





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

DIRECT BUSINESS IN THE STATE OF Alabama

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| <b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>  |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 44,306        |   |            |                 | 44,306     |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 44,306        | 0                                       | 0          | 0               | 44,306     |
| <b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>                                      |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| <b>DIRECT CLAIMS AND BENEFITS PAID</b>   |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 1,800         |   |            |                 | 1,800      |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 1,800         | 0                                       | 0          | 0               | 1,800      |
| <b>DETAILS OF WRITE-INS</b>  |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| <b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b> | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|--|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|  | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....                     |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                       |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                                 |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....                  |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                       | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                                   |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                                 | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| <b>POLICY EXHIBIT</b>  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....                   | 176                                | 4,740,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 176                                | 4,740,000    |
| 21. Issued during year .....                                 | 20                                 | 550,000     |   |             |                         |             |                                    |             | 20                                 | 550,000      |
| 22. Other changes to in force (Net) .....                    | (9)                                | (85,000)    |   |             |                         |             |                                    |             | (9)                                | (85,000)     |
| 23. In force December 31 of current year .....               | 187                                | 5,205,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 187                                | 5,205,000    |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|  |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|--|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                   |  | 14,509               | 14,511                      |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....  |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                       |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....    |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees      |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                     |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                 |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                            |  | 3,028,165            | 3,032,785                   |   | 1,628,898               | 1,626,419                   |
| 25.3 Non-renewable for stated reasons only (b) .....           |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                 |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....                                       |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                  |  | 3,028,165            | 3,032,785                   | 0   | 1,628,898               | 1,626,419                   |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) ..... |  | 3,042,674            | 3,047,296                   | 0   | 1,628,898               | 1,626,419                   |

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



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

**DIRECT BUSINESS IN THE STATE OF Alaska**

## DURING THE YEAR 2020

NAIC Group Code 0290

NAIC Company Code 77968

## LIFE INSURANCE

NAIC Company Code 77968

| DIRECT PREMIUMS<br>AND ANNUITY CONSIDERATIONS   | 1        | 2                                     | 3     | 4          | 5     |
|---|----------|---------------------------------------|-------|------------|-------|
|   | Ordinary | Credit Life (Group<br>and Individual) | Group | Industrial | Total |
| 1. Life insurance .....   |          |                                       |       |            |       |
| 2. Annuity considerations .....   |          |                                       |       |            |       |
| 3. Deposit-type contract funds .....  |          | XXX                                   |       | XXX        |       |
| 4. Other considerations .....   |          |                                       |       |            |       |
| 5. Totals (Sum of Lines 1 to 4)   |          |                                       |       |            |       |
| <b>DIRECT DIVIDENDS TO<br/>POLICYHOLDERS/REFUNDS TO MEMBERS</b>                                     |          |                                       |       |            |       |
| Life insurance:   |          |                                       |       |            |       |
| 6.1 Paid in cash or left on deposit .....   |          |                                       |       |            |       |
| 6.2 Applied to pay renewal premiums .....   |          |                                       |       |            |       |
| 6.3 Applied to provide paid-up additions or shorten the<br>endowment or premium-paying period ..... |          |                                       |       |            |       |
| 6.4 Other .....   |          |                                       |       |            |       |
| 6.5 Totals (Sum of Lines 6.1 to 6.4)  |          |                                       |       |            |       |
| Annuities:  |          |                                       |       |            |       |
| 7.1 Paid in cash or left on deposit .....   |          |                                       |       |            |       |
| 7.2 Applied to provide paid-up annuities .....  |          |                                       |       |            |       |
| 7.3 Other .....   |          |                                       |       |            |       |
| 7.4 Totals (Sum of Lines 7.1 to 7.3)  |          |                                       |       |            |       |
| 8. Grand Totals (Lines 6.5 plus 7.4)  |          |                                       |       |            |       |
| <b>DIRECT CLAIMS AND BENEFITS PAID</b>  |          |                                       |       |            |       |
| 9. Death benefits .....   |          |                                       |       |            |       |
| 10. Matured endowments .....  |          |                                       |       |            |       |
| 11. Annuity benefits .....  |          |                                       |       |            |       |
| 12. Surrender values and withdrawals for life contracts .....                                       |          |                                       |       |            |       |
| 13. Aggregate write-ins for miscellaneous direct claims<br>and benefits paid .....                  |          |                                       |       |            |       |
| 14. All other benefits, except accident and health .....  |          |                                       |       |            |       |
| 15. Totals  |          |                                       |       |            |       |
| <b>DETAILS OF WRITE-INS</b>   |          |                                       |       |            |       |
| 1301. ....  |          |                                       |       |            |       |
| 1302. ....  |          |                                       |       |            |       |
| 1303. ....  |          |                                       |       |            |       |
| 1398. Summary of Line 13 from overflow page .....   |          |                                       |       |            |       |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13<br>above)                                    |          |                                       |       |            |       |

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

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

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

## ACCIDENT AND HEALTH INSURANCE

| ACCIDENT AND HEALTH INSURANCE                                 |                 |                        |  |                    |                        |
|---|-----------------|------------------------|--|--------------------|------------------------|
|   | 1               | 2                      | 3  | 4                  | 5                      |
|   | Direct Premiums | Direct Premiums Earned | Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | Direct Losses Paid | Direct Losses Incurred |
| 24. Group Policies (b) .....                                  | 1,140           | 1,140                  |  |                    |                        |
| 24.1 Federal Employees Health Benefits Plan premium (b) ..... |                 |                        |  |                    |                        |
| 24.2 Credit (Group and Individual) .....                      |                 |                        |  |                    |                        |
| 24.3 Collectively renewable policies/certificates (b) .....   |                 |                        |  |                    |                        |
| 24.4 Medicare Title XVIII exempt from state taxes or fees     |                 |                        |  |                    |                        |
| Other Individual Policies:                                    |                 |                        |  |                    |                        |
| 25.1 Non-cancelable (b) .....                                 |                 |                        |  |                    |                        |
| 25.2 Guaranteed renewable (b) .....                           | 54,496          | 54,579                 |  | 7,256              | 7,233                  |
| 25.3 Non-renewable for stated reasons only (b) .....          |                 |                        |  |                    |                        |
| 25.4 Other accident only .....                                |                 |                        |  |                    |                        |
| 25.5 All other (b) .....                                      |                 |                        |  |                    |                        |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                 | 54,496          | 54,579                 | 0  | 7,256              | 7,233                  |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)      | 55,636          | 55,719                 | 0  | 7,256              | 7,233                  |

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



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

DIRECT BUSINESS IN THE STATE OF Arizona

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 96,920        |   |            |                 | 96,920     |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            | XXX             | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 96,920        | 0                                       | 0          | 0               | 96,920     |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  | 50,000        |   |            |                 | 50,000     |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 5,306         |   |            |                 | 5,306      |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 55,306        | 0                                       | 0          | 0               | 55,306     |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                | 1                                  | 50,000      |   |             |                         |             |                                    |             | 1                                  | 50,000       |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         | 1                                  | 50,000      |   |             |                         |             |                                    |             | 1                                  | 50,000       |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 1                                  | 50,000      | 0   | 0           | 0                       | 0           | 0                                  | 0           | 1                                  | 50,000       |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 1                                  | 50,000      | 0   | 0           | 0                       | 0           | 0                                  | 0           | 1                                  | 50,000       |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 204                                | 6,720,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 204                                | 6,720,000    |
| 21. Issued during year .....                          | 8                                  | 240,000     |   |             |                         |             |                                    |             | 8                                  | 240,000      |
| 22. Other changes to in force (Net) .....             | (12)                               | (420,000)   |   |             |                         |             |                                    |             | (12)                               | (420,000)    |
| 23. In force December 31 of current year .....        | 200                                | 6,540,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 200                                | 6,540,000    |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 10,245               | 10,246                      |   | 2,100                   | 2,469                       |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 5,553,318            | 5,561,791                   |   | 1,623,730               | 1,682,165                   |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 5,553,318            | 5,561,791                   | 0   | 1,623,730               | 1,682,165                   |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 5,563,563            | 5,572,037                   | 0   | 1,625,830               | 1,684,634                   |

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



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

DIRECT BUSINESS IN THE STATE OF Arkansas

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| <b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>  |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 260,982       |   |            |                 | 260,982    |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 260,982       | 0                                       | 0          | 0               | 260,982    |
| <b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>                                      |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| <b>DIRECT CLAIMS AND BENEFITS PAID</b>   |  |               |   |            |                 |            |
| 9. Death benefits .....  |  | 75,000        |   |            |                 | 75,000     |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 10,788        |   |            |                 | 10,788     |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 85,788        | 0                                       | 0          | 0               | 85,788     |
| <b>DETAILS OF WRITE-INS</b>  |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| <b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b> | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|--|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|  | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....                     |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                       | 2                                  | 75,000      |   |             |                         |             |                                    |             | 2                                  | 75,000       |
| Settled during current year:                                 |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                                | 2                                  | 75,000      |   |             |                         |             |                                    |             | 2                                  | 75,000       |
| 18.2 By payment on compromised claims .....                  |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                       | 2                                  | 75,000      | 0   | 0           | 0                       | 0           | 0                                  | 0           | 2                                  | 75,000       |
| 18.4 Reduction by compromise .....                           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                                   |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                                 | 2                                  | 75,000      | 0   | 0           | 0                       | 0           | 0                                  | 0           | 2                                  | 75,000       |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| <b>POLICY EXHIBIT</b>  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....                   | 993                                | 21,935,000  | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 993                                | 21,935,000   |
| 21. Issued during year .....                                 | 356                                | 8,805,000   |   |             |                         |             |                                    |             | 356                                | 8,805,000    |
| 22. Other changes to in force (Net) .....                    | (166)                              | (3,870,000) |   |             |                         |             |                                    |             | (166)                              | (3,870,000)  |
| 23. In force December 31 of current year .....               | 1,183                              | 26,870,000  | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 1,183                              | 26,870,000   |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 5,296                | 5,297                       |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 9,009,823            | 9,023,570                   |   | 2,553,983               | 2,568,584                   |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 9,009,823            | 9,023,570                   | 0   | 2,553,983               | 2,568,584                   |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 9,015,119            | 9,028,867                   | 0   | 2,553,983               | 2,568,584                   |

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



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

DIRECT BUSINESS IN THE STATE OF California

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| <b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>  |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 57,162        |   |            |                 | 57,162     |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            | XXX             | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 57,162        | 0                                       | 0          | 0               | 57,162     |
| <b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>                                      |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| <b>DIRECT CLAIMS AND BENEFITS PAID</b>   |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 300           |   |            |                 | 300        |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 300           | 0                                       | 0          | 0               | 300        |
| <b>DETAILS OF WRITE-INS</b>  |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| <b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b> | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|--|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|  | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....                     |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                       |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                                 |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....                  |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                       | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                                   |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                                 | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| <b>POLICY EXHIBIT</b>  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....                   | 166                                | 5,580,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 166                                | 5,580,000    |
| 21. Issued during year .....                                 | .34                                | 1,360,000   |   |             |                         |             |                                    |             | .34                                | 1,360,000    |
| 22. Other changes to in force (Net) .....                    | (8)                                | (400,000)   |   |             |                         |             |                                    |             | (8)                                | (400,000)    |
| 23. In force December 31 of current year .....               | 192                                | 6,540,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 192                                | 6,540,000    |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 12,217               | 12,218                      |   | 60,800                  | 71,490                      |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 7,516,350            | 7,527,819                   |   | 1,470,900               | 1,652,090                   |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 7,516,350            | 7,527,819                   | 0   | 1,470,900               | 1,652,090                   |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 7,528,567            | 7,540,037                   | 0   | 1,531,700               | 1,723,580                   |

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



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

DIRECT BUSINESS IN THE STATE OF Colorado

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| <b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>  |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 66,590        |   |            |                 | 66,590     |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            | XXX             | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 66,590        | 0                                       | 0          | 0               | 66,590     |
| <b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>                                      |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| <b>DIRECT CLAIMS AND BENEFITS PAID</b>   |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  |               |   |            |                 | 0          |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| <b>DETAILS OF WRITE-INS</b>  |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| <b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b> | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|--|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|  | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....                     |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                       |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                                 |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....                  |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                       | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                                   |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                                 | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| <b>POLICY EXHIBIT</b>  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....                   | 221                                | 6,380,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 221                                | 6,380,000    |
| 21. Issued during year .....                                 | 26                                 | 1,315,000   |   |             |                         |             |                                    |             | 26                                 | 1,315,000    |
| 22. Other changes to in force (Net) .....                    | (7)                                | 30,000      |   |             |                         |             |                                    |             | (7)                                | 30,000       |
| 23. In force December 31 of current year .....               | 240                                | 7,725,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 240                                | 7,725,000    |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                   | 14,456               | 14,457                      |   | 5,781                   | 6,797                       |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                       |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....    |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees      |                      |                             |   |                         |                             |
| Other Individual Policies:                                     |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                 |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                            | 8,997,190            | 9,010,918                   |   | 1,295,905               | 1,321,397                   |
| 25.3 Non-renewable for stated reasons only (b) .....           |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                 |                      |                             |   |                         |                             |
| 25.5 All other (b) .....                                       |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                  | 8,997,190            | 9,010,918                   | 0   | 1,295,905               | 1,321,397                   |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) ..... | 9,011,646            | 9,025,375                   | 0   | 1,301,686               | 1,328,194                   |

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



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

DIRECT BUSINESS IN THE STATE OF Connecticut

DURING THE YEAR 2020

NAIC Group Code 0290

NAIC Company Code 77968

**LIFE INSURANCE**

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 84            |   |            |                 | 84         |
| 2. Annuity considerations .....  |  |               | XXX                                     |            | XXX             | 0          |
| 3. Deposit-type contract funds .....   |  |               |   |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 84            | 0                                       | 0          | 0               | 84         |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  |               |   |            |                 | 0          |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

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

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 732                  | 732                         |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 14,409               | 14,431                      |   | 80                      | 82                          |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 14,409               | 14,431                      | 0   | 80                      | 82                          |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 15,141               | 15,163                      | 0   | 80                      | 82                          |

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



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

DIRECT BUSINESS IN THE STATE OF Delaware

DURING THE YEAR 2020

NAIC Group Code 0290

NAIC Company Code 77968

**LIFE INSURANCE**

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 1,928         |   |            |                 | 1,928      |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            | XXX             | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 1,928         | 0                                       | 0          | 0               | 1,928      |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  |               |   |            |                 | 0          |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 3                                  | 95,000      | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 3                                  | 95,000       |
| 21. Issued during year .....                          |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 22. Other changes to in force (Net) .....             |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 23. In force December 31 of current year .....        | 3                                  | 95,000      | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 3                                  | 95,000       |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |                      |                             |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             | 487,701              | 488,445                     |   | 42,667                  | 43,764                      |
| 25.3 Non-renewable for stated reasons only (b) .....            |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   | 487,701              | 488,445                     | 0   | 42,667                  | 43,764                      |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  | 487,701              | 488,445                     | 0   | 42,667                  | 43,764                      |

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



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

DIRECT BUSINESS IN THE STATE OF District of Columbia

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| <b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>  |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  |               |   |            |                 |            |
| 2. Annuity considerations .....  |  |               |   |            |                 |            |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            | XXX             |            |
| 4. Other considerations .....  |  |               |   |            |                 |            |
| 5. Totals (Sum of Lines 1 to 4) .....  |  |               |   |            |                 |            |
| <b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>                                      |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 |            |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 |            |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 |            |
| 6.4 Other .....  |  |               |   |            |                 |            |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  |               |   |            |                 |            |
| Annuites:  |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 |            |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 |            |
| 7.3 Other .....  |  |               |   |            |                 |            |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  |               |   |            |                 |            |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  |               |   |            |                 |            |
| <b>DIRECT CLAIMS AND BENEFITS PAID</b>   |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 |            |
| 10. Matured endowments .....   |  |               |   |            |                 |            |
| 11. Annuity benefits .....   |  |               |   |            |                 |            |
| 12. Surrender values and withdrawals for life contracts .....                                    |  |               |   |            |                 |            |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  |               |   |            |                 |            |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 |            |
| 15. Totals .....   |  |               |   |            |                 |            |
| <b>DETAILS OF WRITE-INS</b>  |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  |               |   |            |                 |            |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  |               |   |            |                 |            |

**NONE**

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

(a) Includes Individual Credit Life Insurance prior year \$ ..... , current year \$ .....  
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..... , current year \$ .....  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..... , current year \$ .....

**ACCIDENT AND HEALTH INSURANCE**

|  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                   |                      |                             |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                       |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....    |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees      |                      |                             |   |                         |                             |
| Other Individual Policies:                                     |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                 |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                            | 16,435               | 16,460                      |   | 120                     | 123                         |
| 25.3 Non-renewable for stated reasons only (b) .....           |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                 |                      |                             |   |                         |                             |
| 25.5 All other (b) .....                                       |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                  | 16,435               | 16,460                      | 0   | 120                     | 123                         |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) ..... | 16,435               | 16,460                      | 0   | 120                     | 123                         |

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



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

DIRECT BUSINESS IN THE STATE OF Florida

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| <b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>  |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 93,226        |   |            |                 | 93,226     |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            | XXX             | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 93,226        | 0                                       | 0          | 0               | 93,226     |
| <b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>                                      |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| <b>DIRECT CLAIMS AND BENEFITS PAID</b>   |  |               |   |            |                 |            |
| 9. Death benefits .....  |  | 20,000        |   |            |                 | 20,000     |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 1,030         |   |            |                 | 1,030      |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 21,030        | 0                                       | 0          | 0               | 21,030     |
| <b>DETAILS OF WRITE-INS</b>  |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| <b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b> | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|--|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|  | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....                     |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                       | .1                                 | 20,000      |   |             |                         |             |                                    |             | .1                                 | 20,000       |
| Settled during current year:                                 |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                                | .1                                 | 20,000      |   |             |                         |             |                                    |             | .1                                 | 20,000       |
| 18.2 By payment on compromised claims .....                  |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                       | .1                                 | 20,000      | 0   | .0          | 0                       | 0           | 0                                  | 0           | .1                                 | 20,000       |
| 18.4 Reduction by compromise .....                           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                                   |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                                 | .1                                 | 20,000      | 0   | .0          | 0                       | 0           | 0                                  | 0           | .1                                 | 20,000       |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| <b>POLICY EXHIBIT</b>  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....                   | 365                                | 8,170,699   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 365                                | 8,170,699    |
| 21. Issued during year .....                                 | .52                                | 1,675,000   |   |             |                         |             |                                    |             | .52                                | 1,675,000    |
| 22. Other changes to in force (Net) .....                    | (38)                               | (435,000)   |   |             |                         |             |                                    |             | (38)                               | (435,000)    |
| 23. In force December 31 of current year .....               | 379                                | 9,410,699   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 379                                | 9,410,699    |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 52,553               | 52,558                      |   | 1,570                   | 1,846                       |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 10,276,349           | 10,292,029                  |   | 2,531,402               | 2,551,428                   |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 10,276,349           | 10,292,029                  | 0   | 2,531,402               | 2,551,428                   |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 10,328,902           | 10,344,587                  | 0   | 2,532,972               | 2,553,274                   |

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



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

DIRECT BUSINESS IN THE STATE OF Georgia

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| <b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>  |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 161,330       |   |            |                 | 161,330    |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 161,330       | 0                                       | 0          | 0               | 161,330    |
| <b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>                                      |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| <b>DIRECT CLAIMS AND BENEFITS PAID</b>   |  |               |   |            |                 |            |
| 9. Death benefits .....  |  | 20,000        |   |            |                 | 20,000     |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 5,236         |   |            |                 | 5,236      |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 25,236        | 0                                       | 0          | 0               | 25,236     |
| <b>DETAILS OF WRITE-INS</b>  |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| <b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b> | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|--|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|  | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....                     |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                       | .1                                 | 20,000      |   |             |                         |             |                                    |             | .1                                 | 20,000       |
| Settled during current year:                                 |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                                | .1                                 | 20,000      |   |             |                         |             |                                    |             | .1                                 | 20,000       |
| 18.2 By payment on compromised claims .....                  |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                       | .1                                 | 20,000      | 0   | .0          | 0                       | 0           | 0                                  | .1          | 20,000                             |              |
| 18.4 Reduction by compromise .....                           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                                   |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                                 | .1                                 | 20,000      | 0   | .0          | 0                       | 0           | 0                                  | .1          | 20,000                             |              |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| <b>POLICY EXHIBIT</b>  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....                   | 651                                | 15,017,252  | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 651                                | 15,017,252   |
| 21. Issued during year .....                                 | 225                                | 6,265,000   |   |             |                         |             |                                    |             | 225                                | 6,265,000    |
| 22. Other changes to in force (Net) .....                    | (103)                              | (3,062,817) |   |             |                         |             |                                    |             | (103)                              | (3,062,817)  |
| 23. In force December 31 of current year .....               | 773                                | 18,219,435  | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 773                                | 18,219,435   |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|  |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|--|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                   |  | 11,293               | 11,294                      |   | 16,116                  | 18,950                      |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....  |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                       |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....    |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees      |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                     |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                 |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                            |  | 11,288,654           | 11,305,878                  |   | 3,636,591               | 3,747,439                   |
| 25.3 Non-renewable for stated reasons only (b) .....           |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                 |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....                                       |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                  |  | 11,288,654           | 11,305,878                  | 0   | 3,636,591               | 3,747,439                   |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) ..... |  | 11,299,947           | 11,317,172                  | 0   | 3,652,707               | 3,766,389                   |

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



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

DIRECT BUSINESS IN THE STATE OF Hawaii

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 1,331         |   |            |                 | 1,331      |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            | XXX             | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 1,331         | 0                                       | 0          | 0               | 1,331      |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 69            |   |            |                 | 69         |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 69            | 0                                       | 0          | 0               | 69         |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 5                                  | 140,000     | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 5                                  | 140,000      |
| 21. Issued during year .....                          | .1                                 | 100,000     |   |             |                         |             |                                    |             | .1                                 | 100,000      |
| 22. Other changes to in force (Net) .....             | (1)                                | (100,000)   |   |             |                         |             |                                    |             | (1)                                | (100,000)    |
| 23. In force December 31 of current year .....        | 5                                  | 140,000     | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 5                                  | 140,000      |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  |                      |                             |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 75,049               | 75,164                      |   | 17,392                  | 17,839                      |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 75,049               | 75,164                      | 0   | 17,392                  | 17,839                      |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 75,049               | 75,164                      | 0   | 17,392                  | 17,839                      |

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



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

DIRECT BUSINESS IN THE STATE OF Idaho

DURING THE YEAR 2020

NAIC Group Code 0290

**LIFE INSURANCE**

NAIC Company Code 77968

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |       | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|-------|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  | 6,971 |               |   |            |                 | 6,971      |
| 2. Annuity considerations .....  |       |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |       | XXX           |   |            | XXX             | 0          |
| 4. Other considerations .....  |       |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  | 6,971 | 0             | 0                                       | 0          | 0               | 6,971      |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |       |               |   |            |                 |            |
| Life insurance:  |       |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |       |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |       |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |       |               |   |            |                 | 0          |
| 6.4 Other .....  |       |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   | 0     | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |       |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |       |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |       |               |   |            |                 | 0          |
| 7.3 Other .....  |       |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   | 0     | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   | 0     | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |       |               |   |            |                 |            |
| 9. Death benefits .....  |       |               |   |            |                 | 0          |
| 10. Matured endowments .....   |       |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |       |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |       |               |   |            |                 | 0          |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  | 0     | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |       |               |   |            |                 | 0          |
| 15. Totals .....   | 0     | 0             | 0                                       | 0          | 0               | 0          |
| DETAILS OF WRITE-INS   |       |               |   |            |                 |            |
| 1301. ....   |       |               |   |            |                 |            |
| 1302. ....   |       |               |   |            |                 |            |
| 1303. ....   |       |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  | 0     | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              | 0     | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 20                                 | 515,000     | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 20                                 | .515,000     |
| 21. Issued during year .....                          | .1                                 | 75,000      |   |             |                         |             |                                    |             | .1                                 | .75,000      |
| 22. Other changes to in force (Net) .....             | (4)                                | (80,000)    |   |             |                         |             |                                    |             | (4)                                | (80,000)     |
| 23. In force December 31 of current year .....        | 17                                 | 510,000     | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 17                                 | 510,000      |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 2,680                | 2,680                       |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 1,561,493            | 1,563,876                   |   | 210,578                 | 215,992                     |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 1,561,493            | 1,563,876                   | 0   | 210,578                 | 215,992                     |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 1,564,173            | 1,566,556                   | 0   | 210,578                 | 215,992                     |

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



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

DIRECT BUSINESS IN THE STATE OF Illinois

DURING THE YEAR 2020

NAIC Group Code 0290

**LIFE INSURANCE**

NAIC Company Code 77968

| <b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>  |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 100,256       |   |            |                 | 100,256    |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            | XXX             | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 100,256       | 0                                       | 0          | 0               | 100,256    |
| <b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>                                      |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| <b>DIRECT CLAIMS AND BENEFITS PAID</b>   |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 1,324         |   |            |                 | 1,324      |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 1,324         | 0                                       | 0          | 0               | 1,324      |
| <b>DETAILS OF WRITE-INS</b>  |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| <b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b> | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|--|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|  | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....                     |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                       |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                                 |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....                  |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                       | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                                   |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                                 | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| <b>POLICY EXHIBIT</b>  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....                   | 326                                | 9,235,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 326                                | 9,235,000    |
| 21. Issued during year .....                                 | 20                                 | 795,000     |   |             |                         |             |                                    |             | 20                                 | 795,000      |
| 22. Other changes to in force (Net) .....                    | (16)                               | (540,000)   |   |             |                         |             |                                    |             | (16)                               | (540,000)    |
| 23. In force December 31 of current year .....               | 330                                | 9,490,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 330                                | 9,490,000    |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|  |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|--|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                   |  | 7,538,539            | 7,539,278                   |   | 723,167                 | .876,018                    |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....  |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                       |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....    |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees      |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                     |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                 |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                            |  | 4,982,495            | 4,990,097                   |   | 4,122,520               | 4,078,280                   |
| 25.3 Non-renewable for stated reasons only (b) .....           |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                 |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....                                       |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                  |  | 4,982,495            | 4,990,097                   | 0   | 4,122,520               | 4,078,280                   |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) ..... |  | 12,521,034           | 12,529,375                  | 0   | 4,845,687               | 4,954,298                   |

