunds applied to purchase paid-up additions and annuities	XXX						0	
92.	Dividends or refunds applied to shorten endowment or premium paying period	XXX						0	
93.	Premium or annuity considerations waived under disability or other contract provisions	XXX						0	
94.	Aggregate or other amounts not allocable by State	XXX		0	0	0	0	0	0
95.	Totals (Direct Business)	XXX		4,340,996	0	319,492,728	0	323,833,724	0
96.	Plus reinsurance assumed	XXX						0	
97.	Totals (All Business)	XXX		4,340,996	0	319,492,728	0	323,833,724	0
98.	Less reinsurance ceded	XXX		88,319		2,913,811		3,002,130	
99.	Totals (All Business) less Reinsurance Ceded	XXX		4,252,677	0	(c) 316,578,917	0	320,831,594	0
DETAILS OF WRITE-INS									
58001.	XXX							
58002.	XXX							
58003.	XXX							
58998.	Summary of remaining write-ins for Line 58 from overflow page	XXX		0	0	0	0	0	0
58999.	Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX		0	0	0	0	0	0
9401.	XXX							
9402.	XXX							
9403.	XXX							
9498.	Summary of remaining write-ins for Line 94 from overflow page	XXX		0	0	0	0	0	0
9499.	Totals (Lines 9401 through 9403 plus 9498)(Line 94 above)	XXX		0	0	0	0	0	0

(a) Active Status Counts:
L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG.....51 R - Registered - Non-domiciled RRGs.....0
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state.....0 Q - Qualified - Qualified or accredited reinsurer.....0
N - None of the above - Not allowed to write business in the state.....6

(b) Explanation of basis of allocation by states, etc., of premiums and annuity considerations
Premiums are reported based on the policyholders 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.

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Company	State of Domicile
AILIC Receivables Corporation (ARC)	Delaware
American Income Life Insurance Company (AIL)	Indiana
American Income Marketing Services, Inc. (AIMS)	Texas
Brown-Service Funeral Homes Company, Inc. (Brown Service)	Alabama
Family Heritage Life Insurance Company of America	Ohio
Globe Life Insurance Company of New York	New York
Globe Life And Accident Insurance Company (Globe)	Nebraska
Globe Life Insurance Agency Inc.	Texas
Globe Marketing Services, Inc. (Globe Marketing)	Oklahoma
Liberty National Auto Club, Inc. (Auto Club)	Alabama
Liberty National Life Insurance Company (LNL)	Nebraska
National Income Life Insurance Company (NILCO)	New York
Specialized Advertising Group, Inc.	Texas
TMK Buildings Corporation (TBC)	Texas
TMK Re, Ltd. (TMK Re)	Bermuda
Globe Life Inc.	Delaware
Torchmark Insurance Agency, Inc. (TIA)	Alabama
United American Insurance Company (UA)	Nebraska
American Life and Health Group, Inc.	Florida

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OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Exhibit 2 Line 9.3

	Insurance				5	6	7
	1	Accident and Health		4			
		2	3				
	Life	Cost Containment	All Other	All Other Lines of Business	Investment	Fraternal	Total
09.304. Consultant Fees			311,756				311,756
09.305. Donations			75,385				75,385
09.306. Seminars			44,713				44,713
09.307. Office Services			19,242				19,242
09.397. Summary of remaining write-ins for Line 9.3 from overflow page	0	0	451,096	0	0	0	451,096