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



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

DIRECT BUSINESS IN THE STATE OF Indiana

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 24,746        |   |            |                 | 24,746     |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            | XXX             | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 24,746        | 0                                       | 0          | 0               | 24,746     |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 38            |   |            |                 | 38         |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 38            | 0                                       | 0          | 0               | 38         |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 97                                 | 2,567,222   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 97                                 | 2,567,222    |
| 21. Issued during year .....                          | 6                                  | 315,000     |   |             |                         |             |                                    |             | 6                                  | 315,000      |
| 22. Other changes to in force (Net) .....             | (14)                               | (530,000)   |   |             |                         |             |                                    |             | (14)                               | (530,000)    |
| 23. In force December 31 of current year .....        | 89                                 | 2,352,222   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 89                                 | 2,352,222    |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 52,617               | 52,622                      |   | 480                     | 564                         |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 9,969,300            | 9,984,511                   |   | 7,382,427               | 7,138,944                   |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 9,969,300            | 9,984,511                   | 0   | 7,382,427               | 7,138,944                   |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 10,021,917           | 10,037,133                  | 0   | 7,382,907               | 7,139,508                   |

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



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

DIRECT BUSINESS IN THE STATE OF Iowa

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 43,491        |   |            |                 | 43,491     |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            | XXX             | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 43,491        | 0                                       | 0          | 0               | 43,491     |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 378           |   |            |                 | 378        |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 378           | 0                                       | 0          | 0               | 378        |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 196                                | 3,775,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 196                                | 3,775,000    |
| 21. Issued during year .....                          | .64                                | 2,430,000   |   |             |                         |             |                                    |             | .64                                | 2,430,000    |
| 22. Other changes to in force (Net) .....             | (19)                               | (545,000)   |   |             |                         |             |                                    |             | (19)                               | (545,000)    |
| 23. In force December 31 of current year .....        | 241                                | 5,660,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 241                                | 5,660,000    |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 7,399,420            | 7,400,145                   |   | 663,147                 | .787,807                    |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 584,640              | 585,532                     |   | 363,382                 | .363,793                    |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 584,640              | 585,532                     | 0   | 363,382                 | .363,793                    |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 7,984,060            | 7,985,677                   | 0   | 1,026,529               | 1,151,600                   |

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



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

DIRECT BUSINESS IN THE STATE OF Kansas

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 115,995       |   |            |                 | 115,995    |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 115,995       | 0                                       | 0          | 0               | 115,995    |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 1,569         |   |            |                 | 1,569      |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 1,569         | 0                                       | 0          | 0               | 1,569      |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 307                                | 7,970,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 307                                | 7,970,000    |
| 21. Issued during year .....                          | 171                                | 5,385,000   |   |             |                         |             |                                    |             | 171                                | 5,385,000    |
| 22. Other changes to in force (Net) .....             | (22)                               | (660,000)   |   |             |                         |             |                                    |             | (22)                               | (660,000)    |
| 23. In force December 31 of current year .....        | 456                                | 12,695,000  | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 456                                | 12,695,000   |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 15,676               | 15,677                      |   | 150                     | 176                         |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 10,660,010           | 10,676,275                  |   | 3,379,942               | 3,347,198                   |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 10,660,010           | 10,676,275                  | 0   | 3,379,942               | 3,347,198                   |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 10,675,686           | 10,691,952                  | 0   | 3,380,092               | 3,347,374                   |

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



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

DIRECT BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2020

NAIC Group Code 0290

LIFE INSURANCE

NAIC Company Code 77968

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 167,532       |   |            |                 | 167,532    |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 167,532       | 0                                       | 0          | 0               | 167,532    |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 2,772         |   |            |                 | 2,772      |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 2,772         | 0                                       | 0          | 0               | 2,772      |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 567                                | 14,222,287  | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 567                                | 14,222,287   |
| 21. Issued during year .....                          | .64                                | 2,155,000   |   |             |                         |             |                                    |             | .64                                | 2,155,000    |
| 22. Other changes to in force (Net) .....             | (38)                               | (1,045,000) |   |             |                         |             |                                    |             | (38)                               | (1,045,000)  |
| 23. In force December 31 of current year .....        | 593                                | 15,332,287  | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 593                                | 15,332,287   |

(a) Includes Individual Credit Life Insurance prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

ACCIDENT AND HEALTH INSURANCE

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 9,587                | 9,588                       |   | 40                      | .47                         |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 8,659,805            | 8,673,018                   |   | 1,881,305               | 1,923,448                   |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 8,659,805            | 8,673,018                   | 0   | 1,881,305               | 1,923,448                   |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 8,669,392            | 8,682,606                   | 0   | 1,881,345               | 1,923,495                   |

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



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

DIRECT BUSINESS IN THE STATE OF Louisiana

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 33,194        |   |            |                 | 33,194     |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            | XXX             | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 33,194        | 0                                       | 0          | 0               | 33,194     |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuites:  |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 4,955         |   |            |                 | 4,955      |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 4,955         | 0                                       | 0          | 0               | 4,955      |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 107                                | 3,320,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 107                                | 3,320,000    |
| 21. Issued during year .....                          | .44                                | 1,225,000   |   |             |                         |             |                                    |             | .44                                | 1,225,000    |
| 22. Other changes to in force (Net) .....             | (13)                               | (470,000)   |   |             |                         |             |                                    |             | (13)                               | (470,000)    |
| 23. In force December 31 of current year .....        | 138                                | 4,075,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 138                                | 4,075,000    |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 1,413                | 1,413                       |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 7,794,868            | 7,806,761                   |   | 1,665,332               | 1,772,973                   |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 7,794,868            | 7,806,761                   | 0   | 1,665,332               | 1,772,973                   |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 7,796,281            | 7,808,174                   | 0   | 1,665,332               | 1,772,973                   |

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



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

DIRECT BUSINESS IN THE STATE OF Maine

DURING THE YEAR 2020

NAIC Group Code 0290

NAIC Company Code 77968

**LIFE INSURANCE**

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 1,228         |   |            |                 | 1,228      |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            | XXX             | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 1,228         | 0                                       | 0          | 0               | 1,228      |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  |               |   |            |                 | 0          |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 2                                  | 75,000      | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 2                                  | 75,000       |
| 21. Issued during year .....                          |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 22. Other changes to in force (Net) .....             | (1)                                | (50,000)    |   |             |                         |             |                                    |             | (1)                                | (50,000)     |
| 23. In force December 31 of current year .....        | 1                                  | 25,000      | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 1                                  | 25,000       |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 2,368                | 2,368                       |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  | 468                  | 471                         |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 501,518              | 502,283                     |   | 218,022                 | 213,139                     |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 501,986              | 502,754                     | 0   | 218,022                 | 213,139                     |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 504,354              | 505,122                     | 0   | 218,022                 | 213,139                     |

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



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

DIRECT BUSINESS IN THE STATE OF Maryland

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 5,875         |   |            |                 | 5,875      |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 5,875         | 0                                       | 0          | 0               | 5,875      |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  |               |   |            |                 | 0          |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 25                                 | 560,745     | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 25                                 | .560,745     |
| 21. Issued during year .....                          | 4                                  | 150,000     |   |             |                         |             |                                    |             | 4                                  | .150,000     |
| 22. Other changes to in force (Net) .....             | (6)                                | (115,000)   |   |             |                         |             |                                    |             | (6)                                | (115,000)    |
| 23. In force December 31 of current year .....        | 23                                 | 595,745     | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 23                                 | .595,745     |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 3,275                | 3,276                       |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 1,655,769            | 1,658,295                   |   | 320,900                 | .337,789                    |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 1,655,769            | 1,658,295                   | 0   | 320,900                 | .337,789                    |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 1,659,044            | 1,661,571                   | 0   | 320,900                 | .337,789                    |

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



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

DIRECT BUSINESS IN THE STATE OF Massachusetts

DURING THE YEAR 2020

NAIC Group Code 0290

**LIFE INSURANCE**

NAIC Company Code 77968

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 1,250         |   |            |                 | 1,250      |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            | XXX             | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 1,250         | 0                                       | 0          | 0               | 1,250      |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  |               |   |            |                 | 0          |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

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

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 1,372                | 1,372                       |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 28,418               | 28,462                      |   |                         |                             |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 28,418               | 28,462                      | 0   | 0                       | 0                           |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 29,790               | 29,834                      | 0   | 0                       | 0                           |

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



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

DIRECT BUSINESS IN THE STATE OF Michigan

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 4,272         |   |            |                 | 4,272      |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            | XXX             | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 4,272         | 0                                       | 0          | 0               | 4,272      |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  |               |   |            |                 | 0          |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 12                                 | 320,000     | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 12                                 | 320,000      |
| 21. Issued during year .....                          | 1                                  | 20,000      |   |             |                         |             |                                    |             | 1                                  | 20,000       |
| 22. Other changes to in force (Net) .....             | 2                                  | 40,000      |   |             |                         |             |                                    |             | 2                                  | 40,000       |
| 23. In force December 31 of current year .....        | 15                                 | 380,000     | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 15                                 | 380,000      |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 8,900                | 8,901                       |   | 80                      | .94                         |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 2,100,928            | 2,104,133                   |   | 386,669                 | 403,910                     |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 2,100,928            | 2,104,133                   | 0   | 386,669                 | 403,910                     |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 2,109,828            | 2,113,034                   | 0   | 386,749                 | 404,004                     |

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



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

DIRECT BUSINESS IN THE STATE OF Minnesota

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 48,785        |   |            |                 | 48,785     |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 48,785        | 0                                       | 0          | 0               | 48,785     |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 676           |   |            |                 | 676        |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 676           | 0                                       | 0          | 0               | 676        |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 159                                | 4,415,868   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 159                                | 4,415,868    |
| 21. Issued during year .....                          | 22                                 | 1,165,000   |   |             |                         |             |                                    |             | 22                                 | 1,165,000    |
| 22. Other changes to in force (Net) .....             | (6)                                | (160,868)   |   |             |                         |             |                                    |             | (6)                                | (160,868)    |
| 23. In force December 31 of current year .....        | 175                                | 5,420,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 175                                | 5,420,000    |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 17,566               | 17,568                      |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 17,166,459           | 17,192,651                  |   | 2,292,936               | 2,330,763                   |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 17,166,459           | 17,192,651                  | 0   | 2,292,936               | 2,330,763                   |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 17,184,025           | 17,210,219                  | 0   | 2,292,936               | 2,330,763                   |

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



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

DIRECT BUSINESS IN THE STATE OF Mississippi

DURING THE YEAR 2020

NAIC Group Code 0290

NAIC Company Code 77968

**LIFE INSURANCE**

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 15,930        |   |            |                 | 15,930     |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            | XXX             | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 15,930        | 0                                       | 0          | 0               | 15,930     |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  | 25,000        |   |            |                 | 25,000     |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 43            |   |            |                 | 43         |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 25,043        | 0                                       | 0          | 0               | 25,043     |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                | .1                                 | .25,000     |   |             |                         |             |                                    |             | .1                                 | .25,000      |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         | .1                                 | .25,000     |   |             |                         |             |                                    |             | .1                                 | .25,000      |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | .1                                 | .25,000     | 0   | .0          | 0                       | 0           | 0                                  | 0           | .1                                 | .25,000      |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | .1                                 | .25,000     | 0   | .0          | 0                       | 0           | 0                                  | 0           | .1                                 | .25,000      |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | .70                                | 1,715,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | .70                                | 1,715,000    |
| 21. Issued during year .....                          | 8                                  | 190,000     |   |             |                         |             |                                    |             | 8                                  | 190,000      |
| 22. Other changes to in force (Net) .....             | (10)                               | (165,000)   |   |             |                         |             |                                    |             | (10)                               | (165,000)    |
| 23. In force December 31 of current year .....        | 68                                 | 1,740,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 68                                 | 1,740,000    |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 5,057                | 5,058                       |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 1,216,051            | 1,217,906                   |   | 314,789                 | .301,335                    |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 1,216,051            | 1,217,906                   | 0   | 314,789                 | .301,335                    |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 1,221,108            | 1,222,964                   | 0   | 314,789                 | .301,335                    |

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



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

DIRECT BUSINESS IN THE STATE OF Missouri

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| <b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>  |         | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|---------|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  | 109,048 |               |   |            |                 | 109,048    |
| 2. Annuity considerations .....  |         |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |         | XXX           |   |            | XXX             | 0          |
| 4. Other considerations .....  |         |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  | 109,048 | 0             |   | 0          | 0               | 109,048    |
| <b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>                                      |         |               |   |            |                 |            |
| Life insurance:  |         |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |         |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |         |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |         |               |   |            |                 | 0          |
| 6.4 Other .....  |         |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   | 0       | 0             |   | 0          | 0               | 0          |
| Annuities:   |         |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |         |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |         |               |   |            |                 | 0          |
| 7.3 Other .....  |         |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   | 0       | 0             |   | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   | 0       | 0             |   | 0          | 0               | 0          |
| <b>DIRECT CLAIMS AND BENEFITS PAID</b>   |         |               |   |            |                 |            |
| 9. Death benefits .....  |         |               |   |            |                 | 0          |
| 10. Matured endowments .....   |         |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |         |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |         | 422           |   |            |                 | 422        |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |         | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |         |               |   |            |                 | 0          |
| 15. Totals .....   | 422     | 0             |   | 0          | 0               | 422        |
| <b>DETAILS OF WRITE-INS</b>  |         |               |   |            |                 |            |
| 1301. ....   |         |               |   |            |                 |            |
| 1302. ....   |         |               |   |            |                 |            |
| 1303. ....   |         |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  | 0       | 0             |   | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              | 0       | 0             |   | 0          | 0               | 0          |

| <b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b> | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|--|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|  | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....                     |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                       |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                                 |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....                  |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                       | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                                   |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                                 | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| <b>POLICY EXHIBIT</b>  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....                   | 251                                | 9,420,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 251                                | 9,420,000    |
| 21. Issued during year .....                                 | .90                                | 2,895,000   |   |             |                         |             |                                    |             | .90                                | 2,895,000    |
| 22. Other changes to in force (Net) .....                    | (23)                               | (1,110,000) |   |             |                         |             |                                    |             | (23)                               | (1,110,000)  |
| 23. In force December 31 of current year .....               | 318                                | 11,205,000  | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 318                                | 11,205,000   |

(a) Includes Individual Credit Life Insurance prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 73,370               | 73,378                      |   | 1,615                   | 1,899                       |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 9,887,567            | 9,902,653                   |   | 1,728,259               | 1,845,919                   |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 9,887,567            | 9,902,653                   | 0   | 1,728,259               | 1,845,919                   |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 9,960,937            | 9,976,031                   | 0   | 1,729,874               | 1,847,818                   |

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



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

DIRECT BUSINESS IN THE STATE OF Montana

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 14,042        |   |            |                 | 14,042     |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            | XXX             | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 14,042        | 0                                       | 0          | 0               | 14,042     |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 2,199         |   |            |                 | 2,199      |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 2,199         | 0                                       | 0          | 0               | 2,199      |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 24                                 | 1,395,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 24                                 | 1,395,000    |
| 21. Issued during year .....                          |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 22. Other changes to in force (Net) .....             | (2)                                | (125,000)   |   |             |                         |             |                                    |             | (2)                                | (125,000)    |
| 23. In force December 31 of current year .....        | 22                                 | 1,270,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 22                                 | 1,270,000    |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  |                      |                             |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 3,179,871            | 3,184,723                   |   | 547,951                 | 539,549                     |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 3,179,871            | 3,184,723                   | 0   | 547,951                 | 539,549                     |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 3,179,871            | 3,184,723                   | 0   | 547,951                 | 539,549                     |

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



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

DIRECT BUSINESS IN THE STATE OF Nebraska

DURING THE YEAR 2020

NAIC Group Code 0290

**LIFE INSURANCE**

NAIC Company Code 77968

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 22,359        |   |            |                 | 22,359     |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 22,359        | 0                                       | 0          | 0               | 22,359     |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  | 5,650         |   |            |                 | 5,650      |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 4,005         |   |            |                 | 4,005      |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 9,655         | 0                                       | 0          | 0               | 9,655      |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                | .1                                 | 5,650       |   |             |                         |             |                                    |             | .1                                 | 5,650        |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         | .1                                 | 5,650       |   |             |                         |             |                                    |             | .1                                 | 5,650        |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | .1                                 | 5,650       | 0   | .0          | 0                       | 0           | 0                                  | 0           | .1                                 | 5,650        |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | .1                                 | 5,650       | 0   | .0          | 0                       | 0           | 0                                  | 0           | .1                                 | 5,650        |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | .66                                | 1,998,186   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | .66                                | 1,998,186    |
| 21. Issued during year .....                          | 7                                  | 250,000     |   |             |                         |             |                                    |             | 7                                  | 250,000      |
| 22. Other changes to in force (Net) .....             | 2                                  | 114,350     |   |             |                         |             |                                    |             | 2                                  | 114,350      |
| 23. In force December 31 of current year .....        | 75                                 | 2,362,536   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 75                                 | 2,362,536    |

(a) Includes Individual Credit Life Insurance prior year \$ ..... , current year \$ .....  
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..... , current year \$ .....  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..... , current year \$ .....

**ACCIDENT AND HEALTH INSURANCE**

|  |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|--|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                   |  | 124,064              | 124,076                     |   | 13,000                  | 15,286                      |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....  |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                       |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....    |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees      |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                     |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                 |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                            |  | 9,777,421            | 9,792,339                   |   | 4,571,646               | 4,468,624                   |
| 25.3 Non-renewable for stated reasons only (b) .....           |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                 |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....                                       |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                  |  | 9,777,421            | 9,792,339                   | 0   | 4,571,646               | 4,468,624                   |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) ..... |  | 9,901,485            | 9,916,415                   | 0   | 4,584,646               | 4,483,910                   |

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



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

DIRECT BUSINESS IN THE STATE OF Nevada

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| <b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>  |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 9,607         |   |            |                 | 9,607      |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            | XXX             | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 9,607         | 0                                       | 0          | 0               | 9,607      |
| <b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>                                      |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| <b>DIRECT CLAIMS AND BENEFITS PAID</b>   |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  |               |   |            |                 | 0          |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| <b>DETAILS OF WRITE-INS</b>  |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| <b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b> | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|--|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|  | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....                     |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                       |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                                 |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....                  |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                       | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                                   |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                                 | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| <b>POLICY EXHIBIT</b>  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....                   | 28                                 | 1,140,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 28                                 | 1,140,000    |
| 21. Issued during year .....                                 | 2                                  | 225,000     |   |             |                         |             |                                    |             | 2                                  | 225,000      |
| 22. Other changes to in force (Net) .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 23. In force December 31 of current year .....               | 30                                 | 1,365,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 30                                 | 1,365,000    |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 3,976                | 3,977                       |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 1,198,937            | 1,200,766                   |   | 190,942                 | 212,865                     |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 1,198,937            | 1,200,766                   | 0   | 190,942                 | 212,865                     |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 1,202,913            | 1,204,743                   | 0   | 190,942                 | 212,865                     |

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



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

DIRECT BUSINESS IN THE STATE OF New Hampshire

DURING THE YEAR 2020

NAIC Group Code 0290

**LIFE INSURANCE**

NAIC Company Code 77968

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 10,443        |   |            |                 | 10,443     |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            | XXX             | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 10,443        | 0                                       | 0          | 0               | 10,443     |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 320           |   |            |                 | 320        |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 320           | 0                                       | 0          | 0               | 320        |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 16                                 | 595,000     | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 16                                 | .595,000     |
| 21. Issued during year .....                          |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 22. Other changes to in force (Net) .....             | (3)                                | (60,000)    |   |             |                         |             |                                    |             | (3)                                | (60,000)     |
| 23. In force December 31 of current year .....        | 13                                 | 535,000     | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 13                                 | 535,000      |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|  |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|--|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                   |  |                      |                             |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....  |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                       |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....    |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees      |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                     |  |                      |                             |   |                         |                             |
| 25.1 Non-cancelable (b) .....                                  |  | 287,650              | 289,340                     |   | 13,563                  | 3,267                       |
| 25.2 Guaranteed renewable (b) .....                            |  | 192,351              | 192,644                     |   | 90,405                  | 92,729                      |
| 25.3 Non-renewable for stated reasons only (b) .....           |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                 |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....                                       |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                  |  | 480,001              | 481,984                     | 0   | 103,968                 | 95,996                      |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) ..... |  | 480,001              | 481,984                     | 0   | 103,968                 | 95,996                      |

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



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

DIRECT BUSINESS IN THE STATE OF New Jersey

DURING THE YEAR 2020

NAIC Group Code 0290

**LIFE INSURANCE**

NAIC Company Code 77968

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 1,474         |   |            |                 | 1,474      |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            | XXX             | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 1,474         | 0                                       | 0          | 0               | 1,474      |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  |               |   |            |                 | 0          |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 3                                  | 150,000     | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 3                                  | 150,000      |
| 21. Issued during year .....                          |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 22. Other changes to in force (Net) .....             |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 23. In force December 31 of current year .....        | 3                                  | 150,000     | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 3                                  | 150,000      |

(a) Includes Individual Credit Life Insurance prior year \$ ..... , current year \$ .....  
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..... , current year \$ .....  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..... , current year \$ .....

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 2,951                | 2,951                       |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 102,915              | 103,072                     |   | 17,723                  | 18,179                      |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 102,915              | 103,072                     | 0   | 17,723                  | 18,179                      |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 105,866              | 106,023                     | 0   | 17,723                  | 18,179                      |

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



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

DIRECT BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2020

NAIC Group Code 0290

NAIC Company Code 77968

**LIFE INSURANCE**

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 18,834        |   |            |                 | 18,834     |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            | XXX             | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 18,834        | 0                                       | 0          | 0               | 18,834     |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuites:  |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 6,043         |   |            |                 | 6,043      |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 6,043         | 0                                       | 0          | 0               | 6,043      |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | .45                                | 1,435,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | .45                                | 1,435,000    |
| 21. Issued during year .....                          | .15                                | 530,000     |   |             |                         |             |                                    |             | .15                                | .530,000     |
| 22. Other changes to in force (Net) .....             | (.4)                               | (120,000)   |   |             |                         |             |                                    |             | (.4)                               | (120,000)    |
| 23. In force December 31 of current year .....        | 56                                 | 1,845,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 56                                 | 1,845,000    |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 4,184                | 4,184                       |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 1,873,815            | 1,876,674                   |   | 546,425                 | .562,774                    |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 1,873,815            | 1,876,674                   | 0   | 546,425                 | .562,774                    |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 1,877,999            | 1,880,858                   | 0   | 546,425                 | .562,774                    |

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



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

DIRECT BUSINESS IN THE STATE OF New York

**DURING THE YEAR 2020**

NAIC Group Code 0290

## LIFE INSURANCE

NAIC Company Code 77968

| DIRECT PREMIUMS<br>AND ANNUITY CONSIDERATIONS   | 1        | 2                                     | 3     | 4          | 5     |
|---|----------|---------------------------------------|-------|------------|-------|
|   | Ordinary | Credit Life (Group<br>and Individual) | Group | Industrial | Total |
| 1. Life insurance .....   |          |                                       |       |            |       |
| 2. Annuity considerations .....   |          |                                       |       |            |       |
| 3. Deposit-type contract funds .....  |          | XXX                                   |       | XXX        |       |
| 4. Other considerations .....   |          |                                       |       |            |       |
| 5. Totals (Sum of Lines 1 to 4)   |          |                                       |       |            |       |
| <b>DIRECT DIVIDENDS TO<br/>POLICYHOLDERS/REFUNDS TO MEMBERS</b>                                     |          |                                       |       |            |       |
| Life insurance:   |          |                                       |       |            |       |
| 6.1 Paid in cash or left on deposit .....   |          |                                       |       |            |       |
| 6.2 Applied to pay renewal premiums .....   |          |                                       |       |            |       |
| 6.3 Applied to provide paid-up additions or shorten the<br>endowment or premium-paying period ..... |          |                                       |       |            |       |
| 6.4 Other .....   |          |                                       |       |            |       |
| 6.5 Totals (Sum of Lines 6.1 to 6.4)  |          |                                       |       |            |       |
| Annuities:  |          |                                       |       |            |       |
| 7.1 Paid in cash or left on deposit .....   |          |                                       |       |            |       |
| 7.2 Applied to provide paid-up annuities .....  |          |                                       |       |            |       |
| 7.3 Other .....   |          |                                       |       |            |       |
| 7.4 Totals (Sum of Lines 7.1 to 7.3)  |          |                                       |       |            |       |
| 8. Grand Totals (Lines 6.5 plus 7.4)  |          |                                       |       |            |       |
| <b>DIRECT CLAIMS AND BENEFITS PAID</b>  |          |                                       |       |            |       |
| 9. Death benefits .....   |          |                                       |       |            |       |
| 10. Matured endowments .....  |          |                                       |       |            |       |
| 11. Annuity benefits .....  |          |                                       |       |            |       |
| 12. Surrender values and withdrawals for life contracts .....                                       |          |                                       |       |            |       |
| 13. Aggregate write-ins for miscellaneous direct claims<br>and benefits paid .....                  |          |                                       |       |            |       |
| 14. All other benefits, except accident and health .....  |          |                                       |       |            |       |
| 15. Totals  |          |                                       |       |            |       |
| <b>DETAILS OF WRITE-INS</b>   |          |                                       |       |            |       |
| 1301. ....  |          |                                       |       |            |       |
| 1302. ....  |          |                                       |       |            |       |
| 1303. ....  |          |                                       |       |            |       |
| 1398. Summary of Line 13 from overflow page .....   |          |                                       |       |            |       |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13<br>above)                                    |          |                                       |       |            |       |

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

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

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

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

## ACCIDENT AND HEALTH INSURANCE

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

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



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

DIRECT BUSINESS IN THE STATE OF North Carolina

DURING THE YEAR 2020

NAIC Group Code 0290

**LIFE INSURANCE**

NAIC Company Code 77968

| <b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>  |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 134,658       |   |            |                 | 134,658    |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 134,658       | 0                                       | 0          | 0               | 134,658    |
| <b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>                                      |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| <b>DIRECT CLAIMS AND BENEFITS PAID</b>   |  |               |   |            |                 |            |
| 9. Death benefits .....  |  | 50,000        |   |            |                 | 50,000     |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 5,151         |   |            |                 | 5,151      |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 55,151        | 0                                       | 0          | 0               | 55,151     |
| <b>DETAILS OF WRITE-INS</b>  |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| <b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b> | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|--|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|  | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....                     |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                       | 2                                  | 50,000      |   |             |                         |             |                                    |             | 2                                  | 50,000       |
| Settled during current year:                                 |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                                | 2                                  | 50,000      |   |             |                         |             |                                    |             | 2                                  | 50,000       |
| 18.2 By payment on compromised claims .....                  |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                       | 2                                  | 50,000      | 0   | 0           | 0                       | 0           | 0                                  | 0           | 2                                  | 50,000       |
| 18.4 Reduction by compromise .....                           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                                   |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                                 | 2                                  | 50,000      | 0   | 0           | 0                       | 0           | 0                                  | 0           | 2                                  | 50,000       |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| <b>POLICY EXHIBIT</b>  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....                   | 538                                | 13,250,500  | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 538                                | 13,250,500   |
| 21. Issued during year .....                                 | .41                                | 930,000     |   |             |                         |             |                                    |             | .41                                | .930,000     |
| 22. Other changes to in force (Net) .....                    | (53)                               | (1,205,000) |   |             |                         |             |                                    |             | (53)                               | (1,205,000)  |
| 23. In force December 31 of current year .....               | 526                                | 12,975,500  | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 526                                | 12,975,500   |

(a) Includes Individual Credit Life Insurance prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 5,617                | 5,618                       |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 11,397,421           | 11,414,811                  |   | 3,879,574               | 3,880,560                   |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 11,397,421           | 11,414,811                  | 0   | 3,879,574               | 3,880,560                   |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 11,403,038           | 11,420,429                  | 0   | 3,879,574               | 3,880,560                   |

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



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

DIRECT BUSINESS IN THE STATE OF North Dakota

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 5,610         |   |            |                 | 5,610      |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            | XXX             | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 5,610         | 0                                       | 0          | 0               | 5,610      |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 27            |   |            |                 | 27         |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 27            | 0                                       | 0          | 0               | 27         |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 26                                 | 690,000     | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 26                                 | .690,000     |
| 21. Issued during year .....                          | .1                                 | 100,000     |   |             |                         |             |                                    |             | .1                                 | .100,000     |
| 22. Other changes to in force (Net) .....             | (3)                                | (65,000)    |   |             |                         |             |                                    |             | (3)                                | (65,000)     |
| 23. In force December 31 of current year .....        | 24                                 | 725,000     | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 24                                 | 725,000      |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 1,335                | 1,335                       |   | 1,376                   | 1,618                       |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 1,939,558            | 1,942,518                   |   | 383,396                 | .398,231                    |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 1,939,558            | 1,942,518                   | 0   | 383,396                 | .398,231                    |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 1,940,893            | 1,943,853                   | 0   | 384,772                 | .399,849                    |

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



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

DIRECT BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2020

NAIC Group Code 0290

NAIC Company Code 77968

**LIFE INSURANCE**

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 88,156        |   |            |                 | 88,156     |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 88,156        | 0                                       | 0          | 0               | 88,156     |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  | 6,955         |   |            |                 | 6,955      |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 21,167        |   |            |                 | 21,167     |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 28,122        | 0                                       | 0          | 0               | 28,122     |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                | .1                                 | 6,955       |   |             |                         |             |                                    |             | .1                                 | 6,955        |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         | .1                                 | 6,955       |   |             |                         |             |                                    |             | .1                                 | 6,955        |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | .1                                 | 6,955       | 0   | .0          | 0                       | 0           | 0                                  | 0           | .1                                 | 6,955        |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | .1                                 | 6,955       | 0   | .0          | 0                       | 0           | 0                                  | 0           | .1                                 | 6,955        |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 255                                | 7,626,704   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 255                                | 7,626,704    |
| 21. Issued during year .....                          | .34                                | 980,000     |   |             |                         |             |                                    |             | .34                                | .980,000     |
| 22. Other changes to in force (Net) .....             | (1)                                | (301,955)   |   |             |                         |             |                                    |             | (1)                                | (301,955)    |
| 23. In force December 31 of current year .....        | 288                                | 8,304,749   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 288                                | 8,304,749    |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|  |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|--|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                   |  | 7,991                | 7,992                       |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....  |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                       |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....    |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees      |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                     |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                 |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                            |  | 22,383,997           | 22,418,150                  |   | 18,169,551              | 17,819,865                  |
| 25.3 Non-renewable for stated reasons only (b) .....           |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                 |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....                                       |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                  |  | 22,383,997           | 22,418,150                  | 0   | 18,169,551              | 17,819,865                  |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) ..... |  | 22,391,988           | 22,426,142                  | 0   | 18,169,551              | 17,819,865                  |

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



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

DIRECT BUSINESS IN THE STATE OF Oklahoma

DURING THE YEAR 2020

NAIC Group Code 0290

NAIC Company Code 77968

**LIFE INSURANCE**

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 87,673        |   |            |                 | 87,673     |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            | XXX             | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 87,673        | 0                                       | 0          | 0               | 87,673     |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 3,975         |   |            |                 | 3,975      |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 3,975         | 0                                       | 0          | 0               | 3,975      |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 215                                | 6,685,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 215                                | 6,685,000    |
| 21. Issued during year .....                          | 133                                | 3,455,000   |   |             |                         |             |                                    |             | 133                                | 3,455,000    |
| 22. Other changes to in force (Net) .....             | (54)                               | (1,910,000) |   |             |                         |             |                                    |             | (54)                               | (1,910,000)  |
| 23. In force December 31 of current year .....        | 294                                | 8,230,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 294                                | 8,230,000    |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4 |         | 5<br>Direct Losses Incurred |
|--|----------------------|-----------------------------|---|---|---------|-----------------------------|
|  |                      |                             |   | 4 | 5       |                             |
| 24. Group Policies (b) .....                                   | 5,905                | 5,906                       |   |   | 10,000  | 11,278                      |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....  |                      |                             |   |   |         |                             |
| 24.2 Credit (Group and Individual) .....                       |                      |                             |   |   |         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....    |                      |                             |   |   |         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees      |                      |                             |   |   |         |                             |
| Other Individual Policies:                                     |                      |                             |   |   |         |                             |
| 25.1 Non-cancellable (b) .....                                 |                      |                             |   |   |         |                             |
| 25.2 Guaranteed renewable (b) .....                            | 4,428,723            | 4,435,480                   |   |   | 989,794 | 989,399                     |
| 25.3 Non-renewable for stated reasons only (b) .....           |                      |                             |   |   |         |                             |
| 25.4 Other accident only .....                                 |                      |                             |   |   |         |                             |
| 25.5 All other (b) .....                                       |                      |                             |   |   |         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                  | 4,428,723            | 4,435,480                   | 0   |   | 989,794 | 989,399                     |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) ..... | 4,434,628            | 4,441,386                   | 0   |   | 999,794 | 1,000,677                   |

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



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

DIRECT BUSINESS IN THE STATE OF Oregon

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 6,953         |   |            |                 | 6,953      |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            | XXX             | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 6,953         | 0                                       | 0          | 0               | 6,953      |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 1,219         |   |            |                 | 1,219      |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 1,219         | 0                                       | 0          | 0               | 1,219      |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 27                                 | 615,000     | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 27                                 | .615,000     |
| 21. Issued during year .....                          | .1                                 | 20,000      |   |             |                         |             |                                    |             | .1                                 | 20,000       |
| 22. Other changes to in force (Net) .....             | (4)                                | (85,000)    |   |             |                         |             |                                    |             | (4)                                | (85,000)     |
| 23. In force December 31 of current year .....        | 24                                 | 550,000     | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 24                                 | 550,000      |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 360                  | 360                         |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 1,741,367            | 1,744,024                   |   | 221,473                 | 216,683                     |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 1,741,367            | 1,744,024                   | 0   | 221,473                 | 216,683                     |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 1,741,727            | 1,744,384                   | 0   | 221,473                 | 216,683                     |

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



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

DIRECT BUSINESS IN THE STATE OF Pennsylvania

DURING THE YEAR 2020

NAIC Group Code 0290

**LIFE INSURANCE**

NAIC Company Code 77968

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 20,407        |   |            |                 | 20,407     |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            | XXX             | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 20,407        | 0                                       | 0          | 0               | 20,407     |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 13            |   |            |                 | 13         |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 13            | 0                                       | 0          | 0               | 13         |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 66                                 | 1,760,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 66                                 | 1,760,000    |
| 21. Issued during year .....                          | 7                                  | 135,000     |   |             |                         |             |                                    |             | 7                                  | 135,000      |
| 22. Other changes to in force (Net) .....             | (3)                                | (95,000)    |   |             |                         |             |                                    |             | (3)                                | (95,000)     |
| 23. In force December 31 of current year .....        | 70                                 | 1,800,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 70                                 | 1,800,000    |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|  |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|--|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                   |  | 7,634                | 7,635                       |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....  |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                       |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....    |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees      |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                     |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                 |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                            |  | 2,931,893            | 2,936,366                   |   | 979,100                 | 976,439                     |
| 25.3 Non-renewable for stated reasons only (b) .....           |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                 |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....                                       |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                  |  | 2,931,893            | 2,936,366                   | 0   | 979,100                 | 976,439                     |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) ..... |  | 2,939,527            | 2,944,001                   | 0   | 979,100                 | 976,439                     |

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



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

DIRECT BUSINESS IN THE STATE OF Rhode Island

**DURING THE YEAR 2020**

NAIC Group Code 0290

## LIFE INSURANCE

NAIC Company Code 77968

| DIRECT PREMIUMS<br>AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group<br>and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|---|--|---------------|--|------------|-----------------|------------|
| 1. Life insurance .....   |  |               |  |            |                 |            |
| 2. Annuity considerations .....   |  |               |  |            |                 |            |
| 3. Deposit-type contract funds .....  |  |               | XXX  |            |                 |            |
| 4. Other considerations .....   |  |               |  |            | XXX             |            |
| 5. Totals (Sum of Lines 1 to 4)   |  |               |  |            |                 |            |
| <b>DIRECT DIVIDENDS TO<br/>POLICYHOLDERS/REFUNDS TO MEMBERS</b>                                     |  |               |  |            |                 |            |
| Life insurance:   |  |               |  |            |                 |            |
| 6.1 Paid in cash or left on deposit .....   |  |               |  |            |                 |            |
| 6.2 Applied to pay renewal premiums .....   |  |               |  |            |                 |            |
| 6.3 Applied to provide paid-up additions or shorten the<br>endowment or premium-paying period ..... |  |               |  |            |                 |            |
| 6.4 Other .....   |  |               |  |            |                 |            |
| 6.5 Totals (Sum of Lines 6.1 to 6.4)  |  |               |  |            |                 |            |
| Annuities:  |  |               |  |            |                 |            |
| 7.1 Paid in cash or left on deposit .....   |  |               |  |            |                 |            |
| 7.2 Applied to provide paid-up annuities .....  |  |               |  |            |                 |            |
| 7.3 Other .....   |  |               |  |            |                 |            |
| 7.4 Totals (Sum of Lines 7.1 to 7.3)  |  |               |  |            |                 |            |
| 8. Grand Totals (Lines 6.5 plus 7.4)  |  |               |  |            |                 |            |
| <b>DIRECT CLAIMS AND BENEFITS PAID</b>  |  |               |  |            |                 |            |
| 9. Death benefits .....   |  |               |  |            |                 |            |
| 10. Matured endowments .....  |  |               |  |            |                 |            |
| 11. Annuity benefits .....  |  |               |  |            |                 |            |
| 12. Surrender values and withdrawals for life contracts .....                                       |  |               |  |            |                 |            |
| 13. Aggregate write-ins for miscellaneous direct claims<br>and benefits paid .....                  |  |               |  |            |                 |            |
| 14. All other benefits, except accident and health .....  |  |               |  |            |                 |            |
| 15. Totals  |  |               |  |            |                 |            |
| <b>DETAILS OF WRITE-INS</b>   |  |               |  |            |                 |            |
| 1301. ....  |  |               |  |            |                 |            |
| 1302. ....  |  |               |  |            |                 |            |
| 1303. ....  |  |               |  |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....   |  |               |  |            |                 |            |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13<br>above)                                    |  |               |  |            |                 |            |

| DIRECT DEATH<br>BENEFITS AND<br>MATURED<br>ENDOWMENTS<br>INCURRED | Ordinary                           |             | Credit Life<br>(Group and Individual)         |             | Group                   |                        | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|------------------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount            | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....                          |                                    |             |   |             |                         |                        |                                    |             |                                    |              |
| 17. Incurred during current year                                  |                                    |             |   |             |                         |                        |                                    |             |                                    |              |
| Settled during current year:                                      |                                    |             |   |             |                         |                        |                                    |             |                                    |              |
| 18.1 By payment in full .....                                     |                                    |             |   |             |                         |                        |                                    |             |                                    |              |
| 18.2 By payment on compromised claims .....                       |                                    |             |   |             |                         |                        |                                    |             |                                    |              |
| 18.3 Totals paid .....  |                                    |             |   |             |                         |                        |                                    |             |                                    |              |
| 18.4 Reduction by compromise .....                                |                                    |             |   |             |                         |                        |                                    |             |                                    |              |
| 18.5 Amount rejected .....  |                                    |             |   |             |                         |                        |                                    |             |                                    |              |
| 18.6 Total settlements .....                                      |                                    |             |   |             |                         |                        |                                    |             |                                    |              |
| 19. Unpaid Dec. 31, current year (16+17-18.6)                     |                                    |             |   |             |                         |                        |                                    |             |                                    |              |
| <b>NONE</b>   |                                    |             |   |             |                         |                        |                                    |             |                                    |              |
| <b>POLICY EXHIBIT</b>   |                                    |             |   |             |                         | <b>No. of Policies</b> |                                    |             |                                    |              |
| 20. In force December 31, prior year .....                        |                                    |             |   | (a)         |                         |                        |                                    |             |                                    |              |
| 21. Issued during year .....                                      |                                    |             |   |             |                         |                        |                                    |             |                                    |              |
| 22. Other changes to in force (Net) .....                         |                                    |             |   |             |                         |                        |                                    |             |                                    |              |
| 23. In force December 31 of current year                          |                                    |             |   | (a)         |                         |                        |                                    |             |                                    |              |

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

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

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

## ACCIDENT AND HEALTH INSURANCE

| ACCIDENT AND HEALTH INSURANCE                             |                 |                        |  |                    |                        |
|---|-----------------|------------------------|--|--------------------|------------------------|
|   | 1               | 2                      | 3  | 4                  | 5                      |
|   | Direct Premiums | Direct Premiums Earned | Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | Direct Losses Paid | Direct Losses Incurred |
| 24. Group Policies (b)                                    | 328             | 328                    |  |                    |                        |
| 24.1 Federal Employees Health Benefits Plan premium (b)   |                 |                        |  |                    |                        |
| 24.2 Credit (Group and Individual)                        |                 |                        |  |                    |                        |
| 24.3 Collectively renewable policies/certificates (b)     |                 |                        |  |                    |                        |
| 24.4 Medicare Title XVIII exempt from state taxes or fees |                 |                        |  |                    |                        |
| Other Individual Policies:                                |                 |                        |  |                    |                        |
| 25.1 Non-cancelable (b)                                   | 372             | 374                    |  |                    |                        |
| 25.2 Guaranteed renewable (b)                             | 52,032          | 52,112                 |  | 15,240             | 15,632                 |
| 25.3 Non-renewable for stated reasons only (b)            |                 |                        |  |                    |                        |
| 25.4 Other accident only                                  |                 |                        |  |                    |                        |
| 25.5 All other (b)  |                 |                        |  |                    |                        |
| 25.6 Totals (sum of Lines 25.1 to 25.5)                   | 52,404          | 52,486                 | 0  | 15,240             | 15,632                 |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)  | 52,732          | 52,814                 | 0  | 15,240             | 15,632                 |

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



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

DIRECT BUSINESS IN THE STATE OF South Carolina

DURING THE YEAR 2020

NAIC Group Code 0290

**LIFE INSURANCE**

NAIC Company Code 77968

| <b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>  |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 81,650        |   |            |                 | 81,650     |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            | XXX             | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 81,650        | 0                                       | 0          | 0               | 81,650     |
| <b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>                                      |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| <b>DIRECT CLAIMS AND BENEFITS PAID</b>   |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 2,958         |   |            |                 | 2,958      |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 2,958         | 0                                       | 0          | 0               | 2,958      |
| <b>DETAILS OF WRITE-INS</b>  |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| <b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b> | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|--|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|  | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....                     |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                       |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                                 |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....                  |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                       | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                                   |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                                 | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| <b>POLICY EXHIBIT</b>  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....                   | 285                                | 6,480,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 285                                | 6,480,000    |
| 21. Issued during year .....                                 | 101                                | 3,270,000   |   |             |                         |             |                                    |             | 101                                | 3,270,000    |
| 22. Other changes to in force (Net) .....                    | (55)                               | (1,510,000) |   |             |                         |             |                                    |             | (55)                               | (1,510,000)  |
| 23. In force December 31 of current year .....               | 331                                | 8,240,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 331                                | 8,240,000    |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 2,613                | 2,613                       |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 3,432,965            | 3,438,203                   |   | 755,895                 | 741,702                     |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 3,432,965            | 3,438,203                   | 0   | 755,895                 | 741,702                     |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 3,435,578            | 3,440,816                   | 0   | 755,895                 | 741,702                     |

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



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

DIRECT BUSINESS IN THE STATE OF South Dakota

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 13,122        |   |            |                 | 13,122     |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            | XXX             | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 13,122        | 0                                       | 0          | 0               | 13,122     |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  | 75,000        |   |            |                 | 75,000     |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 2,305         |   |            |                 | 2,305      |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 77,305        | 0                                       | 0          | 0               | 77,305     |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                | .1                                 | 75,000      |   |             |                         |             |                                    |             | .1                                 | 75,000       |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         | .1                                 | 75,000      |   |             |                         |             |                                    |             | .1                                 | 75,000       |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | .1                                 | 75,000      | 0   | .0          | 0                       | 0           | 0                                  | 0           | .1                                 | 75,000       |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | .1                                 | 75,000      | 0   | .0          | 0                       | 0           | 0                                  | 0           | .1                                 | 75,000       |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | .38                                | 1,250,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | .38                                | 1,250,000    |
| 21. Issued during year .....                          | .18                                | 335,000     |   |             |                         |             |                                    |             | .18                                | 335,000      |
| 22. Other changes to in force (Net) .....             | (7)                                | (125,000)   |   |             |                         |             |                                    |             | (7)                                | (125,000)    |
| 23. In force December 31 of current year .....        | 49                                 | 1,460,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 49                                 | 1,460,000    |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 14,446               | 14,447                      |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 6,331,175            | 6,340,835                   |   | 3,288,495               | 3,421,971                   |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 6,331,175            | 6,340,835                   | 0   | 3,288,495               | 3,421,971                   |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 6,345,621            | 6,355,282                   | 0   | 3,288,495               | 3,421,971                   |

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



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

DIRECT BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2020

NAIC Group Code 0290

**LIFE INSURANCE**

NAIC Company Code 77968

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 149,295       |   |            |                 | 149,295    |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 149,295       | 0                                       | 0          | 0               | 149,295    |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  | 20,000        |   |            |                 | 20,000     |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 6,622         |   |            |                 | 6,622      |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 26,622        | 0                                       | 0          | 0               | 26,622     |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                | .1                                 | 20,000      |   |             |                         |             |                                    |             | .1                                 | 20,000       |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         | .1                                 | 20,000      |   |             |                         |             |                                    |             | .1                                 | 20,000       |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | .1                                 | 20,000      | 0   | .0          | 0                       | 0           | 0                                  | 0           | .1                                 | 20,000       |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | .1                                 | 20,000      | 0   | .0          | 0                       | 0           | 0                                  | 0           | .1                                 | 20,000       |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 297                                | 9,795,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 297                                | 9,795,000    |
| 21. Issued during year .....                          | .16                                | 570,000     |   |             |                         |             |                                    |             | .16                                | .570,000     |
| 22. Other changes to in force (Net) .....             | (16)                               | (395,000)   |   |             |                         |             |                                    |             | (16)                               | (395,000)    |
| 23. In force December 31 of current year .....        | 297                                | 9,970,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 297                                | 9,970,000    |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 16,363               | 16,364                      |   | 4,292                   | 5,047                       |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 6,504,082            | 6,514,006                   |   | 3,746,542               | 3,799,570                   |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 6,504,082            | 6,514,006                   | 0   | 3,746,542               | 3,799,570                   |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 6,520,445            | 6,530,370                   | 0   | 3,750,834               | 3,804,617                   |

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



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

DIRECT BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2020

NAIC Group Code 0290

NAIC Company Code 77968

**LIFE INSURANCE**

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 1,912,631     |   |            |                 | 1,912,631  |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 1,912,631     | 0                                       | 0          | 0               | 1,912,631  |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  | 125,000       |   |            |                 | 125,000    |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 161,318       |   |            |                 | 161,318    |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 286,318       | 0                                       | 0          | 0               | 286,318    |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |              | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|--------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount  | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |              |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                | 2                                  | 125,000      |   |             |                         |             |                                    |             | 2                                  | 125,000      |
| Settled during current year:                          |                                    |              |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         | 2                                  | 125,000      |   |             |                         |             |                                    |             | 2                                  | 125,000      |
| 18.2 By payment on compromised claims .....           |                                    |              |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 2                                  | 125,000      | 0   | 0           | 0                       | 0           | 0                                  | 0           | 2                                  | 125,000      |
| 18.4 Reduction by compromise .....                    |                                    |              |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |              |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 2                                  | 125,000      | 0   | 0           | 0                       | 0           | 0                                  | 0           | 2                                  | 125,000      |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0            | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |              |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 5,791                              | 170,233,000  | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 5,791                              | 170,233,000  |
| 21. Issued during year .....                          | 1,306                              | 37,880,000   |   |             |                         |             |                                    |             | 1,306                              | 37,880,000   |
| 22. Other changes to in force (Net) .....             | (905)                              | (28,615,000) |   |             |                         |             |                                    |             | (905)                              | (28,615,000) |
| 23. In force December 31 of current year .....        | 6,192                              | 179,498,000  | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 6,192                              | 179,498,000  |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4 |            | 5<br>Direct Losses Incurred |
|--|----------------------|-----------------------------|---|---|------------|-----------------------------|
|  |                      |                             |   | 4 | 5          |                             |
| 24. Group Policies (b) .....                                   | 33,983               | 33,986                      |   |   | 400        | 470                         |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....  |                      |                             |   |   |            |                             |
| 24.2 Credit (Group and Individual) .....                       |                      |                             |   |   |            |                             |
| 24.3 Collectively renewable policies/certificates (b) .....    |                      |                             |   |   |            |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees      |                      |                             |   |   |            |                             |
| Other Individual Policies:                                     |                      |                             |   |   |            |                             |
| 25.1 Non-cancellable (b) .....                                 |                      |                             |   |   |            |                             |
| 25.2 Guaranteed renewable (b) .....                            | 65,862,661           | 65,963,153                  |   |   | 18,399,398 | 18,729,805                  |
| 25.3 Non-renewable for stated reasons only (b) .....           |                      |                             |   |   |            |                             |
| 25.4 Other accident only .....                                 |                      |                             |   |   |            |                             |
| 25.5 All other (b) .....                                       |                      |                             |   |   |            |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                  | 65,862,661           | 65,963,153                  | 0   |   | 18,399,398 | 18,729,805                  |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) ..... | 65,896,644           | 65,997,139                  | 0   |   | 18,399,798 | 18,730,275                  |

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



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

DIRECT BUSINESS IN THE STATE OF Utah

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 3,542         |   |            |                 | 3,542      |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 3,542         | 0                                       | 0          | 0               | 3,542      |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  |               |   |            |                 | 0          |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 3                                  | 175,000     | 0   | (a) 0       | 0                       | 0           | 0                                  | 0           | 3                                  | 175,000      |
| 21. Issued during year .....                          | .1                                 | 25,000      |   |             |                         |             |                                    |             | .1                                 | 25,000       |
| 22. Other changes to in force (Net) .....             |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 23. In force December 31 of current year .....        | 4                                  | 200,000     | 0   | (a) 0       | 0                       | 0           | 0                                  | 0           | 4                                  | 200,000      |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 529                  | 529                         |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  | 459                  | 462                         |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 4,545,349            | 4,552,284                   |   | 566,473                 | .589,324                    |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 4,545,808            | 4,552,746                   | 0   | 566,473                 | .589,324                    |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 4,546,337            | 4,553,275                   | 0   | 566,473                 | .589,324                    |

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



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

DIRECT BUSINESS IN THE STATE OF Vermont

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 1,684         |   |            |                 | 1,684      |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            | XXX             | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 1,684         | 0                                       | 0          | 0               | 1,684      |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  |               |   |            |                 | 0          |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 2                                  | 125,000     | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 2                                  | 125,000      |
| 21. Issued during year .....                          |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 22. Other changes to in force (Net) .....             |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 23. In force December 31 of current year .....        | 2                                  | 125,000     | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 2                                  | 125,000      |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 420                  | 420                         |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 34,111               | 34,163                      |   | 2,740                   | 2,810                       |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 34,111               | 34,163                      | 0   | 2,740                   | 2,810                       |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 34,531               | 34,583                      | 0   | 2,740                   | 2,810                       |

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



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

DIRECT BUSINESS IN THE STATE OF Virginia

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| <b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>  |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 90,598        |   |            |                 | 90,598     |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 90,598        | 0                                       | 0          | 0               | 90,598     |
| <b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>                                      |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| <b>DIRECT CLAIMS AND BENEFITS PAID</b>   |  |               |   |            |                 |            |
| 9. Death benefits .....  |  | 25,000        |   |            |                 | 25,000     |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 25,876        |   |            |                 | 25,876     |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 50,876        | 0                                       | 0          | 0               | 50,876     |
| <b>DETAILS OF WRITE-INS</b>  |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| <b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b> | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|--|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|  | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....                     |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                       | 1                                  | 25,000      |   |             |                         |             |                                    |             | 1                                  | 25,000       |
| Settled during current year:                                 |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                                | 1                                  | 25,000      |   |             |                         |             |                                    |             | 1                                  | 25,000       |
| 18.2 By payment on compromised claims .....                  |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                       | 1                                  | 25,000      | 0   | 0           | 0                       | 0           | 0                                  | 0           | 1                                  | 25,000       |
| 18.4 Reduction by compromise .....                           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                                   |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                                 | 1                                  | 25,000      | 0   | 0           | 0                       | 0           | 0                                  | 0           | 1                                  | 25,000       |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| <b>POLICY EXHIBIT</b>  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....                   | 347                                | 7,367,142   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 347                                | 7,367,142    |
| 21. Issued during year .....                                 | 15                                 | 515,000     |   |             |                         |             |                                    |             | 15                                 | 515,000      |
| 22. Other changes to in force (Net) .....                    | (52)                               | (1,460,049) |   |             |                         |             |                                    |             | (52)                               | (1,460,049)  |
| 23. In force December 31 of current year .....               | 310                                | 6,422,093   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 310                                | 6,422,093    |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|  |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|--|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                   |  | 7,946                | 7,947                       |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....  |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                       |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....    |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees      |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                     |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                 |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                            |  | 5,486,616            | 5,494,987                   |   | 2,710,509               | 2,841,451                   |
| 25.3 Non-renewable for stated reasons only (b) .....           |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                 |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....                                       |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                  |  | 5,486,616            | 5,494,987                   | 0   | 2,710,509               | 2,841,451                   |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) ..... |  | 5,494,562            | 5,502,934                   | 0   | 2,710,509               | 2,841,451                   |

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



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

DIRECT BUSINESS IN THE STATE OF Washington

DURING THE YEAR 2020

NAIC Group Code 0290

**LIFE INSURANCE**

NAIC Company Code 77968

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 104,428       |   |            |                 | 104,428    |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 104,428       | 0                                       | 0          | 0               | 104,428    |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 17,169        |   |            |                 | 17,169     |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 17,169        | 0                                       | 0          | 0               | 17,169     |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 179                                | 8,795,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 179                                | 8,795,000    |
| 21. Issued during year .....                          | .1                                 | 25,000      |   |             |                         |             |                                    |             | .1                                 | 25,000       |
| 22. Other changes to in force (Net) .....             | (19)                               | (965,000)   |   |             |                         |             |                                    |             | (19)                               | (965,000)    |
| 23. In force December 31 of current year .....        | 161                                | 7,855,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 161                                | 7,855,000    |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|   |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|---|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                    |  | 5,721                | 5,721                       |   | 10,347                  | 12,166                      |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....   |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                        |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....     |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees ..... |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                      |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                  |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                             |  | 4,132,177            | 4,138,482                   |   | 648,928                 | 655,200                     |
| 25.3 Non-renewable for stated reasons only (b) .....            |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                  |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....  |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                   |  | 4,132,177            | 4,138,482                   | 0   | 648,928                 | 655,200                     |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....  |  | 4,137,898            | 4,144,203                   | 0   | 659,275                 | 667,366                     |

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



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

DIRECT BUSINESS IN THE STATE OF West Virginia

DURING THE YEAR 2020

NAIC Group Code 0290

**LIFE INSURANCE**

NAIC Company Code 77968

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 76,382        |   |            |                 | 76,382     |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            | XXX             | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 76,382        | 0                                       | 0          | 0               | 76,382     |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 2,098         |   |            |                 | 2,098      |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 2,098         | 0                                       | 0          | 0               | 2,098      |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | 310                                | 7,411,764   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 310                                | 7,411,764    |
| 21. Issued during year .....                          | .25                                | 485,000     |   |             |                         |             |                                    |             | .25                                | 485,000      |
| 22. Other changes to in force (Net) .....             | (23)                               | (540,000)   |   |             |                         |             |                                    |             | (23)                               | (540,000)    |
| 23. In force December 31 of current year .....        | 312                                | 7,356,764   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 312                                | 7,356,764    |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|  |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|--|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                   |  | 1,764                | 1,764                       |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....  |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                       |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....    |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees      |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                     |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                 |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                            |  | 3,902,770            | 3,908,725                   |   | 772,497                 | .799,206                    |
| 25.3 Non-renewable for stated reasons only (b) .....           |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                 |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....                                       |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                  |  | 3,902,770            | 3,908,725                   | 0   | 772,497                 | .799,206                    |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) ..... |  | 3,904,534            | 3,910,489                   | 0   | 772,497                 | .799,206                    |

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



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

DIRECT BUSINESS IN THE STATE OF Wisconsin

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 13,235        |   |            |                 | 13,235     |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 13,235        | 0                                       | 0          | 0               | 13,235     |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  |               |   |            |                 | 0          |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | .42                                | 1,030,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | .42                                | 1,030,000    |
| 21. Issued during year .....                          | .15                                | 995,000     |   |             |                         |             |                                    |             | .15                                | 995,000      |
| 22. Other changes to in force (Net) .....             | (7)                                | (210,000)   |   |             |                         |             |                                    |             | (7)                                | (210,000)    |
| 23. In force December 31 of current year .....        | 50                                 | 1,815,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 50                                 | 1,815,000    |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
|  |                      |                             |   |                         |                             |
| 24. Group Policies (b) .....                                   | 24,066               | 24,068                      |   | 144                     | 169                         |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                       |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....    |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees      |                      |                             |   |                         |                             |
| Other Individual Policies:                                     |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                 |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                            | 6,313,907            | 6,323,541                   |   | 556,604                 | 554,768                     |
| 25.3 Non-renewable for stated reasons only (b) .....           |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                 |                      |                             |   |                         |                             |
| 25.5 All other (b) .....                                       |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                  | 6,313,907            | 6,323,541                   | 0   | 556,604                 | 554,768                     |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) ..... | 6,337,973            | 6,347,609                   | 0   | 556,748                 | 554,937                     |

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



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

DIRECT BUSINESS IN THE STATE OF Wyoming

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  | 11,781        |   |            |                 | 11,781     |
| 2. Annuity considerations .....  |  |               |   |            |                 | 0          |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            |                 | 0          |
| 4. Other considerations .....  |  |               |   |            |                 | 0          |
| 5. Totals (Sum of Lines 1 to 4) .....  |  | 11,781        | 0                                       | 0          | 0               | 11,781     |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS   |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 | 0          |
| 6.4 Other .....  |  |               |   |            |                 | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuities:   |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 | 0          |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 | 0          |
| 7.3 Other .....  |  |               |   |            |                 | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 | 0          |
| 10. Matured endowments .....   |  |               |   |            |                 | 0          |
| 11. Annuity benefits .....   |  |               |   |            |                 | 0          |
| 12. Surrender values and withdrawals for life contracts .....                                    |  | 156           |   |            |                 | 156        |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 | 0          |
| 15. Totals .....   |  | 156           | 0                                       | 0          | 0               | 156        |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |             | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|-------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year .....              |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 17. Incurred during current year .....                |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| Settled during current year:                          |                                    |             |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full .....                         |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.2 By payment on compromised claims .....           |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.3 Totals paid .....                                | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.4 Reduction by compromise .....                    |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.5 Amount rejected .....                            |                                    |             |   |             |                         |             |                                    |             | 0                                  | 0            |
| 18.6 Total settlements .....                          | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 19. Unpaid Dec. 31, current year (16+17-18.6) .....   | 0                                  | 0           | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |             |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year .....            | .38                                | 1,035,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | .38                                | 1,035,000    |
| 21. Issued during year .....                          | 3                                  | 65,000      |   |             |                         |             |                                    |             | 3                                  | 65,000       |
| 22. Other changes to in force (Net) .....             | (4)                                | (50,000)    |   |             |                         |             |                                    |             | (4)                                | (50,000)     |
| 23. In force December 31 of current year .....        | 37                                 | 1,050,000   | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 37                                 | 1,050,000    |

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

|  |  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|--|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                   |  | 804                  | 804                         |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....  |  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                       |  |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....    |  |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees      |  |                      |                             |   |                         |                             |
| Other Individual Policies:                                     |  |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                 |  |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                            |  | 2,822,262            | 2,826,568                   |   | 412,807                 | 402,099                     |
| 25.3 Non-renewable for stated reasons only (b) .....           |  |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                 |  |                      |                             |   |                         |                             |
| 25.5 All other (b) .....                                       |  |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                  |  | 2,822,262            | 2,826,568                   | 0   | 412,807                 | 402,099                     |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) ..... |  | 2,823,066            | 2,827,372                   | 0   | 412,807                 | 402,099                     |

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



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

DIRECT BUSINESS IN THE STATE OF Puerto Rico

NAIC Group Code 0290

DURING THE YEAR 2020

NAIC Company Code 77968

**LIFE INSURANCE**

| <b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>  |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance .....  |  |               |   |            |                 |            |
| 2. Annuity considerations .....  |  |               |   |            |                 |            |
| 3. Deposit-type contract funds .....   |  |               | XXX                                     |            | XXX             |            |
| 4. Other considerations .....  |  |               |   |            |                 |            |
| 5. Totals (Sum of Lines 1 to 4) .....  |  |               |   |            |                 |            |
| <b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>                                      |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit .....  |  |               |   |            |                 |            |
| 6.2 Applied to pay renewal premiums .....  |  |               |   |            |                 |            |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period ..... |  |               |   |            |                 |            |
| 6.4 Other .....  |  |               |   |            |                 |            |
| 6.5 Totals (Sum of Lines 6.1 to 6.4) .....   |  |               |   |            |                 |            |
| Annuites:  |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit .....  |  |               |   |            |                 |            |
| 7.2 Applied to provide paid-up annuities .....   |  |               |   |            |                 |            |
| 7.3 Other .....  |  |               |   |            |                 |            |
| 7.4 Totals (Sum of Lines 7.1 to 7.3) .....   |  |               |   |            |                 |            |
| 8. Grand Totals (Lines 6.5 plus 7.4) .....   |  |               |   |            |                 |            |
| <b>DIRECT CLAIMS AND BENEFITS PAID</b>   |  |               |   |            |                 |            |
| 9. Death benefits .....  |  |               |   |            |                 |            |
| 10. Matured endowments .....   |  |               |   |            |                 |            |
| 11. Annuity benefits .....   |  |               |   |            |                 |            |
| 12. Surrender values and withdrawals for life contracts .....                                    |  |               |   |            |                 |            |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....                  |  |               |   |            |                 |            |
| 14. All other benefits, except accident and health .....   |  |               |   |            |                 |            |
| 15. Totals .....   |  |               |   |            |                 |            |
| <b>DETAILS OF WRITE-INS</b>  |  |               |   |            |                 |            |
| 1301. ....   |  |               |   |            |                 |            |
| 1302. ....   |  |               |   |            |                 |            |
| 1303. ....   |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page .....  |  |               |   |            |                 |            |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....                              |  |               |   |            |                 |            |

**NONE**

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

(a) Includes Individual Credit Life Insurance prior year \$ ..... , current year \$ .....  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..... , current year \$ .....  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..... , current year \$ .....

**ACCIDENT AND HEALTH INSURANCE**

|  | 1<br>Direct Premiums | 2<br>Direct Premiums Earned | 3<br>Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | 4<br>Direct Losses Paid | 5<br>Direct Losses Incurred |
|--|----------------------|-----------------------------|---|-------------------------|-----------------------------|
| 24. Group Policies (b) .....                                   |                      |                             |   |                         |                             |
| 24.1 Federal Employees Health Benefits Plan premium (b) .....  |                      |                             |   |                         |                             |
| 24.2 Credit (Group and Individual) .....                       |                      |                             |   |                         |                             |
| 24.3 Collectively renewable policies/certificates (b) .....    |                      |                             |   |                         |                             |
| 24.4 Medicare Title XVIII exempt from state taxes or fees      |                      |                             |   |                         |                             |
| Other Individual Policies:                                     |                      |                             |   |                         |                             |
| 25.1 Non-cancellable (b) .....                                 |                      |                             |   |                         |                             |
| 25.2 Guaranteed renewable (b) .....                            | 20,862               | 20,894                      |   | 40                      | 41                          |
| 25.3 Non-renewable for stated reasons only (b) .....           |                      |                             |   |                         |                             |
| 25.4 Other accident only .....                                 |                      |                             |   |                         |                             |
| 25.5 All other (b) .....                                       |                      |                             |   |                         |                             |
| 25.6 Totals (sum of Lines 25.1 to 25.5) .....                  | 20,862               | 20,894                      | 0   | 40                      | 41                          |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) ..... | 20,862               | 20,894                      | 0   | 40                      | 41                          |

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



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

DIRECT BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2020

NAIC Group Code 0290

LIFE INSURANCE

NAIC Company Code 77968

| DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS   |  | 1<br>Ordinary | 2<br>Credit Life (Group and Individual) | 3<br>Group | 4<br>Industrial | 5<br>Total |
|--|--|---------------|---|------------|-----------------|------------|
| 1. Life insurance  |  | 4,340,996     | 0                                       | 0          | 0               | 4,340,996  |
| 2. Annuity considerations  |  | 0             | 0                                       | 0          | 0               | 0          |
| 3. Deposit-type contract funds   |  | 0             | XXX                                     | 0          | XXX             | 0          |
| 4. Other considerations  |  | 0             | 0                                       | 0          | 0               | 0          |
| 5. Totals (Sum of Lines 1 to 4)  |  | 4,340,996     | 0                                       | 0          | 0               | 4,340,996  |
| DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS                                       |  |               |   |            |                 |            |
| Life insurance:  |  |               |   |            |                 |            |
| 6.1 Paid in cash or left on deposit  |  | 0             | 0                                       | 0          | 0               | 0          |
| 6.2 Applied to pay renewal premiums  |  | 0             | 0                                       | 0          | 0               | 0          |
| 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period |  | 0             | 0                                       | 0          | 0               | 0          |
| 6.4 Other  |  | 0             | 0                                       | 0          | 0               | 0          |
| 6.5 Totals (Sum of Lines 6.1 to 6.4)   |  | 0             | 0                                       | 0          | 0               | 0          |
| Annuites:  |  |               |   |            |                 |            |
| 7.1 Paid in cash or left on deposit  |  | 0             | 0                                       | 0          | 0               | 0          |
| 7.2 Applied to provide paid-up annuities   |  | 0             | 0                                       | 0          | 0               | 0          |
| 7.3 Other  |  | 0             | 0                                       | 0          | 0               | 0          |
| 7.4 Totals (Sum of Lines 7.1 to 7.3)   |  | 0             | 0                                       | 0          | 0               | 0          |
| 8. Grand Totals (Lines 6.5 plus 7.4)   |  | 0             | 0                                       | 0          | 0               | 0          |
| DIRECT CLAIMS AND BENEFITS PAID  |  |               |   |            |                 |            |
| 9. Death benefits  |  | 497,605       | 0                                       | 0          | 0               | 497,605    |
| 10. Matured endowments   |  | 0             | 0                                       | 0          | 0               | 0          |
| 11. Annuity benefits   |  | 0             | 0                                       | 0          | 0               | 0          |
| 12. Surrender values and withdrawals for life contracts                                    |  | 299,327       | 0                                       | 0          | 0               | 299,327    |
| 13. Aggregate write-ins for miscellaneous direct claims and benefits paid                  |  | 0             | 0                                       | 0          | 0               | 0          |
| 14. All other benefits, except accident and health   |  | 0             | 0                                       | 0          | 0               | 0          |
| 15. Totals   |  | 796,932       | 0                                       | 0          | 0               | 796,932    |
| DETAILS OF WRITE-INS   |  |               |   |            |                 |            |
| 1301.  |  |               |   |            |                 |            |
| 1302.  |  |               |   |            |                 |            |
| 1303.  |  |               |   |            |                 |            |
| 1398. Summary of Line 13 from overflow page  |  | 0             | 0                                       | 0          | 0               | 0          |
| 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)                              |  | 0             | 0                                       | 0          | 0               | 0          |

| DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED | Ordinary                           |              | Credit Life (Group and Individual)            |             | Group                   |             | Industrial                         |             | Total                              |              |
|---|------------------------------------|--------------|---|-------------|-------------------------|-------------|------------------------------------|-------------|------------------------------------|--------------|
|   | 1<br>No. of<br>Pols. &<br>Certifs. | 2<br>Amount  | 3<br>No. of<br>Ind.Pols.<br>& Gr.<br>Certifs. | 4<br>Amount | 5<br>No. of<br>Certifs. | 6<br>Amount | 7<br>No. of<br>Pols. &<br>Certifs. | 8<br>Amount | 9<br>No. of<br>Pols. &<br>Certifs. | 10<br>Amount |
| 16. Unpaid December 31, prior year                    | 0                                  | 0            | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 17. Incurred during current year                      | 15                                 | 497,605      | 0   | 0           | 0                       | 0           | 0                                  | 0           | 15                                 | 497,605      |
| Settled during current year:                          |                                    |              |   |             |                         |             |                                    |             |                                    |              |
| 18.1 By payment in full                               | 15                                 | 497,605      | 0   | 0           | 0                       | 0           | 0                                  | 0           | 15                                 | 497,605      |
| 18.2 By payment on compromised claims                 | 0                                  | 0            | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.3 Totals paid                                      | 15                                 | 497,605      | 0   | 0           | 0                       | 0           | 0                                  | 0           | 15                                 | 497,605      |
| 18.4 Reduction by compromise                          | 0                                  | 0            | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.5 Amount rejected                                  | 0                                  | 0            | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| 18.6 Total settlements                                | 15                                 | 497,605      | 0   | 0           | 0                       | 0           | 0                                  | 0           | 15                                 | 497,605      |
| 19. Unpaid Dec. 31, current year (16+17-18.6)         | 0                                  | 0            | 0   | 0           | 0                       | 0           | 0                                  | 0           | 0                                  | 0            |
| POLICY EXHIBIT  |                                    |              |   |             | No. of Policies         |             |                                    |             |                                    |              |
| 20. In force December 31, prior year                  | 13,567                             | 378,016,369  | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 13,567                             | 378,016,369  |
| 21. Issued during year                                | 2,959                              | 87,900,000   | 0   | 0           | 0                       | 0           | 0                                  | 0           | 2,959                              | 87,900,000   |
| 22. Other changes to in force (Net)                   | (1,727)                            | (51,496,339) | 0   | 0           | 0                       | 0           | 0                                  | 0           | (1,727)                            | (51,496,339) |
| 23. In force December 31 of current year              | 14,799                             | 414,420,030  | 0   | (a)         | 0                       | 0           | 0                                  | 0           | 14,799                             | 414,420,030  |

(a) Includes Individual Credit Life Insurance prior year \$ 0 , current year \$ 0  
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ 0 , current year \$ 0  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

|   | 1               | 2                      | 3  | 4                  | 5                      |
|---|-----------------|------------------------|--|--------------------|------------------------|
|   | Direct Premiums | Direct Premiums Earned | Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business | Direct Losses Paid | Direct Losses Incurred |
| 24. Group Policies (b)                                    | 15,527,281      | 15,528,802             | 0  | 1,514,605          | 1,814,191              |
| 24.1 Federal Employees Health Benefits Plan premium (b)   | 0               | 0                      | 0  | 0                  | 0                      |
| 24.2 Credit (Group and Individual)                        | 0               | 0                      | 0  | 0                  | 0                      |
| 24.3 Collectively renewable policies/certificates (b)     | 0               | 0                      | 0  | 0                  | 0                      |
| 24.4 Medicare Title XVIII exempt from state taxes or fees | 0               | 0                      | 0  | 0                  | 0                      |
| Other Individual Policies:                                |                 |                        |  |                    |                        |
| 25.1 Non-cancelable (b)                                   | 288,949         | 290,647                | 0  | 13,563             | 3,267                  |
| 25.2 Guaranteed renewable (b)                             | 303,676,498     | 304,139,842            | 0  | 101,540,133        | 102,221,522            |
| 25.3 Non-renewable for stated reasons only (b)            | 0               | 0                      | 0  | 0                  | 0                      |
| 25.4 Other accident only                                  | 0               | 0                      | 0  | 0                  | 0                      |
| 25.5 All other (b)  | 0               | 0                      | 0  | 0                  | 0                      |
| 25.6 Totals (sum of Lines 25.1 to 25.5)                   | 303,965,447     | 304,430,489            | 0  | 101,553,696        | 102,224,789            |
| 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)  | 319,492,728     | 319,959,291            | 0  | 103,068,301        | 104,038,980            |

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

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America  
**FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE**

**INTEREST MAINTENANCE RESERVE**

|   | 1<br>Amount |
|---|-------------|
| 1. Reserve as of December 31, Prior Year .....  | 1,497,774   |
| 2. Current year's realized pre-tax capital gains/(losses) of \$ 830,939 transferred into the reserve net of taxes of \$ 238,397 | 592,542     |
| 3. Adjustment for current year's liability gains/(losses) released from the reserve .....                                       | 0           |
| 4. Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3) .....                    | 2,090,316   |
| 5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4) .....                         | 216,047     |
| 6. Reserve as of December 31, current year (Line 4 minus Line 5)  | 1,874,269   |

**AMORTIZATION**

| Year of Amortization      | 1<br>Reserve as of<br>December 31,<br>Prior Year | 2<br>Current Year's<br>Realized Capital<br>Gains/(Losses)<br>Transferred into the<br>Reserve Net of Taxes | 3<br>Adjustment for Current<br>Year's Liability<br>Gains/(Losses)<br>Released From<br>the Reserve | 4<br>Balance Before<br>Reduction for Current<br>Year's Amortization<br>(Cols. 1 + 2 + 3) |
|---------------------------|--|---|---|--|
| 1. 2020 .....             | 203,898  | 12,149  | 0   | 216,047  |
| 2. 2021 .....             | 179,005  | 24,475  | 0   | 203,480  |
| 3. 2022 .....             | 155,548  | 24,201  | 0   | 179,749  |
| 4. 2023 .....             | 132,724  | 24,928  | 0   | 157,652  |
| 5. 2024 .....             | 113,432  | 25,882  | 0   | 139,314  |
| 6. 2025 .....             | 93,100   | 26,164  | 0   | 119,264  |
| 7. 2026 .....             | 80,000   | 27,560  | 0   | 107,559  |
| 8. 2027 .....             | 69,404   | 27,628  | 0   | 97,033   |
| 9. 2028 .....             | 61,566   | 27,924  | 0   | 89,489   |
| 10. 2029 .....            | 40,551   | 28,792  | 0   | 69,343   |
| 11. 2030 .....            | 18,344   | 29,422  | 0   | 47,766   |
| 12. 2031 .....            | (11,015)   | 29,848  | 0   | 18,833   |
| 13. 2032 .....            | (41,145)   | 30,770  | 0   | (10,374)   |
| 14. 2033 .....            | (63,841)   | 31,932  | 0   | (31,910)   |
| 15. 2034 .....            | (51,016)   | 32,855  | 0   | (18,161)   |
| 16. 2035 .....            | (16,312)   | 33,776  | 0   | 17,464   |
| 17. 2036 .....            | 18,514   | 32,201  | 0   | 50,715   |
| 18. 2037 .....            | 53,097   | 28,573  | 0   | 81,671   |
| 19. 2038 .....            | 80,549   | 24,126  | 0   | 104,675  |
| 20. 2039 .....            | 86,209   | 20,052  | 0   | 106,261  |
| 21. 2040 .....            | 75,321   | 15,503  | 0   | 90,824   |
| 22. 2041 .....            | 65,784   | 12,149  | 0   | 77,934   |
| 23. 2042 .....            | 54,582   | 9,277   | 0   | 63,859   |
| 24. 2043 .....            | 40,736   | 6,882   | 0   | 47,618   |
| 25. 2044 .....            | 26,069   | 4,250   | 0   | 30,319   |
| 26. 2045 .....            | 17,186   | 1,376   | 0   | 18,562   |
| 27. 2046 .....            | 10,553   | (54)  | 0   | 10,499   |
| 28. 2047 .....            | 4,177  | (43)  | 0   | 4,134  |
| 29. 2048 .....            | 607  | (31)  | 0   | 576  |
| 30. 2049 .....            | 149  | (20)  | 0   | 129  |
| 31. 2050 and Later        |  | (6)   | 0   | (6)  |
| 32. Total (Lines 1 to 31) | 1,497,775  | 592,542   | 0   | 2,090,317  |

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

**ASSET VALUATION RESERVE**

|   | Default Component                 |                     |                             | Equity Component  |  |                             | 7<br>Total Amount<br>(Cols. 3 + 6) |
|---|-----------------------------------|---------------------|-----------------------------|-------------------|--|-----------------------------|------------------------------------|
|   | 1<br>Other Than<br>Mortgage Loans | 2<br>Mortgage Loans | 3<br>Total<br>(Cols. 1 + 2) | 4<br>Common Stock | 5<br>Real Estate and<br>Other Invested<br>Assets | 6<br>Total<br>(Cols. 4 + 5) |                                    |
| 1. Reserve as of December 31, prior year .....  | 7,936,195                         | 173,434             | 8,109,629                   | 0                 | 201,163  | 201,163                     | 8,310,792                          |
| 2. Realized capital gains/(losses) net of taxes - General Account .....                     |                                   |                     | 0                           |                   | (310,620)  | (310,620)                   | (310,620)                          |
| 3. Realized capital gains/(losses) net of taxes - Separate Accounts .....                   |                                   |                     | 0                           |                   |  | 0                           | 0                                  |
| 4. Unrealized capital gains/(losses) net of deferred taxes - General Account .....          |                                   |                     | 0                           |                   | 33,406   | 33,406                      | 33,406                             |
| 5. Unrealized capital gains/(losses) net of deferred taxes - Separate Accounts .....        |                                   |                     | 0                           |                   |  | 0                           | 0                                  |
| 6. Capital gains credited/(losses charged) to contract benefits, payments or reserves ..... |                                   |                     | 0                           |                   |  | 0                           | 0                                  |
| 7. Basic contribution .....   | 2,295,370                         | 63,833              | 2,359,203                   | 0                 | 190,095  | 190,095                     | 2,549,297                          |
| 8. Accumulated balances (Lines 1 through 5 - 6 + 7) .....                                   | 10,231,565                        | 237,267             | 10,468,832                  | 0                 | 114,043  | 114,043                     | 10,582,875                         |
| 9. Maximum reserve .....  | 11,082,677                        | 237,778             | 11,320,455                  | 0                 | 724,341  | 724,341                     | 12,044,796                         |
| 10. Reserve objective .....   | 6,719,463                         | 181,924             | 6,901,387                   | 0                 | 481,762  | 481,762                     | 7,383,148                          |
| 11. 20% of (Line 10 - Line 8) .....   | (702,420)                         | (11,069)            | (713,489)                   | 0                 | 73,544   | 73,544                      | (639,945)                          |
| 12. Balance before transfers (Lines 8 + 11) .....   | 9,529,144                         | 226,198             | 9,755,343                   | 0                 | 187,587  | 187,587                     | 9,942,930                          |
| 13. Transfers .....   |                                   |                     | 0                           |                   |  | 0                           | 0                                  |
| 14. Voluntary contribution .....  |                                   |                     | 0                           |                   |  | 0                           | 0                                  |
| 15. Adjustment down to maximum/up to zero .....   |                                   |                     | 0                           |                   |  | 0                           | 0                                  |
| 16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)                       | 9,529,144                         | 226,198             | 9,755,343                   | 0                 | 187,587  | 187,587                     | 9,942,930                          |

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

**ASSET VALUATION RESERVE**  
**BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS**  
**DEFAULT COMPONENT**

| Line Number | NAIC Designation | Description   | 1 Book/Adjusted Carrying Value | 2 Reclassify Related Party Encumbrances | 3 Add Third Party Encumbrances | 4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3) | Basic Contribution |                        | Reserve Objective |                        | Maximum Reserve |                         |
|-------------|------------------|---|--------------------------------|---|--------------------------------|--|--------------------|------------------------|-------------------|------------------------|-----------------|-------------------------|
|             |                  |   |                                |   |                                |  | 5 Factor           | 6 Amount (Cols. 4 x 5) | 7 Factor          | 8 Amount (Cols. 4 x 7) | 9 Factor        | 10 Amount (Cols. 4 x 9) |
| 1.          |                  | LONG-TERM BONDS   |                                |   |                                |  |                    |                        |                   |                        |                 |                         |
| 1.          |                  | Exempt Obligations  | 35,091,890                     | XXX                                     | XXX                            | 35,091,890   | 0.0000             | 0                      | 0.0000            | 0                      | 0.0000          | 0                       |
| 2.1         | 1                | NAIC Designation Category 1.A                               | 219,332,041                    | XXX                                     | XXX                            | 219,332,041  | 0.0005             | 109,666                | 0.0016            | 350,931                | 0.0033          | 723,796                 |
| 2.2         | 1                | NAIC Designation Category 1.B                               | 28,917,279                     | XXX                                     | XXX                            | 28,917,279   | 0.0005             | 14,459                 | 0.0016            | 46,268                 | 0.0033          | 95,427                  |
| 2.3         | 1                | NAIC Designation Category 1.C                               | 51,137,072                     | XXX                                     | XXX                            | 51,137,072   | 0.0005             | 25,569                 | 0.0016            | 81,819                 | 0.0033          | 168,752                 |
| 2.4         | 1                | NAIC Designation Category 1.D                               | 27,015,025                     | XXX                                     | XXX                            | 27,015,025   | 0.0005             | 13,508                 | 0.0016            | 43,224                 | 0.0033          | 89,150                  |
| 2.5         | 1                | NAIC Designation Category 1.E                               | 58,776,066                     | XXX                                     | XXX                            | 58,776,066   | 0.0005             | 29,388                 | 0.0016            | 94,042                 | 0.0033          | 193,961                 |
| 2.6         | 1                | NAIC Designation Category 1.F                               | 50,172,559                     | XXX                                     | XXX                            | 50,172,559   | 0.0005             | 25,086                 | 0.0016            | 80,276                 | 0.0033          | 165,569                 |
| 2.7         | 1                | NAIC Designation Category 1.G                               | 118,852,369                    | XXX                                     | XXX                            | 118,852,369  | 0.0005             | 59,426                 | 0.0016            | 190,164                | 0.0033          | 392,213                 |
| 2.8         |                  | Subtotal NAIC 1 (2.1+2.2+2.3+2.4+2.5+2.6+2.7)               | 554,202,411                    | XXX                                     | XXX                            | 554,202,411  | XXX                | 277,101                | XXX               | 886,724                | XXX             | 1,828,868               |
| 3.1         | 2                | NAIC Designation Category 2.A                               | 219,044,623                    | XXX                                     | XXX                            | 219,044,623  | 0.0021             | 459,994                | 0.0064            | 1,401,886              | 0.0106          | 2,321,873               |
| 3.2         | 2                | NAIC Designation Category 2.B                               | 292,546,973                    | XXX                                     | XXX                            | 292,546,973  | 0.0021             | 614,349                | 0.0064            | 1,872,301              | 0.0106          | 3,100,998               |
| 3.3         | 2                | NAIC Designation Category 2.C                               | 119,668,652                    | XXX                                     | XXX                            | 119,668,652  | 0.0021             | 251,304                | 0.0064            | 765,879                | 0.0106          | 1,268,488               |
| 3.4         |                  | Subtotal NAIC 2 (3.1+3.2+3.3)                               | 631,260,248                    | XXX                                     | XXX                            | 631,260,248  | XXX                | 1,325,647              | XXX               | 4,040,066              | XXX             | 6,691,359               |
| 4.1         | 3                | NAIC Designation Category 3.A                               | 32,181,376                     | XXX                                     | XXX                            | 32,181,376   | 0.0099             | 318,596                | 0.0263            | 846,370                | 0.0376          | 1,210,020               |
| 4.2         | 3                | NAIC Designation Category 3.B                               | 12,081,310                     | XXX                                     | XXX                            | 12,081,310   | 0.0099             | 119,605                | 0.0263            | 317,738                | 0.0376          | 454,257                 |
| 4.3         | 3                | NAIC Designation Category 3.C                               | 10,848,392                     | XXX                                     | XXX                            | 10,848,392   | 0.0099             | 107,399                | 0.0263            | 285,313                | 0.0376          | 407,900                 |
| 4.4         |                  | Subtotal NAIC 3 (4.1+4.2+4.3)                               | 55,111,078                     | XXX                                     | XXX                            | 55,111,078   | XXX                | 545,600                | XXX               | 1,449,421              | XXX             | 2,072,177               |
| 5.1         | 4                | NAIC Designation Category 4.A                               |                                | XXX                                     | XXX                            | 0  | 0.0245             | 0                      | 0.0572            | 0                      | 0.0817          | 0                       |
| 5.2         | 4                | NAIC Designation Category 4.B                               | 2,790,000                      | XXX                                     | XXX                            | 2,790,000  | 0.0245             | 68,355                 | 0.0572            | 159,588                | 0.0817          | 227,943                 |
| 5.3         | 4                | NAIC Designation Category 4.C                               | 3,210,910                      | XXX                                     | XXX                            | 3,210,910  | 0.0245             | 78,667                 | 0.0572            | 183,664                | 0.0817          | 262,331                 |
| 5.4         |                  | Subtotal NAIC 4 (5.1+5.2+5.3)                               | 6,000,910                      | XXX                                     | XXX                            | 6,000,910  | XXX                | 147,022                | XXX               | 343,252                | XXX             | 490,274                 |
| 6.1         | 5                | NAIC Designation Category 5.A                               |                                | XXX                                     | XXX                            | 0  | 0.0630             | 0                      | 0.1128            | 0                      | 0.1880          | 0                       |
| 6.2         | 5                | NAIC Designation Category 5.B                               |                                | XXX                                     | XXX                            | 0  | 0.0630             | 0                      | 0.1128            | 0                      | 0.1880          | 0                       |
| 6.3         | 5                | NAIC Designation Category 5.C                               |                                | XXX                                     | XXX                            | 0  | 0.0630             | 0                      | 0.1128            | 0                      | 0.1880          | 0                       |
| 6.4         |                  | Subtotal NAIC 5 (6.1+6.2+6.3)                               | 0                              | XXX                                     | XXX                            | 0  | XXX                | 0                      | XXX               | 0                      | XXX             | 0                       |
| 7.          | 6                | NAIC 6  |                                | XXX                                     | XXX                            | 0  | 0.0000             | 0                      | 0.2370            | 0                      | 0.2370          | 0                       |
| 8.          |                  | Total Unrated Multi-class Securities Acquired by Conversion |                                | XXX                                     | XXX                            | 0  | XXX                | 0                      | XXX               | 0                      | XXX             | 0                       |
| 9.          |                  | Total Long-Term Bonds (1+2.8+3.4+4.4+5.4+6.4+7+8)           | 1,281,666,537                  | XXX                                     | XXX                            | 1,281,666,537  | XXX                | 2,295,370              | XXX               | 6,719,463              | XXX             | 11,082,677              |
|             |                  | PREFERRED STOCKS  |                                |   |                                |  |                    |                        |                   |                        |                 |                         |
| 10.         | 1                | Highest Quality   |                                | XXX                                     | XXX                            | 0  | 0.0005             | 0                      | 0.0016            | 0                      | 0.0033          | 0                       |
| 11.         | 2                | High Quality  |                                | XXX                                     | XXX                            | 0  | 0.0021             | 0                      | 0.0064            | 0                      | 0.0106          | 0                       |
| 12.         | 3                | Medium Quality  |                                | XXX                                     | XXX                            | 0  | 0.0099             | 0                      | 0.0263            | 0                      | 0.0376          | 0                       |
| 13.         | 4                | Low Quality   |                                | XXX                                     | XXX                            | 0  | 0.0245             | 0                      | 0.0572            | 0                      | 0.0817          | 0                       |
| 14.         | 5                | Lower Quality   |                                | XXX                                     | XXX                            | 0  | 0.0630             | 0                      | 0.1128            | 0                      | 0.1880          | 0                       |
| 15.         | 6                | In or Near Default  |                                | XXX                                     | XXX                            | 0  | 0.0000             | 0                      | 0.2370            | 0                      | 0.2370          | 0                       |
| 16.         |                  | Affiliated Life with AVR                                    |                                | XXX                                     | XXX                            | 0  | 0.0000             | 0                      | 0.0000            | 0                      | 0.0000          | 0                       |
| 17.         |                  | Total Preferred Stocks (Sum of Lines 10 through 16)         | 0                              | XXX                                     | XXX                            | 0  | XXX                | 0                      | XXX               | 0                      | XXX             | 0                       |

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

**ASSET VALUATION RESERVE (Continued)**  
**BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS**  
**DEFAULT COMPONENT**

| Line Number | NAIC Designation | Description   | 1<br>Book/Adjusted Carrying Value | 2<br>Reclassify Related Party Encumbrances | 3<br>Add Third Party Encumbrances | 4<br>Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3) | Basic Contribution |                           | Reserve Objective |                           | Maximum Reserve |                            |
|-------------|------------------|---|-----------------------------------|--|-----------------------------------|---|--------------------|---------------------------|-------------------|---------------------------|-----------------|----------------------------|
|             |                  |   |                                   |  |                                   |   | 5<br>Factor        | 6<br>Amount (Cols. 4 x 5) | 7<br>Factor       | 8<br>Amount (Cols. 4 x 7) | 9<br>Factor     | 10<br>Amount (Cols. 4 x 9) |
| 18.         |                  | SHORT-TERM BONDS  |                                   |  |                                   |   |                    |                           |                   |                           |                 |                            |
| 19.1        | 1                | Exempt Obligations                                      |                                   | XXX  | XXX                               | 0   | 0.0000             | 0                         | 0.0000            | 0                         | 0.0000          | 0                          |
| 19.1        | 1                | NAIC Designation Category 1.A                           |                                   | XXX  | XXX                               | 0   | 0.0005             | 0                         | 0.0016            | 0                         | 0.0033          | 0                          |
| 19.2        | 1                | NAIC Designation Category 1.B                           |                                   | XXX  | XXX                               | 0   | 0.0005             | 0                         | 0.0016            | 0                         | 0.0033          | 0                          |
| 19.3        | 1                | NAIC Designation Category 1.C                           |                                   | XXX  | XXX                               | 0   | 0.0005             | 0                         | 0.0016            | 0                         | 0.0033          | 0                          |
| 19.4        | 1                | NAIC Designation Category 1.D                           |                                   | XXX  | XXX                               | 0   | 0.0005             | 0                         | 0.0016            | 0                         | 0.0033          | 0                          |
| 19.5        | 1                | NAIC Designation Category 1.E                           |                                   | XXX  | XXX                               | 0   | 0.0005             | 0                         | 0.0016            | 0                         | 0.0033          | 0                          |
| 19.6        | 1                | NAIC Designation Category 1.F                           |                                   | XXX  | XXX                               | 0   | 0.0005             | 0                         | 0.0016            | 0                         | 0.0033          | 0                          |
| 19.7        | 1                | NAIC Designation Category 1.G                           |                                   | XXX  | XXX                               | 0   | 0.0005             | 0                         | 0.0016            | 0                         | 0.0033          | 0                          |
| 19.8        |                  | Subtotal NAIC 1 (19.1+19.2+19.3+19.4+19.5+19.6+19.7)    | 0                                 | XXX  | XXX                               | 0   | XXX                | 0                         | XXX               | 0                         | XXX             | 0                          |
| 20.1        | 2                | NAIC Designation Category 2.A                           |                                   | XXX  | XXX                               | 0   | 0.0021             | 0                         | 0.0064            | 0                         | 0.0106          | 0                          |
| 20.2        | 2                | NAIC Designation Category 2.B                           |                                   | XXX  | XXX                               | 0   | 0.0021             | 0                         | 0.0064            | 0                         | 0.0106          | 0                          |
| 20.3        | 2                | NAIC Designation Category 2.C                           |                                   | XXX  | XXX                               | 0   | 0.0021             | 0                         | 0.0064            | 0                         | 0.0106          | 0                          |
| 20.4        |                  | Subtotal NAIC 2 (20.1+20.2+20.3)                        | 0                                 | XXX  | XXX                               | 0   | XXX                | 0                         | XXX               | 0                         | XXX             | 0                          |
| 21.1        | 3                | NAIC Designation Category 3.A                           |                                   | XXX  | XXX                               | 0   | 0.0099             | 0                         | 0.0263            | 0                         | 0.0376          | 0                          |
| 21.2        | 3                | NAIC Designation Category 3.B                           |                                   | XXX  | XXX                               | 0   | 0.0099             | 0                         | 0.0263            | 0                         | 0.0376          | 0                          |
| 21.3        | 3                | NAIC Designation Category 3.C                           |                                   | XXX  | XXX                               | 0   | 0.0099             | 0                         | 0.0263            | 0                         | 0.0376          | 0                          |
| 21.4        |                  | Subtotal NAIC 3 (21.1+21.2+21.3)                        | 0                                 | XXX  | XXX                               | 0   | XXX                | 0                         | XXX               | 0                         | XXX             | 0                          |
| 22.1        | 4                | NAIC Designation Category 4.A                           |                                   | XXX  | XXX                               | 0   | 0.0245             | 0                         | 0.0572            | 0                         | 0.0817          | 0                          |
| 22.2        | 4                | NAIC Designation Category 4.B                           |                                   | XXX  | XXX                               | 0   | 0.0245             | 0                         | 0.0572            | 0                         | 0.0817          | 0                          |
| 22.3        | 4                | NAIC Designation Category 4.C                           |                                   | XXX  | XXX                               | 0   | 0.0245             | 0                         | 0.0572            | 0                         | 0.0817          | 0                          |
| 22.4        |                  | Subtotal NAIC 4 (22.1+22.2+22.3)                        | 0                                 | XXX  | XXX                               | 0   | XXX                | 0                         | XXX               | 0                         | XXX             | 0                          |
| 23.1        | 5                | NAIC Designation Category 5.A                           |                                   | XXX  | XXX                               | 0   | 0.0630             | 0                         | 0.1128            | 0                         | 0.1880          | 0                          |
| 23.2        | 5                | NAIC Designation Category 5.B                           |                                   | XXX  | XXX                               | 0   | 0.0630             | 0                         | 0.1128            | 0                         | 0.1880          | 0                          |
| 23.3        | 5                | NAIC Designation Category 5.C                           |                                   | XXX  | XXX                               | 0   | 0.0630             | 0                         | 0.1128            | 0                         | 0.1880          | 0                          |
| 23.4        |                  | Subtotal NAIC 5 (23.1+23.2+23.3)                        | 0                                 | XXX  | XXX                               | 0   | XXX                | 0                         | XXX               | 0                         | XXX             | 0                          |
| 24.         | 6                | NAIC 6  |                                   | XXX  | XXX                               | 0   | 0.0000             | 0                         | 0.2370            | 0                         | 0.2370          | 0                          |
| 25.         |                  | Total Short-Term Bonds (18+19.8+20.4+21.4+22.4+23.4+24) | 0                                 | XXX  | XXX                               | 0   | XXX                | 0                         | XXX               | 0                         | XXX             | 0                          |
|             |                  | DERIVATIVE INSTRUMENTS                                  |                                   |  |                                   |   |                    |                           |                   |                           |                 |                            |
| 26.         |                  | Exchange Traded   |                                   | XXX  | XXX                               | 0   | 0.0005             | 0                         | 0.0016            | 0                         | 0.0033          | 0                          |
| 27.         | 1                | Highest Quality   |                                   | XXX  | XXX                               | 0   | 0.0005             | 0                         | 0.0016            | 0                         | 0.0033          | 0                          |
| 28.         | 2                | High Quality  |                                   | XXX  | XXX                               | 0   | 0.0021             | 0                         | 0.0064            | 0                         | 0.0106          | 0                          |
| 29.         | 3                | Medium Quality  |                                   | XXX  | XXX                               | 0   | 0.0099             | 0                         | 0.0263            | 0                         | 0.0376          | 0                          |
| 30.         | 4                | Low Quality   |                                   | XXX  | XXX                               | 0   | 0.0245             | 0                         | 0.0572            | 0                         | 0.0817          | 0                          |
| 31.         | 5                | Lower Quality   |                                   | XXX  | XXX                               | 0   | 0.0630             | 0                         | 0.1128            | 0                         | 0.1880          | 0                          |
| 32.         | 6                | In or Near Default                                      |                                   | XXX  | XXX                               | 0   | 0.0000             | 0                         | 0.2370            | 0                         | 0.2370          | 0                          |
| 33.         |                  | Total Derivative Instruments                            | 0                                 | XXX  | XXX                               | 0   | XXX                | 0                         | XXX               | 0                         | XXX             | 0                          |
| 34.         |                  | Total (Lines 9 + 17 + 25 + 33)                          | 1,281,666,537                     | XXX  | XXX                               | 1,281,666,537   | XXX                | 2,295,370                 | XXX               | 6,719,463                 | XXX             | 11,082,677                 |

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

**ASSET VALUATION RESERVE (Continued)**  
**BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS**  
**DEFAULT COMPONENT**

| Line Number                | NAIC Designation | Description   | 1<br>Book/Adjusted Carrying Value | 2<br>Reclassify Related Party Encumbrances | 3<br>Add Third Party Encumbrances | 4<br>Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3) | Basic Contribution |                           | Reserve Objective |                           | Maximum Reserve |                            |
|----------------------------|------------------|---|-----------------------------------|--|-----------------------------------|---|--------------------|---------------------------|-------------------|---------------------------|-----------------|----------------------------|
|                            |                  |   |                                   |  |                                   |   | 5<br>Factor        | 6<br>Amount (Cols. 4 x 5) | 7<br>Factor       | 8<br>Amount (Cols. 4 x 7) | 9<br>Factor     | 10<br>Amount (Cols. 4 x 9) |
| 32                         |                  | MORTGAGE LOANS  |                                   |  |                                   |   |                    |                           |                   |                           |                 |                            |
|                            |                  | In Good Standing:   |                                   |  |                                   |   |                    |                           |                   |                           |                 |                            |
| 35.                        |                  | Farm Mortgages - CM1 - Highest Quality .....                      |                                   |  |                                   | XXX   | 0                  | 0.0011                    | 0                 | 0.0057                    | 0               | 0.0074                     |
| 36.                        |                  | Farm Mortgages - CM2 - High Quality .....                         |                                   |  |                                   | XXX   | 0                  | 0.0040                    | 0                 | 0.0114                    | 0               | 0.0149                     |
| 37.                        |                  | Farm Mortgages - CM3 - Medium Quality .....                       |                                   |  |                                   | XXX   | 0                  | 0.0069                    | 0                 | 0.0200                    | 0               | 0.0257                     |
| 38.                        |                  | Farm Mortgages - CM4 - Low Medium Quality .....                   |                                   |  |                                   | XXX   | 0                  | 0.0120                    | 0                 | 0.0343                    | 0               | 0.0428                     |
| 39.                        |                  | Farm Mortgages - CM5 - Low Quality .....                          |                                   |  |                                   | XXX   | 0                  | 0.0183                    | 0                 | 0.0486                    | 0               | 0.0628                     |
| 40.                        |                  | Residential Mortgages - Insured or Guaranteed .....               |                                   |  |                                   | XXX   | 0                  | 0.0003                    | 0                 | 0.0007                    | 0               | 0.0011                     |
| 41.                        |                  | Residential Mortgages - All Other .....                           |                                   |  |                                   | XXX   | 0                  | 0.0015                    | 0                 | 0.0034                    | 0               | 0.0046                     |
| 42.                        |                  | Commercial Mortgages - Insured or Guaranteed .....                |                                   |  |                                   | XXX   | 0                  | 0.0003                    | 0                 | 0.0007                    | 0               | 0.0011                     |
| 43.                        |                  | Commercial Mortgages - All Other - CM1 - Highest Quality .....    |                                   |  |                                   | XXX   | 0                  | 0.0011                    | 0                 | 0.0057                    | 0               | 0.0074                     |
| 44.                        |                  | Commercial Mortgages - All Other - CM2 - High Quality .....       | 15,958,231                        |  |                                   | XXX   | 15,958,231         | 0.0040                    | 63,833            | 0.0114                    | 181,924         | 0.0149                     |
| 45.                        |                  | Commercial Mortgages - All Other - CM3 - Medium Quality .....     |                                   |  |                                   | XXX   | 0                  | 0.0069                    | 0                 | 0.0200                    | 0               | 0.0257                     |
| 46.                        |                  | Commercial Mortgages - All Other - CM4 - Low Medium Quality ..... |                                   |  |                                   | XXX   | 0                  | 0.0120                    | 0                 | 0.0343                    | 0               | 0.0428                     |
| 47.                        |                  | Commercial Mortgages - All Other - CM5 - Low Quality .....        |                                   |  |                                   | XXX   | 0                  | 0.0183                    | 0                 | 0.0486                    | 0               | 0.0628                     |
| Overdue, Not in Process:   |                  |   |                                   |  |                                   |   |                    |                           |                   |                           |                 |                            |
| 48.                        |                  | Farm Mortgages .....  |                                   |  |                                   | XXX   | 0                  | 0.0480                    | 0                 | 0.0868                    | 0               | 0.1371                     |
| 49.                        |                  | Residential Mortgages - Insured or Guaranteed .....               |                                   |  |                                   | XXX   | 0                  | 0.0006                    | 0                 | 0.0014                    | 0               | 0.0023                     |
| 50.                        |                  | Residential Mortgages - All Other .....                           |                                   |  |                                   | XXX   | 0                  | 0.0029                    | 0                 | 0.0066                    | 0               | 0.0103                     |
| 51.                        |                  | Commercial Mortgages - Insured or Guaranteed .....                |                                   |  |                                   | XXX   | 0                  | 0.0006                    | 0                 | 0.0014                    | 0               | 0.0023                     |
| 52.                        |                  | Commercial Mortgages - All Other .....                            |                                   |  |                                   | XXX   | 0                  | 0.0480                    | 0                 | 0.0868                    | 0               | 0.1371                     |
| In Process of Foreclosure: |                  |   |                                   |  |                                   |   |                    |                           |                   |                           |                 |                            |
| 53.                        |                  | Farm Mortgages .....  |                                   |  |                                   | XXX   | 0                  | 0.0000                    | 0                 | 0.1942                    | 0               | 0.1942                     |
| 54.                        |                  | Residential Mortgages - Insured or Guaranteed .....               |                                   |  |                                   | XXX   | 0                  | 0.0000                    | 0                 | 0.0046                    | 0               | 0.0046                     |
| 55.                        |                  | Residential Mortgages - All Other .....                           |                                   |  |                                   | XXX   | 0                  | 0.0000                    | 0                 | 0.0149                    | 0               | 0.0149                     |
| 56.                        |                  | Commercial Mortgages - Insured or Guaranteed .....                |                                   |  |                                   | XXX   | 0                  | 0.0000                    | 0                 | 0.0046                    | 0               | 0.0046                     |
| 57.                        |                  | Commercial Mortgages - All Other .....                            |                                   |  |                                   | XXX   | 0                  | 0.0000                    | 0                 | 0.1942                    | 0               | 0.1942                     |
| 58.                        |                  | Total Schedule B Mortgages (Sum of Lines 35 through 57)           | 15,958,231                        | 0  | XXX                               | 15,958,231  | XXX                | 63,833                    | XXX               | 181,924                   | XXX             | 237,778                    |
| 59.                        |                  | Schedule DA Mortgages   |                                   |  | XXX                               | 0   | 0.0034             | 0                         | 0.0114            | 0                         | 0.0149          | 0                          |
| 60.                        |                  | Total Mortgage Loans on Real Estate (Lines 58 + 59)               | 15,958,231                        | 0  | XXX                               | 15,958,231  | XXX                | 63,833                    | XXX               | 181,924                   | XXX             | 237,778                    |

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

**ASSET VALUATION RESERVE**  
**BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS**  
**EQUITY AND OTHER INVESTED ASSET COMPONENT**

| Line Number | NAIC Designation | Description   | 1<br>Book/Adjusted Carrying Value | 2<br>Reclassify Related Party Encumbrances | 3<br>Add Third Party Encumbrances | 4<br>Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3) | Basic Contribution |                           | Reserve Objective |                           | Maximum Reserve |                            |
|-------------|------------------|---|-----------------------------------|--|-----------------------------------|---|--------------------|---------------------------|-------------------|---------------------------|-----------------|----------------------------|
|             |                  |   |                                   |  |                                   |   | 5<br>Factor        | 6<br>Amount (Cols. 4 x 5) | 7<br>Factor       | 8<br>Amount (Cols. 4 x 7) | 9<br>Factor     | 10<br>Amount (Cols. 4 x 9) |
| 33          |                  | COMMON STOCK  |                                   |  |                                   |   |                    |                           |                   |                           |                 |                            |
| 1.          |                  | Unaffiliated - Public   |                                   | XXX  | XXX                               | 0   | 0.0000             | 0                         | 0.1580 (a)        | 0                         | 0.1580 (a)      |                            |
| 2.          |                  | Unaffiliated - Private  |                                   | XXX  | XXX                               | 0   | 0.0000             | 0                         | 0.1945            | 0                         | 0.1945          |                            |
| 3.          |                  | Federal Home Loan Bank  |                                   | XXX  | XXX                               | 0   | 0.0000             | 0                         | 0.0061            | 0                         | 0.0097          |                            |
| 4.          |                  | Affiliated - Life with AVR  |                                   | XXX  | XXX                               | 0   | 0.0000             | 0                         | 0.0000            | 0                         | 0.0000          |                            |
| 5.          |                  | Affiliated - Investment Subsidiary:                                 |                                   |  |                                   |   |                    |                           |                   |                           |                 |                            |
| 6.          |                  | Fixed Income - Exempt Obligations                                   |                                   |  |                                   | 0   | XXX                |                           | XXX               |                           | XXX             |                            |
| 7.          |                  | Fixed Income - Highest Quality                                      |                                   |  |                                   | 0   | XXX                |                           | XXX               |                           | XXX             |                            |
| 8.          |                  | Fixed Income - High Quality   |                                   |  |                                   | 0   | XXX                |                           | XXX               |                           | XXX             |                            |
| 9.          |                  | Fixed Income - Medium Quality                                       |                                   |  |                                   | 0   | XXX                |                           | XXX               |                           | XXX             |                            |
| 10.         |                  | Fixed Income - Low Quality  |                                   |  |                                   | 0   | XXX                |                           | XXX               |                           | XXX             |                            |
| 11.         |                  | Fixed Income - Lower Quality  |                                   |  |                                   | 0   | XXX                |                           | XXX               |                           | XXX             |                            |
| 12.         |                  | Fixed Income - In/Near Default                                      |                                   |  |                                   | 0   | XXX                |                           | XXX               |                           | XXX             |                            |
| 13.         |                  | Unaffiliated Common Stock - Public                                  |                                   |  |                                   | 0   | 0.0000             | 0                         | 0.1580 (a)        | 0                         | 0.1580 (a)      |                            |
| 14.         |                  | Unaffiliated Common Stock - Private                                 |                                   |  |                                   | 0   | 0.0000             | 0                         | 0.1945            | 0                         | 0.1945          |                            |
| 15.         |                  | Real Estate   |                                   |  |                                   | 0   | (b)                | 0                         | (b)               | 0                         | (b)             |                            |
| 16.         |                  | Affiliated - Certain Other (See SVO Purposes and Procedures Manual) |                                   | XXX  | XXX                               | 0   | 0.0000             | 0                         | 0.1580            | 0                         | 0.1580          |                            |
| 17.         |                  | Affiliated - All Other  |                                   | XXX  | XXX                               | 0   | 0.0000             | 0                         | 0.1945            | 0                         | 0.1945          |                            |
|             |                  | Total Common Stock (Sum of Lines 1 through 16)                      | 0                                 | 0  | 0                                 | 0   | XXX                | 0                         | XXX               | 0                         | XXX             |                            |
|             |                  | REAL ESTATE   |                                   |  |                                   |   |                    |                           |                   |                           |                 |                            |
| 18.         |                  | Home Office Property (General Account only)                         |                                   |  |                                   | 0   | 0.0000             | 0                         | 0.0912            | 0                         | 0.0912          |                            |
| 19.         |                  | Investment Properties   |                                   |  |                                   | 0   | 0.0000             | 0                         | 0.0912            | 0                         | 0.0912          |                            |
| 20.         |                  | Properties Acquired in Satisfaction of Debt                         |                                   |  |                                   | 0   | 0.0000             | 0                         | 0.1337            | 0                         | 0.1337          |                            |
| 21.         |                  | Total Real Estate (Sum of Lines 18 through 20)                      | 0                                 | 0  | 0                                 | 0   | XXX                | 0                         | XXX               | 0                         | XXX             |                            |
| 22.         | 1                | OTHER INVESTED ASSETS   |                                   |  |                                   |   |                    |                           |                   |                           |                 |                            |
|             |                  | INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS            |                                   |  |                                   |   |                    |                           |                   |                           |                 |                            |
|             |                  | Exempt Obligations  |                                   | XXX  | XXX                               | 0   | 0.0000             | 0                         | 0.0000            | 0                         | 0.0000          |                            |
|             |                  | Highest Quality   |                                   | XXX  | XXX                               | 0   | 0.0005             | 0                         | 0.0016            | 0                         | 0.0033          |                            |
|             |                  | High Quality  |                                   | XXX  | XXX                               | 0   | 0.0021             | 0                         | 0.0064            | 0                         | 0.0106          |                            |
|             |                  | Medium Quality  |                                   | XXX  | XXX                               | 0   | 0.0099             | 0                         | 0.0263            | 0                         | 0.0376          |                            |
|             |                  | Low Quality   |                                   | XXX  | XXX                               | 0   | 0.0245             | 0                         | 0.0572            | 0                         | 0.0817          |                            |
|             |                  | Lower Quality   |                                   | XXX  | XXX                               | 0   | 0.0630             | 0                         | 0.1128            | 0                         | 0.1880          |                            |
| 27.         | 2                | In or Near Default  |                                   | XXX  | XXX                               | 0   | 0.0000             | 0                         | 0.2370            | 0                         | 0.2370          |                            |
|             |                  | Total with Bond Characteristics (Sum of Lines 22 through 28)        | 0                                 | XXX  | XXX                               | 0   | XXX                | 0                         | XXX               | 0                         | XXX             |                            |

**ASSET VALUATION RESERVE (Continued)**  
**BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS**  
**EQUITY AND OTHER INVESTED ASSET COMPONENT**

| Line Number | NAIC Designation | Description   | 1<br>Book/Adjusted Carrying Value | 2<br>Reclassify Related Party Encumbrances | 3<br>Add Third Party Encumbrances | 4<br>Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3) | Basic Contribution |                           | Reserve Objective |                           | Maximum Reserve |                            |
|-------------|------------------|---|-----------------------------------|--|-----------------------------------|---|--------------------|---------------------------|-------------------|---------------------------|-----------------|----------------------------|
|             |                  |   |                                   |  |                                   |   | 5<br>Factor        | 6<br>Amount (Cols. 4 x 5) | 7<br>Factor       | 8<br>Amount (Cols. 4 x 7) | 9<br>Factor     | 10<br>Amount (Cols. 4 x 9) |
|             |                  | INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS           |                                   |  |                                   |   |                    |                           |                   |                           |                 |                            |
| 30.         | 1                | Highest Quality .....   | 33,846,272                        | XXX  | XXX                               | 33,846,272  | 0.0005             | 16,923                    | 0.0016            | 54,154                    | 0.0033          | 111,693                    |
| 31.         | 2                | High Quality .....  | 5,241,005                         | XXX  | XXX                               | 5,241,005   | 0.0021             | 11,006                    | 0.0064            | 33,542                    | 0.0106          | 55,555                     |
| 32.         | 3                | Medium Quality .....  |                                   | XXX  | XXX                               | 0   | 0.0099             | 0                         | 0.0263            | 0                         | 0.0376          | 0                          |
| 33.         | 4                | Low Quality .....   |                                   | XXX  | XXX                               | 0   | 0.0245             | 0                         | 0.0572            | 0                         | 0.0817          | 0                          |
| 34.         | 5                | Lower Quality .....   |                                   | XXX  | XXX                               | 0   | 0.0630             | 0                         | 0.1128            | 0                         | 0.1880          | 0                          |
| 35.         | 6                | In or Near Default .....  |                                   | XXX  | XXX                               | 0   | 0.0000             | 0                         | 0.2370            | 0                         | 0.2370          | 0                          |
| 36.         |                  | Affiliated Life with AVR .....  |                                   | XXX  | XXX                               | 0   | 0.0000             | 0                         | 0.0000            | 0                         | 0.0000          | 0                          |
| 37.         |                  | Total with Preferred Stock Characteristics (Sum of Lines 30 through 36) ..... | 39,087,277                        | XXX  | XXX                               | 39,087,277  | XXX                | 27,929                    | XXX               | 87,696                    | XXX             | 167,247                    |
|             |                  | INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS             |                                   |  |                                   |   |                    |                           |                   |                           |                 |                            |
|             |                  | In Good Standing Affiliated:  |                                   |  |                                   |   |                    |                           |                   |                           |                 |                            |
| 38.         |                  | Mortgages - CM1 - Highest Quality .....                                       |                                   |  | XXX                               | 0   | 0.0011             | 0                         | 0.0057            | 0                         | 0.0074          | 0                          |
| 39.         |                  | Mortgages - CM2 - High Quality .....  |                                   |  | XXX                               | 0   | 0.0040             | 0                         | 0.0114            | 0                         | 0.0149          | 0                          |
| 40.         |                  | Mortgages - CM3 - Medium Quality .....  |                                   |  | XXX                               | 0   | 0.0069             | 0                         | 0.0200            | 0                         | 0.0257          | 0                          |
| 41.         |                  | Mortgages - CM4 - Low Medium Quality .....                                    |                                   |  | XXX                               | 0   | 0.0120             | 0                         | 0.0343            | 0                         | 0.0428          | 0                          |
| 42.         |                  | Mortgages - CM5 - Low Quality .....   |                                   |  | XXX                               | 0   | 0.0183             | 0                         | 0.0486            | 0                         | 0.0628          | 0                          |
| 43.         |                  | Residential Mortgages - Insured or Guaranteed .....                           |                                   |  | XXX                               | 0   | 0.0003             | 0                         | 0.0007            | 0                         | 0.0011          | 0                          |
| 44.         |                  | Residential Mortgages - All Other .....                                       |                                   |  | XXX                               | 0   | 0.0015             | 0                         | 0.0034            | 0                         | 0.0046          | 0                          |
| 45.         |                  | Commercial Mortgages - Insured or Guaranteed .....                            |                                   |  | XXX                               | 0   | 0.0003             | 0                         | 0.0007            | 0                         | 0.0011          | 0                          |
|             |                  | Overdue, Not in Process Affiliated:   |                                   |  |                                   |   |                    |                           |                   |                           |                 |                            |
| 46.         |                  | Farm Mortgages .....  |                                   |  | XXX                               | 0   | 0.0480             | 0                         | 0.0868            | 0                         | 0.1371          | 0                          |
| 47.         |                  | Residential Mortgages - Insured or Guaranteed .....                           |                                   |  | XXX                               | 0   | 0.0006             | 0                         | 0.0014            | 0                         | 0.0023          | 0                          |
| 48.         |                  | Residential Mortgages - All Other .....                                       |                                   |  | XXX                               | 0   | 0.0029             | 0                         | 0.0066            | 0                         | 0.0103          | 0                          |
| 49.         |                  | Commercial Mortgages - Insured or Guaranteed .....                            |                                   |  | XXX                               | 0   | 0.0006             | 0                         | 0.0014            | 0                         | 0.0023          | 0                          |
| 50.         |                  | Commercial Mortgages - All Other .....  |                                   |  | XXX                               | 0   | 0.0480             | 0                         | 0.0868            | 0                         | 0.1371          | 0                          |
|             |                  | In Process of Foreclosure Affiliated:   |                                   |  |                                   |   |                    |                           |                   |                           |                 |                            |
| 51.         |                  | Farm Mortgages .....  |                                   |  | XXX                               | 0   | 0.0000             | 0                         | 0.1942            | 0                         | 0.1942          | 0                          |
| 52.         |                  | Residential Mortgages - Insured or Guaranteed .....                           |                                   |  | XXX                               | 0   | 0.0000             | 0                         | 0.0046            | 0                         | 0.0046          | 0                          |
| 53.         |                  | Residential Mortgages - All Other .....                                       |                                   |  | XXX                               | 0   | 0.0000             | 0                         | 0.0149            | 0                         | 0.0149          | 0                          |
| 54.         |                  | Commercial Mortgages - Insured or Guaranteed .....                            |                                   |  | XXX                               | 0   | 0.0000             | 0                         | 0.0046            | 0                         | 0.0046          | 0                          |
| 55.         |                  | Commercial Mortgages - All Other .....  |                                   |  | XXX                               | 0   | 0.0000             | 0                         | 0.1942            | 0                         | 0.1942          | 0                          |
| 56.         |                  | Total Affiliated (Sum of Lines 38 through 55) .....                           | 0                                 | 0  | XXX                               | 0   | XXX                | 0                         | XXX               | 0                         | XXX             | 0                          |
| 57.         |                  | Unaffiliated - In Good Standing With Covenants .....                          |                                   |  | XXX                               | 0   | (c)                | 0                         | (c)               | 0                         | (c)             | 0                          |
| 58.         |                  | Unaffiliated - In Good Standing Defeased With Government Securities .....     |                                   |  | XXX                               | 0   | 0.0011             | 0                         | 0.0057            | 0                         | 0.0074          | 0                          |
| 59.         |                  | Unaffiliated - In Good Standing Primarily Senior .....                        | 18,163,955                        |  | XXX                               | 18,163,955  | 0.0040             | 72,656                    | 0.0114            | 207,069                   | 0.0149          | 270,643                    |
| 60.         |                  | Unaffiliated - In Good Standing All Other .....                               |                                   |  | XXX                               | 0   | 0.0069             | 0                         | 0.0200            | 0                         | 0.0257          | 0                          |
| 61.         |                  | Unaffiliated - Overdue, Not in Process .....                                  |                                   |  | XXX                               | 0   | 0.0480             | 0                         | 0.0868            | 0                         | 0.1371          | 0                          |
| 62.         |                  | Unaffiliated - In Process of Foreclosure .....                                |                                   |  | XXX                               | 0   | 0.0000             | 0                         | 0.1942            | 0                         | 0.1942          | 0                          |
| 63.         |                  | Total Unaffiliated (Sum of Lines 57 through 62) .....                         | 18,163,955                        | 0  | XXX                               | 18,163,955  | XXX                | 72,656                    | XXX               | 207,069                   | XXX             | 270,643                    |
| 64.         |                  | Total with Mortgage Loan Characteristics (Lines 56 + 63) .....                | 18,163,955                        | 0  | XXX                               | 18,163,955  | XXX                | 72,656                    | XXX               | 207,069                   | XXX             | 270,643                    |

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

**ASSET VALUATION RESERVE (Continued)**  
**BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS**  
**EQUITY AND OTHER INVESTED ASSET COMPONENT**

| Line Number | NAIC Designation | Description  | 1<br>Book/Adjusted Carrying Value | 2<br>Reclassify Related Party Encumbrances | 3<br>Add Third Party Encumbrances | 4<br>Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3) | Basic Contribution |                           | Reserve Objective |                           | Maximum Reserve  |                            |
|-------------|------------------|--|-----------------------------------|--|-----------------------------------|---|--------------------|---------------------------|-------------------|---------------------------|------------------|----------------------------|
|             |                  |  |                                   |  |                                   |   | 5<br>Factor        | 6<br>Amount (Cols. 4 x 5) | 7<br>Factor       | 8<br>Amount (Cols. 4 x 7) | 9<br>Factor      | 10<br>Amount (Cols. 4 x 9) |
| 65.         |                  | INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK                              |                                   |  |                                   |   |                    |                           |                   |                           |                  |                            |
| 66.         |                  | Unaffiliated Public .....  |                                   | XXX  | XXX                               | 0   | 0.0000             | 0                         | 0.1580 (a)        | 0                         | 0.1580 (a) ..... |                            |
| 67.         |                  | Unaffiliated Private .....   | 84,842                            | XXX  | XXX                               | 84,842  | 0.0000             | 0                         | 0.1945            | 16,502                    | 0.1945 .....     |                            |
| 68.         |                  | Affiliated Life with AVR .....   |                                   | XXX  | XXX                               | 0   | 0.0000             | 0                         | 0.0000            | 0                         | 0.0000 .....     |                            |
| 69.         |                  | Affiliated Certain Other (See SVO Purposes & Procedures Manual) .....                        |                                   | XXX  | XXX                               | 0   | 0.0000             | 0                         | 0.1580            | 0                         | 0.1580 .....     |                            |
| 70.         |                  | Affiliated Other - All Other .....   |                                   | XXX  | XXX                               | 0   | 0.0000             | 0                         | 0.1945            | 0                         | 0.1945 .....     |                            |
|             |                  | Total with Common Stock Characteristics (Sum of Lines 65 through 69)                         | 84,842                            | XXX  | XXX                               | 84,842  | XXX                | 0                         | XXX               | 16,502                    | XXX              |                            |
| 71.         |                  | INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE                               |                                   |  |                                   |   |                    |                           |                   |                           |                  |                            |
| 72.         |                  | Home Office Property (General Account only) .....  |                                   |  |                                   | 0   | 0.0000             | 0                         | 0.0912            | 0                         | 0.0912 .....     |                            |
| 73.         |                  | Investment Properties .....  |                                   |  |                                   | 0   | 0.0000             | 0                         | 0.0912            | 0                         | 0.0912 .....     |                            |
| 74.         |                  | Properties Acquired in Satisfaction of Debt .....  |                                   |  |                                   | 0   | 0.0000             | 0                         | 0.1337            | 0                         | 0.1337 .....     |                            |
|             |                  | Total with Real Estate Characteristics (Sum of Lines 71 through 73)                          | 0                                 | 0  | 0                                 | 0   | XXX                | 0                         | XXX               | 0                         | XXX              |                            |
| 75.         |                  | LOW INCOME HOUSING TAX CREDIT INVESTMENTS  |                                   |  |                                   |   |                    |                           |                   |                           |                  |                            |
| 76.         |                  | Guaranteed Federal Low Income Housing Tax Credit .....                                       | 0                                 |  |                                   | 0   | 0.0003             | 0                         | 0.0006            | 0                         | 0.0010 .....     |                            |
| 77.         |                  | Non-guaranteed Federal Low Income Housing Tax Credit .....                                   | 14,207,854                        |  |                                   | 14,207,854  | 0.0063             | 89,509                    | 0.0120            | 170,494                   | 0.0190 .....     |                            |
| 78.         |                  | Guaranteed State Low Income Housing Tax Credit .....   | 0                                 |  |                                   | 0   | 0.0003             | 0                         | 0.0006            | 0                         | 0.0010 .....     |                            |
| 79.         |                  | Non-guaranteed State Low Income Housing Tax Credit .....                                     | 0                                 |  |                                   | 0   | 0.0063             | 0                         | 0.0120            | 0                         | 0.0190 .....     |                            |
| 80.         |                  | All Other Low Income Housing Tax Credit .....  | 0                                 |  |                                   | 0   | 0.0273             | 0                         | 0.0600            | 0                         | 0.0975 .....     |                            |
|             |                  | Total LIHTC (Sum of Lines 75 through 79)   | 14,207,854                        | 0  | 0                                 | 14,207,854  | XXX                | 89,509                    | XXX               | 170,494                   | XXX              |                            |
| 81.         |                  | ALL OTHER INVESTMENTS  |                                   |  |                                   |   |                    |                           |                   |                           |                  |                            |
| 82.         |                  | NAIC 1 Working Capital Finance Investments .....   |                                   | XXX  |                                   | 0   | 0.0000             | 0                         | 0.0042            | 0                         | 0.0042 .....     |                            |
| 83.         |                  | NAIC 2 Working Capital Finance Investments .....   |                                   | XXX  |                                   | 0   | 0.0000             | 0                         | 0.0137            | 0                         | 0.0137 .....     |                            |
| 84.         |                  | Other Invested Assets - Schedule BA .....  |                                   | XXX  |                                   | 0   | 0.0000             | 0                         | 0.1580            | 0                         | 0.1580 .....     |                            |
| 85.         |                  | Other Short-Term Invested Assets - Schedule DA .....   |                                   | XXX  |                                   | 0   | 0.0000             | 0                         | 0.1580            | 0                         | 0.1580 .....     |                            |
|             |                  | Total All Other (Sum of Lines 81, 82, 83 and 84)   | 0                                 | XXX  | 0                                 | 0   | XXX                | 0                         | XXX               | 0                         | XXX              |                            |
| 86.         |                  | Total Other Invested Assets - Schedules BA & DA (Sum of Lines 29, 37, 64, 70, 74, 80 and 85) | 71,543,928                        | 0  | 0                                 | 71,543,928  | XXX                | 190,095                   | XXX               | 481,762                   | XXX              |                            |

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

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

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

Asset Valuation Reserve - Replications (Synthetic) Assets

**N O N E**

Schedule F - Claims

**N O N E**

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

**SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT**

|   | Total        |        | Group Accident and Health |      | Credit Accident and Health (Group and Individual) |     | Collectively Renewable |         | Other Individual Contracts |             |              |         |              |         |              |         |     |     |
|---|--------------|--------|---------------------------|------|---|-----|------------------------|---------|----------------------------|-------------|--------------|---------|--------------|---------|--------------|---------|-----|-----|
|   | 1<br>Amount  | 2<br>% |                           |      |   |     |                        |         | 11<br>Amount               | 12<br>%     | 13<br>Amount | 14<br>% | 15<br>Amount | 16<br>% | 17<br>Amount | 18<br>% |     |     |
| <b>PART 1. - ANALYSIS OF UNDERWRITING OPERATIONS</b>                |              |        |                           |      |   |     |                        |         |                            |             |              |         |              |         |              |         |     |     |
| 1. Premiums written   | 317,668,976  | XXX    | 15,449,343                | XXX  |   | XXX |                        | 196,629 | XXX                        | 302,023,004 | XXX          |         | XXX          |         | XXX          |         | XXX | XXX |
| 2. Premiums earned  | 317,039,867  | XXX    | 15,449,709                | XXX  |   | XXX |                        | 199,810 | XXX                        | 301,390,348 | XXX          |         | XXX          |         | XXX          |         | XXX | XXX |
| 3. Incurred claims  | 103,698,794  | 32.7   | 1,808,072                 | 11.7 | 0   | 0.0 | 0                      | 0.0     | 963                        | 0.5         | 101,889,759  | 33.8    | 0            | 0.0     | 0            | 0.0     | 0   | 0.0 |
| 4. Cost containment expenses  | 0            | 0.0    | 0.0                       | 0.0  |   | 0.0 |                        | 0.0     |                            | 0.0         |              | 0.0     |              | 0.0     |              | 0.0     |     | 0.0 |
| 5. Incurred claims and cost containment expenses (Lines 3 and 4)    | 103,698,794  | 32.7   | 1,808,072                 | 11.7 | 0   | 0.0 | 0                      | 0.0     | 963                        | 0.5         | 101,889,759  | 33.8    | 0            | 0.0     | 0            | 0.0     | 0   | 0.0 |
| 6. Increase in contract reserves                                    | 113,094,827  | 35.7   | 8,306,501                 | 53.8 | 0   | 0.0 | 0                      | 0.0     | 32,879                     | 16.5        | 104,755,447  | 34.8    | 0            | 0.0     | 0            | 0.0     | 0   | 0.0 |
| 7. Commissions (a)  | 70,180,931   | 22.1   | 3,271,708                 | 21.2 |   | 0.0 |                        | 0.0     | 14,419                     | 7.2         | 66,894,804   | 22.2    |              | 0.0     |              | 0.0     |     | 0.0 |
| 8. Other general insurance expenses                                 | 33,285,530   | 10.5   | 1,618,791                 | 10.5 |   | 0.0 |                        | 0.0     | 20,603                     | 10.3        | 31,646,136   | 10.5    |              | 0.0     |              | 0.0     |     | 0.0 |
| 9. Taxes, licenses and fees   | 6,961,885    | 2.2    | 338,581                   | 2.2  |   | 0.0 |                        | 0.0     | 4,309                      | 2.2         | 6,618,995    | 2.2     |              | 0.0     |              | 0.0     |     | 0.0 |
| 10. Total other expenses incurred                                   | 110,428,346  | 34.8   | 5,229,080                 | 33.8 | 0   | 0.0 | 0                      | 0.0     | 39,331                     | 19.7        | 105,159,935  | 34.9    | 0            | 0.0     | 0            | 0.0     | 0   | 0.0 |
| 11. Aggregate write-ins for deductions                              | 0            | 0.0    | 0                         | 0.0  | 0   | 0.0 | 0                      | 0.0     | 0                          | 0.0         | 0            | 0.0     | 0            | 0.0     | 0            | 0.0     | 0   | 0.0 |
| 12. Gain from underwriting before dividends or refunds              | (10,182,100) | (3.2)  | 106,056                   | 0.7  | 0   | 0.0 | 0                      | 0.0     | 126,637                    | 63.4        | (10,414,793) | (3.5)   | 0            | 0.0     | 0            | 0.0     | 0   | 0.0 |
| 13. Dividends or refunds  | 0            | 0.0    | 0.0                       | 0.0  |   | 0.0 |                        | 0.0     |                            | 0.0         |              | 0.0     |              | 0.0     |              | 0.0     |     | 0.0 |
| 14. Gain from underwriting after dividends or refunds               | (10,182,100) | (3.2)  | 106,056                   | 0.7  | 0   | 0.0 | 0                      | 0.0     | 126,637                    | 63.4        | (10,414,793) | (3.5)   | 0            | 0.0     | 0            | 0.0     | 0   | 0.0 |
| <b>DETAILS OF WRITE-INS</b>   |              |        |                           |      |   |     |                        |         |                            |             |              |         |              |         |              |         |     |     |
| 1101.   |              |        |                           |      |   |     |                        |         |                            |             |              |         |              |         |              |         |     |     |
| 1102.   |              |        |                           |      |   |     |                        |         |                            |             |              |         |              |         |              |         |     |     |
| 1103.   |              |        |                           |      |   |     |                        |         |                            |             |              |         |              |         |              |         |     |     |
| 1198. Summary of remaining write-ins for Line 11 from overflow page | 0            | 0.0    | 0                         | 0.0  | 0   | 0.0 | 0                      | 0.0     | 0                          | 0.0         | 0            | 0.0     | 0            | 0.0     | 0            | 0.0     | 0   | 0.0 |
| 1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)        | 0            | 0.0    | 0                         | 0.0  | 0   | 0.0 | 0                      | 0.0     | 0                          | 0.0         | 0            | 0.0     | 0            | 0.0     | 0            | 0.0     | 0   | 0.0 |

(a) Includes \$ 0 reported as "Contract, membership and other fees retained by agents."

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

**SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)**

|   | 1<br>Total    | 2<br>Group Accident<br>and Health | 3<br>Credit<br>Accident and Health<br>(Group and<br>Individual) | 4<br>Collectively<br>Renewable | Other Individual Contracts |                              |  |                             |                |
|---|---------------|-----------------------------------|---|--------------------------------|----------------------------|------------------------------|--|-----------------------------|----------------|
|   |               |                                   |   |                                | 5<br>Non-Cancelable        | 6<br>Guaranteed<br>Renewable | 7<br>Non-Renewable<br>for Stated<br>Reasons Only | 8<br>Other Accident<br>Only | 9<br>All Other |
| <b>PART 2. - RESERVES AND LIABILITIES</b> |               |                                   |   |                                |                            |                              |  |                             |                |
| A. Premium Reserves:                      |               |                                   |   |                                |                            |                              |  |                             |                |
| 1. Unearned premiums                      | 17,991,175    | 1,036,486                         |   |                                | 10,346                     | 16,944,343                   |  |                             |                |
| 2. Advance premiums                       | 0             |                                   |   |                                |                            |                              |  |                             |                |
| 3. Reserve for rate credits               | 0             |                                   |   |                                |                            |                              |  |                             |                |
| 4. Total premium reserves, current year   | 17,991,175    | 1,036,486                         | 0   | 0                              | 10,346                     | 16,944,343                   | 0  | 0                           | 0              |
| 5. Total premium reserves, prior year     | 17,362,066    | 1,036,852                         | 0   | 0                              | 13,527                     | 16,311,687                   | 0  | 0                           | 0              |
| 6. Increase in total premium reserves     | 629,109       | (366)                             | 0   | 0                              | (3,181)                    | 632,656                      | 0  | 0                           | 0              |
| B. Contract Reserves:                     |               |                                   |   |                                |                            |                              |  |                             |                |
| 1. Additional reserves (a)                | 1,214,323,569 | 34,845,234                        |   |                                | 341,331                    | 1,179,137,004                |  |                             |                |
| 2. Reserve for future contingent benefits | 0             |                                   |   |                                |                            |                              |  |                             |                |
| 3. Total contract reserves, current year  | 1,214,323,569 | 34,845,234                        | 0   | 0                              | 341,331                    | 1,179,137,004                | 0  | 0                           | 0              |
| 4. Total contract reserves, prior year.   | 1,101,228,742 | 26,538,733                        | 0   | 0                              | 308,452                    | 1,074,381,557                | 0  | 0                           | 0              |
| 5. Increase in contract reserves          | 113,094,827   | 8,306,501                         | 0   | 0                              | 32,879                     | 104,755,447                  | 0  | 0                           | 0              |
| C. Claim Reserves and Liabilities:        |               |                                   |   |                                |                            |                              |  |                             |                |
| 1. Total current year                     | 29,660,817    | 1,587,564                         | 0   | 0                              | 31,508                     | 28,041,745                   | 0  | 0                           | 0              |
| 2. Total prior year                       | 28,718,679    | 1,287,977                         | 0   | 0                              | 41,804                     | 27,388,898                   | 0  | 0                           | 0              |
| 3. Increase                               | 942,138       | 299,587                           | 0   | 0                              | (10,296)                   | 652,847                      | 0  | 0                           | 0              |

| PART 3. - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES |             |           |   |   |          |             |   |   |
|---|-------------|-----------|---|---|----------|-------------|---|---|
| 1. Claims paid during the year:                               |             |           |   |   |          |             |   |   |
| 1.1 On claims incurred prior to current year                  | 19,554,160  | 589,087   |   |   | 7,755    | 18,957,318  |   |   |
| 1.2 On claims incurred during current year                    | 83,202,496  | 919,398   |   |   | 3,504    | 82,279,594  |   |   |
| 2. Claim reserves and liabilities, December 31, current year: |             |           |   |   |          |             |   |   |
| 2.1 On claims incurred prior to current year                  | 5,039,896   | 242,820   |   |   | 2,601    | 4,794,475   |   |   |
| 2.2 On claims incurred during current year                    | 24,620,921  | 1,344,744 |   |   | 28,907   | 23,247,270  |   |   |
| 3. Test:  |             |           |   |   |          |             |   |   |
| 3.1 Lines 1.1 and 2.1   | 24,594,056  | 831,907   | 0 | 0 | 10,356   | 23,751,793  | 0 | 0 |
| 3.2 Claim reserves and liabilities, December 31, prior year   | 28,718,679  | 1,287,977 | 0 | 0 | 41,804   | 27,388,898  | 0 | 0 |
| 3.3 Line 3.1 minus Line 3.2                                   | (4,124,623) | (456,070) | 0 | 0 | (31,448) | (3,637,105) | 0 | 0 |

| PART 4. - REINSURANCE   |           |        |   |   |        |           |  |  |
|-------------------------|-----------|--------|---|---|--------|-----------|--|--|
| A. Reinsurance Assumed: |           |        |   |   |        |           |  |  |
| 1. Premiums written     | 0         |        |   |   |        |           |  |  |
| 2. Premiums earned      | 0         |        |   |   |        |           |  |  |
| 3. Incurred claims      | 0         |        |   |   |        |           |  |  |
| 4. Commissions          | 0         | 0      | 0 | 0 |        |           |  |  |
| B. Reinsurance Ceded:   |           |        |   |   |        |           |  |  |
| 1. Premiums written     | 2,916,025 | 78,425 |   |   | 90,302 | 2,747,298 |  |  |
| 2. Premiums earned      | 2,919,424 | 79,093 |   |   | 90,837 | 2,749,494 |  |  |
| 3. Incurred claims      | 340,187   | 6,120  |   |   | 2,304  | 331,763   |  |  |
| 4. Commissions          | 988,216   | 20,289 | 0 |   | 27,234 | 940,693   |  |  |

(a) Includes \$ 0 premium deficiency reserve.

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America  
**SCHEDULE H - PART 5 - HEALTH CLAIMS**

|   | 1<br>Medical | 2<br>Dental | 3<br>Other  | 4<br>Total  |
|---|--------------|-------------|-------------|-------------|
| A. Direct:  |              |             |             |             |
| 1. Incurred Claims .....                              |              |             | 104,038,981 | 104,038,981 |
| 2. Beginning Claim Reserves and Liabilities .....     |              |             | 28,960,706  | 28,960,706  |
| 3. Ending Claim Reserves and Liabilities .....        |              |             | 29,931,386  | 29,931,386  |
| 4. Claims Paid  | 0            | 0           | 103,068,301 | 103,068,301 |
| B. Assumed Reinsurance:                               |              |             |             |             |
| 5. Incurred Claims.....                               |              |             | 0           | 0           |
| 6. Beginning Claim Reserves and Liabilities .....     |              |             | 0           | 0           |
| 7. Ending Claim Reserves and Liabilities .....        |              |             | 0           | 0           |
| 8. Claims Paid  | 0            | 0           | 0           | 0           |
| C. Ceded Reinsurance:                                 |              |             |             |             |
| 9. Incurred Claims.....                               |              |             | 340,187     | 340,187     |
| 10. Beginning Claim Reserves and Liabilities .....    |              |             | 242,027     | 242,027     |
| 11. Ending Claim Reserves and Liabilities .....       |              |             | 270,569     | 270,569     |
| 12. Claims Paid                                       | 0            | 0           | 311,645     | 311,645     |
| D. Net:   |              |             |             |             |
| 13. Incurred Claims.....                              | 0            | 0           | 103,698,794 | 103,698,794 |
| 14. Beginning Claim Reserves and Liabilities .....    | 0            | 0           | 28,718,679  | 28,718,679  |
| 15. Ending Claim Reserves and Liabilities .....       | 0            | 0           | 29,660,817  | 29,660,817  |
| 16. Claims Paid                                       | 0            | 0           | 102,756,656 | 102,756,656 |
| E. Net Incurred Claims and Cost Containment Expenses: |              |             |             |             |
| 17. Incurred Claims and Cost Containment Expenses     |              |             | 103,698,794 | 103,698,794 |
| 18. Beginning Reserves and Liabilities .....          |              |             | 28,718,679  | 28,718,679  |
| 19. Ending Reserves and Liabilities .....             |              |             | 29,660,817  | 29,660,817  |
| 20. Paid Claims and Cost Containment Expenses         | 0            | 0           | 102,756,656 | 102,756,656 |

Schedule S - Part 1 - Section 1

**N O N E**

Schedule S - Part 1 - Section 2

**N O N E**

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

**SCHEDULE S - PART 2**

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

| 1<br>NAIC<br>Company<br>Code  | 2<br>ID<br>Number | 3<br>Effective<br>Date | 4<br>Name of Company | 5<br>Domiciliary<br>Jurisdiction | 6<br>Paid Losses | 7<br>Unpaid Losses |
|---|-------------------|------------------------|----------------------|----------------------------------|------------------|--------------------|
| 0399999. Total Life and Annuity - U.S. Affiliates                         |                   |                        |                      |                                  | 0                | 0                  |
| 0699999. Total Life and Annuity - Non-U.S. Affiliates                     |                   |                        |                      |                                  | 0                | 0                  |
| 0799999. Total Life and Annuity - Affiliates                              |                   |                        |                      |                                  | 0                | 0                  |
| 88099 ... 75-1608507 ... 08/01/2007 ... Optimum Re Insurance Company      |                   |                        |                      | TX                               |                  | 188,000            |
| 0899999. Life and Annuity - U.S. Non-Affiliates                           |                   |                        |                      |                                  | 0                | 188,000            |
| 1099999. Total Life and Annuity - Non-Affiliates                          |                   |                        |                      |                                  | 0                | 188,000            |
| 1199999. Total Life and Annuity   |                   |                        |                      |                                  | 0                | 188,000            |
| 1499999. Total Accident and Health - U.S. Affiliates                      |                   |                        |                      |                                  | 0                | 0                  |
| 1799999. Total Accident and Health - Non-U.S. Affiliates                  |                   |                        |                      |                                  | 0                | 0                  |
| 1899999. Total Accident and Health - Affiliates                           |                   |                        |                      |                                  | 0                | 0                  |
| 61832 ... 52-0676509 ... 10/08/2010 ... Chesapeake Life Insurance Company |                   |                        |                      | OK                               |                  | 270,569            |
| 1999999. Accident and Health - U.S. Non-Affiliates                        |                   |                        |                      |                                  | 0                | 270,569            |
| 2199999. Total Accident and Health - Non-Affiliates                       |                   |                        |                      |                                  | 0                | 270,569            |
| 2299999. Total Accident and Health  |                   |                        |                      |                                  | 0                | 270,569            |
| 2399999. Total U.S. (Sum of 0399999, 0899999, 1499999 and 1999999)        |                   |                        |                      |                                  | 0                | 458,569            |
| 2499999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999 and 2099999)    |                   |                        |                      |                                  | 0                | 0                  |
| 9999999 Totals - Life, Annuity and Accident and Health                    |                   |                        |                      |                                  | 0                | 458,569            |

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

**SCHEDULE S - PART 3 - SECTION 1**

Reinsurance Ceded Life Insurance, Annuities, Deposit Funds and Other Liabilities Without Life or Disability Contingencies, and Related Benefits Listed by Reinsuring Company as of December 31, Current Year

| 1<br>NAIC<br>Company<br>Code | 2<br>ID<br>Number   | 3<br>Effective<br>Date | 4<br>Name of Company         | 5<br>Domi-<br>ciliary<br>Juris-<br>diction | 6<br>Type of<br>Reinsurance<br>Ceded | 7<br>Type of<br>Business<br>Ceded | 8<br>Amount in Force<br>at End of Year | Reserve Credit Taken |                  | 11<br>Premiums | Outstanding Surplus Relief |                  | 14<br>Modified<br>Coinsurance<br>Reserve | 15<br>Funds Withheld<br>Under<br>Coinsurance |
|------------------------------|---|------------------------|------------------------------|--|--------------------------------------|-----------------------------------|--|----------------------|------------------|----------------|----------------------------|------------------|--|--|
|                              |   |                        |                              |  |                                      |                                   |  | 9<br>Current Year    | 10<br>Prior Year |                | 12<br>Current Year         | 13<br>Prior Year |  |  |
| 0399999.                     | Total General Account - Authorized U.S. Affiliates  |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 0699999.                     | Total General Account - Authorized Non-U.S. Affiliates  |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 0799999.                     | Total General Account - Authorized Affiliates   |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 88099                        | 75-1608507  | 03/01/2007             | Optimum Re Insurance Company | TX   | CO/I                                 | OL                                | 26,500                                 | 8,748                | 8,099            | 1,480          |                            |                  |  |  |
| 88099                        | 75-1608507  | 08/01/2007             | Optimum Re Insurance Company | TX   | YRT/I                                | OL                                | 20,518,108                             | 7,123                | 7,048            | 86,839         |                            |                  |  |  |
| 0899999.                     | General Account - Authorized U.S. Non-Affiliates  |                        |                              |  |                                      |                                   | 20,544,608                             | 15,871               | 15,147           | 88,319         | 0                          | 0                | 0  | 0  |
| 1099999.                     | Total General Account - Authorized Non-Affiliates   |                        |                              |  |                                      |                                   | 20,544,608                             | 15,871               | 15,147           | 88,319         | 0                          | 0                | 0  | 0  |
| 1199999.                     | Total General Account Authorized  |                        |                              |  |                                      |                                   | 20,544,608                             | 15,871               | 15,147           | 88,319         | 0                          | 0                | 0  | 0  |
| 1499999.                     | Total General Account - Unauthorized U.S. Affiliates  |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 1799999.                     | Total General Account - Unauthorized Non-U.S. Affiliates  |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 1899999.                     | Total General Account - Unauthorized Affiliates   |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 2199999.                     | Total General Account - Unauthorized Non-Affiliates   |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 2299999.                     | Total General Account Unauthorized  |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 2599999.                     | Total General Account - Certified U.S. Affiliates   |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 2899999.                     | Total General Account - Certified Non-U.S. Affiliates   |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 2999999.                     | Total General Account - Certified Affiliates  |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 3299999.                     | Total General Account - Certified Non-Affiliates  |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 3399999.                     | Total General Account Certified   |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 3699999.                     | Total General Account - Reciprocal Jurisdiction U.S. Affiliates   |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 3999999.                     | Total General Account - Reciprocal Jurisdiction Non-U.S. Affiliates   |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 4099999.                     | Total General Account - Reciprocal Jurisdiction Affiliates  |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 4399999.                     | Total General Account - Reciprocal Jurisdiction Non-Affiliates  |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 4499999.                     | Total General Account Reciprocal Jurisdiction   |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 4599999.                     | Total General Account Authorized, Unauthorized, Reciprocal Jurisdiction, and Certified  |                        |                              |  |                                      |                                   | 20,544,608                             | 15,871               | 15,147           | 88,319         | 0                          | 0                | 0  | 0  |
| 4899999.                     | Total Separate Accounts - Authorized U.S. Affiliates  |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 5199999.                     | Total Separate Accounts - Authorized Non-U.S. Affiliates  |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 5299999.                     | Total Separate Accounts - Authorized Affiliates   |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 5599999.                     | Total Separate Accounts - Authorized Non-Affiliates   |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 5699999.                     | Total Separate Accounts Authorized  |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 5999999.                     | Total Separate Accounts - Unauthorized U.S. Affiliates  |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 6299999.                     | Total Separate Accounts - Unauthorized Non-U.S. Affiliates  |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 6399999.                     | Total Separate Accounts - Unauthorized Affiliates   |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 6699999.                     | Total Separate Accounts - Unauthorized Non-Affiliates   |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 6799999.                     | Total Separate Accounts Unauthorized  |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 7099999.                     | Total Separate Accounts - Certified U.S. Affiliates   |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 7399999.                     | Total Separate Accounts - Certified Non-U.S. Affiliates   |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 7499999.                     | Total Separate Accounts - Certified Affiliates  |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 7799999.                     | Total Separate Accounts - Certified Non-Affiliates  |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 7899999.                     | Total Separate Accounts Certified   |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 8199999.                     | Total Separate Accounts - Reciprocal Jurisdiction U.S. Affiliates   |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 8499999.                     | Total Separate Accounts - Reciprocal Jurisdiction Non-U.S. Affiliates   |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 8599999.                     | Total Separate Accounts - Reciprocal Jurisdiction Affiliates  |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 8899999.                     | Total Separate Accounts - Reciprocal Jurisdiction Non-Affiliates  |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 8999999.                     | Total Separate Accounts Reciprocal Jurisdiction   |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 9099999.                     | Total Separate Accounts Authorized, Unauthorized, Reciprocal Jurisdiction and Certified   |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 9199999.                     | Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3699999, 4199999, 4899999, 5399999, 5999999, 6499999, 7099999, 7599999, 8199999 and 8699999)     |                        |                              |  |                                      |                                   | 20,544,608                             | 15,871               | 15,147           | 88,319         | 0                          | 0                | 0  | 0  |
| 9299999.                     | Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 3999999, 4299999, 5199999, 5499999, 6299999, 6599999, 7399999, 7699999, 8499999 and 8799999) |                        |                              |  |                                      |                                   | 0                                      | 0                    | 0                | 0              | 0                          | 0                | 0  | 0  |
| 9999999 - Totals             |   |                        |                              |  |                                      |                                   | 20,544,608                             | 15,871               | 15,147           | 88,319         | 0                          | 0                | 0  | 0  |

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

**SCHEDULE S - PART 3 - SECTION 2**

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

| 1<br>NAIC<br>Company<br>Code   | 2<br>ID<br>Number | 3<br>Effective<br>Date | 4<br>Name of Company | 5<br>Domi-<br>ciliary<br>Juris-<br>diction | 6<br>Type of<br>Reinsurance<br>Ceded | 7<br>Type of<br>Business<br>Ceded | 8<br>Premiums | 9<br>Unearned<br>Premiums<br>(Estimated) | 10<br>Reserve Credit<br>Taken Other<br>than for Unearned<br>Premiums | Outstanding Surplus Relief |                  | 13<br>Modified<br>Coinsurance<br>Reserve | 14<br>Funds Withheld<br>Under<br>Coinsurance |
|--|-------------------|------------------------|----------------------|--|--------------------------------------|-----------------------------------|---------------|--|--|----------------------------|------------------|--|--|
|  |                   |                        |                      |  |                                      |                                   |               |  |  | 11<br>Current Year         | 12<br>Prior Year |  |  |
| 0399999. Total General Account - Authorized U.S. Affiliates  |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 0699999. Total General Account - Authorized Non-U.S. Affiliates  |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 0799999. Total General Account - Authorized Affiliates   |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 61832 .. 52-0676509 .. 10/08/2010 .. Chesapeake Life Insurance Company .....   | OK                | OTH/I                  | SD                   | .. 2,176,709                               | 96,990                               | 5,190,330                         |               |  |  |                            |                  |  |  |
| 61832 .. 52-0676509 .. 10/08/2010 .. Chesapeake Life Insurance Company .....   | OK                | OTH/I                  | A                    | 620,541                                    | 26,305                               | 1,083,020                         |               |  |  |                            |                  |  |  |
| 61832 .. 52-0676509 .. 10/08/2010 .. Chesapeake Life Insurance Company .....   | OK                | OTH/I                  | OM                   | 118,775                                    | 5,414                                | 101,227                           |               |  |  |                            |                  |  |  |
| 0899999. General Account - Authorized U.S. Non-Affiliates  |                   |                        |                      |  |                                      |                                   | 2,916,025     | 128,709                                  | 6,374,577  | 0                          | 0                | 0  | 0  |
| 1099999. Total General Account - Authorized Non-Affiliates   |                   |                        |                      |  |                                      |                                   | 2,916,025     | 128,709                                  | 6,374,577  | 0                          | 0                | 0  | 0  |
| 1199999. Total General Account Authorized  |                   |                        |                      |  |                                      |                                   | 2,916,025     | 128,709                                  | 6,374,577  | 0                          | 0                | 0  | 0  |
| 1499999. Total General Account - Unauthorized U.S. Affiliates  |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 1799999. Total General Account - Unauthorized Non-U.S. Affiliates  |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 1899999. Total General Account - Unauthorized Affiliates   |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 2199999. Total General Account - Unauthorized Non-Affiliates   |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 2299999. Total General Account Unauthorized  |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 2599999. Total General Account - Certified U.S. Affiliates   |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 2899999. Total General Account - Certified Non-U.S. Affiliates   |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 2999999. Total General Account - Certified Affiliates  |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 3299999. Total General Account - Certified Non-Affiliates  |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 3399999. Total General Account Certified   |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 3699999. Total General Account - Reciprocal Jurisdiction U.S. Affiliates   |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 3999999. Total General Account - Reciprocal Jurisdiction Non-U.S. Affiliates   |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 4099999. Total General Account - Reciprocal Jurisdiction Affiliates  |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 4399999. Total General Account - Reciprocal Jurisdiction Non-Affiliates  |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 4499999. Total General Account Reciprocal Jurisdiction   |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 4599999. Total General Account Authorized, Unauthorized, Reciprocal Jurisdiction and Certified   |                   |                        |                      |  |                                      |                                   | 2,916,025     | 128,709                                  | 6,374,577  | 0                          | 0                | 0  | 0  |
| 4899999. Total Separate Accounts - Authorized U.S. Affiliates  |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 5199999. Total Separate Accounts - Authorized Non-U.S. Affiliates  |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 5299999. Total Separate Accounts - Authorized Affiliates   |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 5599999. Total Separate Accounts - Authorized Non-Affiliates   |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 5699999. Total Separate Accounts Authorized  |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 5999999. Total Separate Accounts - Unauthorized U.S. Affiliates  |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 6299999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates  |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 6399999. Total Separate Accounts - Unauthorized Affiliates   |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 6699999. Total Separate Accounts - Unauthorized Non-Affiliates   |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 6799999. Total Separate Accounts Unauthorized  |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 7099999. Total Separate Accounts - Certified U.S. Affiliates   |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 7399999. Total Separate Accounts - Certified Non-U.S. Affiliates   |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 7499999. Total Separate Accounts - Certified Affiliates  |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 7799999. Total Separate Accounts - Certified Non-Affiliates  |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 7899999. Total Separate Accounts Certified   |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 8199999. Total Separate Accounts - Reciprocal Jurisdiction U.S. Affiliates   |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 8499999. Total Separate Accounts - Reciprocal Jurisdiction Non-U.S. Affiliates   |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 8599999. Total Separate Accounts - Reciprocal Jurisdiction Affiliates  |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 8899999. Total Separate Accounts - Reciprocal Jurisdiction Non-Affiliates  |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 8999999. Total Separate Accounts Reciprocal Jurisdiction   |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 9099999. Total Separate Accounts Authorized, Unauthorized, Reciprocal Jurisdiction and Certified   |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 9199999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3699999, 4199999, 4899999, 5399999, 5999999, 6499999, 7099999, 7599999, 8199999 and 8699999)     |                   |                        |                      |  |                                      |                                   | 2,916,025     | 128,709                                  | 6,374,577  | 0                          | 0                | 0  | 0  |
| 9299999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 3999999, 4299999, 5199999, 5499999, 6299999, 6599999, 7399999, 7699999, 8499999 and 8799999) |                   |                        |                      |  |                                      |                                   | 0             | 0  | 0  | 0                          | 0                | 0  | 0  |
| 9999999 - Totals   |                   |                        |                      |  |                                      |                                   | 2,916,025     | 128,709                                  | 6,374,577  | 0                          | 0                | 0  | 0  |

Schedule S - Part 4

**N O N E**

Schedule S - Part 4 - Bank Footnote

**N O N E**

Schedule S - Part 5

**N O N E**

Schedule S - Part 5 - Bank Footnote

**N O N E**

**SCHEDULE S - PART 6**Five Year Exhibit of Reinsurance Ceded Business  
(\$000 Omitted)

|  | 1<br>2020 | 2<br>2019 | 3<br>2018 | 4<br>2017 | 5<br>2016 |
|--|-----------|-----------|-----------|-----------|-----------|
| <b>A. OPERATIONS ITEMS</b>   |           |           |           |           |           |
| 1. Premiums and annuity considerations for life and accident and health contracts .....                          | 3,004     | 3,025     | 179,978   | 195,603   | 145,804   |
| 2. Commissions and reinsurance expense allowances .....  | 988       | 996       | 132,919   | 161,414   | 142,963   |
| 3. Contract claims .....   | 300       | 489       | 14,538    | 13,594    | 9,127     |
| 4. Surrender benefits and withdrawals for life contracts .....   | 0         | 0         | 0         | 0         | 0         |
| 5. Dividends to policyholders and refunds to members .....   | 0         | 0         | 0         | 0         | 0         |
| 6. Reserve adjustments on reinsurance ceded .....  | 0         | 0         | 38,914    | 41,307    | 27,106    |
| 7. Increase in aggregate reserve for life and accident and health contracts .....                                | 1,387     | 1,341     | 1,121     | 868       | 628       |
| <b>B. BALANCE SHEET ITEMS</b>  |           |           |           |           |           |
| 8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected ..... | 79        | 77        | 77        | 62        | 36        |
| 9. Aggregate reserves for life and accident and health contracts .....   | 6,519     | 5,132     | 3,790     | 2,670     | 1,801     |
| 10. Liability for deposit-type contracts .....   | 0         | 0         | 0         | 0         | 0         |
| 11. Contract claims unpaid .....   | 459       | 478       | 536       | 1,018     | 853       |
| 12. Amounts recoverable on reinsurance .....   | 0         | 0         | 0         | 4,083     | 2,360     |
| 13. Experience rating refunds due or unpaid .....  | 0         | 0         | 0         | 0         | 0         |
| 14. Policyholders' dividends and refunds to members (not included in Line 10) .....                              | 0         | 0         | 0         | 0         | 0         |
| 15. Commissions and reinsurance expense allowances due .....   | 0         | 0         | 0         | 41,700    | 36,429    |
| 16. Unauthorized reinsurance offset .....  | 0         | 0         | 0         | 0         | 0         |
| 17. Offset for reinsurance with Certified Reinsurers .....   | 0         | 0         | 0         | 0         | 0         |
| <b>C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)</b>   |           |           |           |           |           |
| 18. Funds deposited by and withheld from (F) .....   | 0         | 0         | 0         | 0         | 0         |
| 19. Letters of credit (L) .....  | 0         | 0         | 0         | 0         | 0         |
| 20. Trust agreements (T) .....   | 0         | 0         | 0         | 0         | 0         |
| 21. Other (O) .....  | 0         | 0         | 0         | 0         | 0         |
| <b>D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)</b>                            |           |           |           |           |           |
| 22. Multiple Beneficiary Trust .....   | 0         | 0         | 0         | 0         | 0         |
| 23. Funds deposited by and withheld from (F) .....   | 0         | 0         | 0         | 0         | 0         |
| 24. Letters of credit (L) .....  | 0         | 0         | 0         | 0         | 0         |
| 25. Trust agreements (T) .....   | 0         | 0         | 0         | 0         | 0         |
| 26. Other (O) .....  | 0         | 0         | 0         | 0         | 0         |

**SCHEDULE S - PART 7**

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

|  | 1<br>As Reported<br>(net of ceded) | 2<br>Restatement<br>Adjustments | 3<br>Restated<br>(gross of ceded) |
|--|------------------------------------|---------------------------------|-----------------------------------|
| <b>ASSETS (Page 2, Col. 3)</b>   |                                    |                                 |                                   |
| 1. Cash and invested assets (Line 12) .....  | 1,377,168,731                      |                                 | 1,377,168,731                     |
| 2. Reinsurance (Line 16) .....   | 0                                  | 0                               | 0                                 |
| 3. Premiums and considerations (Line 15) .....   | 11,376,250                         | 79,128                          | 11,455,378                        |
| 4. Net credit for ceded reinsurance .....  | XXX                                | 6,898,598                       | 6,898,598                         |
| 5. All other admitted assets (balance) .....   | 47,244,257                         |                                 | 47,244,257                        |
| 6. Total assets excluding Separate Accounts (Line 26) .....  | 1,435,789,238                      | 6,977,726                       | 1,442,766,964                     |
| 7. Separate Account assets (Line 27) .....   | 0                                  |                                 | 0                                 |
| 8. Total assets (Line 28) .....  | 1,435,789,238                      | 6,977,726                       | 1,442,766,964                     |
| <b>LIABILITIES, CAPITAL AND SURPLUS (Page 3)</b>   |                                    |                                 |                                   |
| 9. Contract reserves (Lines 1 and 2) .....   | 1,247,514,922                      | 6,519,157                       | 1,254,034,079                     |
| 10. Liability for deposit-type contracts (Line 3) .....  |                                    |                                 | 0                                 |
| 11. Claim reserves (Line 4) .....  | 28,112,281                         | 458,569                         | 28,570,850                        |
| 12. Policyholder dividends/member refunds/reserves (Lines 5 through 7) .....                                 | 0                                  |                                 | 0                                 |
| 13. Premium & annuity considerations received in advance (Line 8) .....                                      | 0                                  |                                 | 0                                 |
| 14. Other contract liabilities (Line 9) .....  | 2,022,149                          |                                 | 2,022,149                         |
| 15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount) .....                              | 0                                  | 0                               | 0                                 |
| 16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount) ..... | 0                                  |                                 | 0                                 |
| 17. Reinsurance with Certified Reinsurers (Line 24.02 inset amount) .....                                    | 0                                  |                                 | 0                                 |
| 18. Funds held under reinsurance treaties with Certified Reinsurers (Line 24.03 inset amount) .....          |                                    |                                 | 0                                 |
| 19. All other liabilities (balance) .....  | 22,209,737                         |                                 | 22,209,737                        |
| 20. Total liabilities excluding Separate Accounts (Line 26) .....  | 1,299,859,089                      | 6,977,726                       | 1,306,836,815                     |
| 21. Separate Account liabilities (Line 27) .....   |                                    |                                 | 0                                 |
| 22. Total liabilities (Line 28) .....  | 1,299,859,089                      | 6,977,726                       | 1,306,836,815                     |
| 23. Capital & surplus (Line 38) .....  | 135,930,149                        | XXX                             | 135,930,149                       |
| 24. Total liabilities, capital & surplus (Line 39) .....   | 1,435,789,238                      | 6,977,726                       | 1,442,766,964                     |
| <b>NET CREDIT FOR CEDED REINSURANCE</b>  |                                    |                                 |                                   |
| 25. Contract reserves .....  | 6,519,157                          |                                 |                                   |
| 26. Claim reserves .....   | 458,569                            |                                 |                                   |
| 27. Policyholder dividends/reserves .....  | 0                                  |                                 |                                   |
| 28. Premium & annuity considerations received in advance .....   | 0                                  |                                 |                                   |
| 29. Liability for deposit-type contracts .....   | 0                                  |                                 |                                   |
| 30. Other contract liabilities .....   | 0                                  |                                 |                                   |
| 31. Reinsurance ceded assets .....   | 0                                  |                                 |                                   |
| 32. Other ceded reinsurance recoverables .....   | 0                                  |                                 |                                   |
| 33. Total ceded reinsurance recoverables .....   | 6,977,726                          |                                 |                                   |
| 34. Premiums and considerations .....  | 79,128                             |                                 |                                   |
| 35. Reinsurance in unauthorized companies .....  | 0                                  |                                 |                                   |
| 36. Funds held under reinsurance treaties with unauthorized reinsurers .....                                 | 0                                  |                                 |                                   |
| 37. Reinsurance with Certified Reinsurers .....  | 0                                  |                                 |                                   |
| 38. Funds held under reinsurance treaties with Certified Reinsurers .....                                    | 0                                  |                                 |                                   |
| 39. Other ceded reinsurance payables/offsets .....   | 0                                  |                                 |                                   |
| 40. Total ceded reinsurance payable/offsets .....  | 79,128                             |                                 |                                   |
| 41. Total net credit for ceded reinsurance .....   | 6,898,598                          |                                 |                                   |

**SCHEDULE T - PART 2**  
**INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN**

Allocated by States and Territories

| States, Etc.                 |     | Direct Business Only                   |   |  |   |                                |             |
|------------------------------|-----|--|---|--|---|--------------------------------|-------------|
|                              |     | 1<br>Life<br>(Group and<br>Individual) | 2<br>Annuities<br>(Group and<br>Individual) | 3<br>Disability<br>Income<br>(Group and<br>Individual) | 4<br>Long-Term<br>Care<br>(Group and<br>Individual) | 5<br>Deposit-Type<br>Contracts | 6<br>Totals |
| 1. Alabama                   | AL  | 44,306                                 | 0   |  |   | 0                              | 44,306      |
| 2. Alaska                    | AK  | 0                                      | 0   |  |   | 0                              | 0           |
| 3. Arizona                   | AZ  | 96,920                                 | 0   |  |   | 0                              | 96,920      |
| 4. Arkansas                  | AR  | 260,982                                | 0   |  |   | 0                              | 260,982     |
| 5. California                | CA  | 57,162                                 | 0   |  |   | 0                              | 57,162      |
| 6. Colorado                  | CO  | 66,590                                 | 0   |  |   | 0                              | 66,590      |
| 7. Connecticut               | CT  | 84                                     | 0   |  |   | 0                              | 84          |
| 8. Delaware                  | DE  | 1,928                                  | 0   |  |   | 0                              | 1,928       |
| 9. District of Columbia      | DC  | 0                                      | 0   |  |   | 0                              | 0           |
| 10. Florida                  | FL  | 93,226                                 | 0   |  |   | 0                              | 93,226      |
| 11. Georgia                  | GA  | 161,330                                | 0   |  |   | 0                              | 161,330     |
| 12. Hawaii                   | HI  | 1,331                                  | 0   |  |   | 0                              | 1,331       |
| 13. Idaho                    | ID  | 6,971                                  | 0   |  |   | 0                              | 6,971       |
| 14. Illinois                 | IL  | 100,256                                | 0   |  |   | 0                              | 100,256     |
| 15. Indiana                  | IN  | 24,746                                 | 0   |  |   | 0                              | 24,746      |
| 16. Iowa                     | IA  | 43,491                                 | 0   |  |   | 0                              | 43,491      |
| 17. Kansas                   | KS  | 115,995                                | 0   |  |   | 0                              | 115,995     |
| 18. Kentucky                 | KY  | 167,532                                | 0   |  |   | 0                              | 167,532     |
| 19. Louisiana                | LA  | 33,194                                 | 0   |  |   | 0                              | 33,194      |
| 20. Maine                    | ME  | 1,228                                  | 0   |  |   | 0                              | 1,228       |
| 21. Maryland                 | MD  | 5,875                                  | 0   |  |   | 0                              | 5,875       |
| 22. Massachusetts            | MA  | 1,250                                  | 0   |  |   | 0                              | 1,250       |
| 23. Michigan                 | MI  | 4,272                                  | 0   |  |   | 0                              | 4,272       |
| 24. Minnesota                | MN  | 48,785                                 | 0   |  |   | 0                              | 48,785      |
| 25. Mississippi              | MS  | 15,930                                 | 0   |  |   | 0                              | 15,930      |
| 26. Missouri                 | MO  | 109,048                                | 0   |  |   | 0                              | 109,048     |
| 27. Montana                  | MT  | 14,042                                 | 0   |  |   | 0                              | 14,042      |
| 28. Nebraska                 | NE  | 22,359                                 | 0   |  |   | 0                              | 22,359      |
| 29. Nevada                   | NV  | 9,607                                  | 0   |  |   | 0                              | 9,607       |
| 30. New Hampshire            | NH  | 10,443                                 | 0   |  |   | 0                              | 10,443      |
| 31. New Jersey               | NJ  | 1,474                                  | 0   |  |   | 0                              | 1,474       |
| 32. New Mexico               | NM  | 18,834                                 | 0   |  |   | 0                              | 18,834      |
| 33. New York                 | NY  | 0                                      | 0   |  |   | 0                              | 0           |
| 34. North Carolina           | NC  | 134,658                                | 0   |  |   | 0                              | 134,658     |
| 35. North Dakota             | ND  | 5,610                                  | 0   |  |   | 0                              | 5,610       |
| 36. Ohio                     | OH  | 88,156                                 | 0   |  |   | 0                              | 88,156      |
| 37. Oklahoma                 | OK  | 87,673                                 | 0   |  |   | 0                              | 87,673      |
| 38. Oregon                   | OR  | 6,953                                  | 0   |  |   | 0                              | 6,953       |
| 39. Pennsylvania             | PA  | 20,407                                 | 0   |  |   | 0                              | 20,407      |
| 40. Rhode Island             | RI  | 0                                      | 0   |  |   | 0                              | 0           |
| 41. South Carolina           | SC  | 81,650                                 | 0   |  |   | 0                              | 81,650      |
| 42. South Dakota             | SD  | 13,122                                 | 0   |  |   | 0                              | 13,122      |
| 43. Tennessee                | TN  | 149,295                                | 0   |  |   | 0                              | 149,295     |
| 44. Texas                    | TX  | 1,912,631                              | 0   |  |   | 0                              | 1,912,631   |
| 45. Utah                     | UT  | 3,542                                  | 0   |  |   | 0                              | 3,542       |
| 46. Vermont                  | VT  | 1,684                                  | 0   |  |   | 0                              | 1,684       |
| 47. Virginia                 | VA  | 90,598                                 | 0   |  |   | 0                              | 90,598      |
| 48. Washington               | WA  | 104,428                                | 0   |  |   | 0                              | 104,428     |
| 49. West Virginia            | WV  | 76,382                                 | 0   |  |   | 0                              | 76,382      |
| 50. Wisconsin                | WI  | 13,235                                 | 0   |  |   | 0                              | 13,235      |
| 51. Wyoming                  | WY  | 11,781                                 | 0   |  |   | 0                              | 11,781      |
| 52. American Samoa           | AS  | 0                                      | 0   |  |   | 0                              | 0           |
| 53. Guam                     | GU  | 0                                      | 0   |  |   | 0                              | 0           |
| 54. Puerto Rico              | PR  | 0                                      | 0   |  |   | 0                              | 0           |
| 55. U.S. Virgin Islands      | VI  | 0                                      | 0   |  |   | 0                              | 0           |
| 56. Northern Mariana Islands | MP  | 0                                      | 0   |  |   | 0                              | 0           |
| 57. Canada                   | CAN | 0                                      | 0   |  |   | 0                              | 0           |
| 58. Aggregate Other Alien    | OT  | 0                                      | 0   |  |   | 0                              | 0           |
| 59. Total                    |     | 4,340,996                              | 0   | 0  | 0   | 0                              | 4,340,996   |

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

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

| 1          | 2               | 3                 | 4               | 5            | 6               | 7  | 8   | 9   | 10  | 11   | 12   | 13   | 14   | 15                                | 16              |   |  |
|------------|-----------------|-------------------|-----------------|--------------|-----------------|--|---|---|---|--|--|--|--|-----------------------------------|-----------------|---|--|
| Group Code | Group Name      | NAIC Company Code | ID Number       | Federal RSSD | CIK             | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries Or Affiliates | Domi-ciliary Loca-tion                            | Relation-ship to Reporting Entity                 | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Owner-ship Provide Percent-age | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Re-quired? (Y/N) | *               |   |  |
|            | Globe Life Inc. | 00000             | 63-0780404      |              | 0000320335      | NYSE   | Globe Life Inc.                             | DE  | UIP   | Globe Life Inc.                                | Ownership.   | 100.00                                       | Globe Life Inc.                            | N                                 |                 |   |  |
|            |                 | 00000             | 20-5817522      |              |                 |  | TMK Buildings Corp.                         | TX  | NIA   | Globe Life Inc.                                | Ownership.   | 99.00  | Globe Life Inc.                            | N                                 |                 |   |  |
|            |                 | 00000             | 20-5817632      |              |                 |  | TMK Properties LLP                          | TX  | NIA   | Globe Life Inc.                                | Ownership.   | 100.00                                       | Globe Life Inc.                            | N                                 |                 |   |  |
|            |                 | 00000             | 98-0230789      |              |                 |  | TMK Re Ltd                                  | BMU   | IA  | Globe Life Inc.                                | Ownership.   | 100.00                                       | Globe Life Inc.                            | N                                 |                 |   |  |
|            |                 | 00000             | 63-1235881      |              |                 |  | Torchmark Insurance Agency, Inc.            | AL  | NIA   | Globe Life Inc.                                | Ownership.   | 100.00                                       | Globe Life Inc.                            | N                                 |                 |   |  |
|            |                 | 0290              | Globe Life Inc. | 65331        | 63-0124600      |  | Liberty National Life Insurance Company     | NE  | IA  | Globe Life Inc.                                | Ownership.   | 100.00                                       | Globe Life Inc.                            | N                                 |                 |   |  |
|            |                 |                   |                 | 00000        | 63-0031059      |  | Brown-Service Funeral Homes Company Inc.    | AL  | NIA   | Liberty National Life Insurance Company        | Ownership.   | 100.00                                       | Globe Life Inc.                            | N                                 |                 |   |  |
|            |                 |                   |                 | 00000        | 63-0909884      |  | Liberty National Auto Club Inc.             | AL  | NIA   | Liberty National Life Insurance Company        | Ownership.   | 100.00                                       | Globe Life Inc.                            | N                                 |                 |   |  |
|            |                 |                   |                 | 0290         | Globe Life Inc. | 91472  | Globe Life And Accident Insurance Company   | NE  | UDP   | Globe Life Inc.                                | Ownership.   | 100.00                                       | Globe Life Inc.                            | N                                 |                 |   |  |
|            |                 |                   |                 |              | 00000           | 63-0782739   | 1610611                                     | Globe Life Insurance Agency, Inc.                 | TX  | NIA  | Globe Life Inc.  | Ownership.                                   | 100.00                                     | Globe Life Inc.                   | N               |   |  |
|            |                 |                   |                 |              | 00000           | 47-4172726   |   | Globe Marketing Services, Inc.                    | OK  | NIA  | Globe Life And Accident Insurance Company  | Ownership.                                   | 100.00                                     | Globe Life Inc.                   | N               |   |  |
|            |                 |                   |                 |              | 00000           | 73-1458991   |   | Specialized Advertising Group, Inc.               | TX  | NIA  | Globe Life Inc.  | Ownership.                                   | 100.00                                     | Globe Life Inc.                   | N               |   |  |
|            |                 |                   |                 |              | 00000           | 73-1209844   |   | Globe Marketing and Advertising Distributors, LLC | DE  | NIA  | Globe Life And Accident Insurance Company  | Ownership.                                   | 100.00                                     | Globe Life Inc.                   | N               |   |  |
|            |                 |                   |                 |              | 00000           | 20-8022184   |   | American Income Life Insurance Company            | IN  | IA   | Globe Life Inc.  | Ownership.                                   | 100.00                                     | Globe Life Inc.                   | N               |   |  |
|            |                 |                   |                 |              | 00000           | 60577  | 74-1365936                                  | National Income Life Insurance Company            | NY  | IA   | American Income Life Insurance Company   | Ownership.                                   | 100.00                                     | Globe Life Inc.                   | N               |   |  |
|            |                 |                   |                 |              | 0290            | Globe Life Inc.  | 10093                                       | AILIC Receivables Corporation                     | IN  | NIA  | Globe Life Inc.  | Ownership.                                   | 100.00                                     | Globe Life Inc.                   | N               |   |  |
|            |                 |                   |                 |              |                 | 00000  | 75-2852508                                  | American Income Marketing Services, Inc.          | TX  | NIA  | American Income Life Insurance Company   | Ownership.                                   | 100.00                                     | Globe Life Inc.                   | N               |   |  |
|            |                 |                   |                 |              |                 | 00000  | 75-2872627                                  | United American Insurance Company                 | NE  | IA   | Globe Life Inc.  | Ownership.                                   | 100.00                                     | Globe Life Inc.                   | N               |   |  |
|            |                 |                   |                 |              |                 | 0290   | Globe Life Inc.                             | Globe Life Insurance Company of New York          | NY  | IA   | United American Insurance Company  | Ownership.                                   | 100.00                                     | Globe Life Inc.                   | N               |   |  |
|            |                 |                   |                 |              |                 | 0290   | Globe Life Inc.                             | 92916   | Family Heritage Life Insurance Company of America | OH   | IA   | Globe Life And Accident Insurance Company    | Ownership.                                 | 100.00                            | Globe Life Inc. | N |  |
|            |                 |                   |                 |              |                 | 0290   | Globe Life Inc.                             | American Life and Health Group, Inc.              | FL  | NIA  | Globe Life Inc.  | Ownership.                                   | 100.00                                     | Globe Life Inc.                   | N               |   |  |
|            |                 |                   |                 |              |                 |  |   | AILO 1, LLC                                       | TX  | NIA  | American Income Life Insurance Company   | Ownership.                                   | 100.00                                     | Globe Life Inc.                   | N               |   |  |
|            |                 |                   |                 |              |                 |  |   | LND 01, LLC                                       | TX  | NIA  | Liberty National Life Insurance Company  | Ownership.                                   | 100.00                                     | Globe Life Inc.                   | N               |   |  |

| Asterisk | Explanation |
|----------|-------------|
|          |             |

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

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

| 1<br>NAIC<br>Company<br>Code | 2<br>ID<br>Number | 3<br>Names of Insurers and Parent,<br>Subsidiaries or Affiliates | 4<br>Shareholder<br>Dividends | 5<br>Capital<br>Contributions | 6<br>Purchases, Sales<br>or Exchanges of<br>Loans, Securities,<br>Real Estate,<br>Mortgage Loans or<br>Other Investments | 7<br>Income/<br>(Disbursements)<br>Incurred in<br>Connection with<br>Guarantees or<br>Undertakings for<br>the Benefit of any<br>Affiliate(s) | 8<br>Management<br>Agreements and<br>Service Contracts | 9<br>Income/<br>(Disbursements)<br>Incurred Under<br>Reinsurance<br>Agreements | 10<br>* | 11<br>Any Other Material<br>Activity Not in the<br>Ordinary Course of<br>the Insurer's<br>Business | 12            | 13<br>Reinsurance<br>Recoverable/<br>(Payable) on<br>Losses and/or<br>Reserve Credit<br>Taken/(Liability) |
|------------------------------|-------------------|--|-------------------------------|-------------------------------|--|--|--|--|---------|--|---------------|---|
| .00000                       | 63-0780404        | Globe Life Inc.  | 449,157,345                   | 1,713,405                     |  |  | 97,530,889   |  |         |  | 548,401,639   |   |
| 77968                        | 34-1626521        | Family Heritage Life Insurance<br>Company of America             | (32,024,000)                  | 15,000,000                    |  |  | (20,362,695)   |  |         |  | (37,386,695)  |   |
| 65331                        | 63-0124600        | Liberty National Life Insurance Company                          | (133,860,000)                 | 20,000,000                    |  |  | (74,482,663)   | 47,300,950   |         |  | (141,041,713) | (695,607,547)   |
| 91472                        | 63-0782739        | Globe Life and Accident Insurance Company                        | (38,713,848)                  | (36,713,405)                  |  |  | 27,944,819   | (43,007,402)   |         |  | (90,489,836)  | 61,123,200  |
| 92916                        | 73-1128555        | United American Insurance Company                                | 626,000                       |                               |  |  | (36,004,844)   | 53,430,123   |         |  | 18,051,279    | 663,858,581   |
| 60577                        | 74-1365936        | American Income Life Insurance Company                           | (185,326,948)                 |                               |  |  | (49,031,964)   | (100,334,200)  |         |  | (334,693,112) | 132,210,979   |
| 74101                        | 13-3156923        | Globe Life Insurance Company of New York                         | (6,000,000)                   |                               |  |  | (5,943,440)  |  |         |  | (11,943,440)  |   |
| 10093                        | 22-3711800        | National Income Life Insurance Company                           | (13,737,052)                  |                               |  |  | (9,055,065)  |  |         |  | (22,792,117)  |   |
| 00000                        | 98-0230789        | TMK Re. , LTD  | (35,000,000)                  |                               |  |  |  | 42,610,529   |         |  | 7,610,529     | (161,585,213)   |
| 00000                        | 20-5817632        | TMK Properties, LP   | (2,025,000)                   |                               |  |  | 7,262,039  |  |         |  | 5,237,039     |   |
| 00000                        | 20-5817522        | TMK Buildings Corp   | 20,250                        |                               |  |  |  |  |         |  | 20,250        |   |
| 00000                        | 73-1458991        | Globe Marketing Services, Inc                                    | (3,116,747)                   |                               |  |  |  |  |         |  | (3,116,747)   |   |
| 00000                        | 20-8022184        | Globe Marketing and Advertising<br>Distributors, LLC             |                               |                               |  |  | 62,142,924   |  |         |  | 62,142,924    |   |
| 9999999 Control Totals       |                   |  | 0                             | 0                             | 0  | 0  | 0  | 0  | XXX     | 0  | 0             | 0   |

**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

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

|  |   | Responses |
|--|---|-----------|
| <b>MARCH FILING</b>  |   |           |
| 1.   | Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?  | YES       |
| 2.   | Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?  | YES       |
| 3.   | Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?   | YES       |
| 4.   | Will an actuarial opinion be filed by March 1?  | YES       |
| <b>APRIL FILING</b>  |   |           |
| 5.   | Will Management's Discussion and Analysis be filed by April 1?  | YES       |
| 6.   | Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies)                                  | YES       |
| 7.   | Will the Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit (if required) be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies) | YES       |
| 8.   | Will the Supplemental Investment Risks Interrogatories be filed by April 1?   | YES       |
| <b>JUNE FILING</b>   |   |           |
| 9.   | Will an audited financial report be filed by June 1?  | YES       |
| 10.  | Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?  | YES       |
| <b>AUGUST FILING</b>   |   |           |
| 11.  | Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1?                   | YES       |
| <p>The following supplemental reports are required to be filed as part of your annual statement filing <u>if your company is engaged in the type of business covered by the supplement. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below.</u> If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.</p> |   |           |
| <b>MARCH FILING</b>  |   |           |
| 12.  | Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? (Not applicable to fraternal benefit societies) ...  | YES       |
| 13.  | Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?  | NO        |
| 14.  | Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?  | NO        |
| 15.  | Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?                                     | NO        |
| 16.  | Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?   | NO        |
| 17.  | Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?  | NO        |
| 18.  | Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1?   | NO        |
| 19.  | Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1?  | NO        |
| 20.  | Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?  | NO        |
| 21.  | Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?  | NO        |
| 22.  | Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1?                                      | NO        |
| 23.  | Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?                          | NO        |
| 24.  | Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?                                  | NO        |
| 25.  | Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?   | NO        |
| 26.  | Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?  | NO        |

ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America  
**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

|   |       |     |
|---|-------|-----|
| 27. Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1?   | ..... | NO  |
| 28. Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1?  | ..... | NO  |
| 29. Will the Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?   | ..... |     |
| 30. Will the Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?   | ..... |     |
| 31. Will the Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?  | ..... |     |
| 32. Will the Actuarial Certification Related to the Reserves required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?   | ..... |     |
| 33. Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1? | ..... | NO  |
| 34. Will the Worker's Compensation Carve-Out Supplement be filed by March 1? (Not applicable to fraternal benefit societies)  | ..... | NO  |
| 35. Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1?   | ..... | YES |
| 36. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?   | ..... | NO  |
| 37. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?  | ..... | NO  |
| 38. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?  | ..... | NO  |
| 39. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?  | ..... | NO  |
| 40. Will the VM-20 Reserves Supplement be filed with the state of domicile and the NAIC by March 1?   | ..... | YES |

**APRIL FILING**

|  |       |     |
|--|-------|-----|
| 41. Will the confidential Regulatory Asset Adequacy Issues Summary (RAAIS) required by the Valuation Manual be filed with the state of domicile by April 1?        | ..... | YES |
| 42. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?  | ..... | NO  |
| 43. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies)      | ..... | NO  |
| 44. Will the Accident and Health Policy Experience Exhibit be filed by April 1?  | ..... | YES |
| 45. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?                                      | ..... | NO  |
| 46. Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1? | ..... | NO  |
| 47. Will the confidential Actuarial Memorandum required by Actuarial Guideline XXXVIII 8D be filed with the state of domicile by April 30?                         | ..... | NO  |
| 48. Will the Supplemental Term and Universal Life Insurance Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1?                       | ..... | NO  |
| 49. Will the Variable Annuities Supplement be filed with the state of domicile and the NAIC by April 1?  | ..... | NO  |
| 50. Will the confidential Executive Summary of the PBR Actuarial Report be filed with the state of domicile by April 1?  | ..... | YES |
| 51. Will the confidential Life Summary of the PBR Actuarial Report be filed with the state of domicile by April 1?   | ..... | YES |
| 52. Will the confidential Variable Annuities Summary of the PBR Actuarial Report be filed with the state of domicile by April 1?                                   | ..... | NO  |

**AUGUST FILING**

|  |       |    |
|--|-------|----|
| 53. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? | ..... | NO |
| <b>Explanations:</b>   |       |    |
| 13. This supplement is not required to be filed by the Company   | ..... |    |
| 14. This supplement is not required to be filed by the Company   | ..... |    |
| 15. This supplement is not required to be filed by the Company   | ..... |    |
| 16. This supplement is not required to be filed by the Company   | ..... |    |
| 17. This supplement is not required to be filed by the Company   | ..... |    |
| 18. This supplement is not required to be filed by the Company   | ..... |    |
| 19. This supplement is not required to be filed by the Company   | ..... |    |
| 20. This supplement is not required to be filed by the Company   | ..... |    |
| 21. This supplement is not required to be filed by the Company   | ..... |    |
| 22. This supplement is not required to be filed by the Company   | ..... |    |
| 23. This supplement is not required to be filed by the Company   | ..... |    |
| 24. This supplement is not required to be filed by the Company   | ..... |    |
| 25. This supplement is not required to be filed by the Company   | ..... |    |
| 26. This supplement is not required to be filed by the Company   | ..... |    |
| 27. This supplement is not required to be filed by the Company   | ..... |    |
| 28. This supplement is not required to be filed by the Company   | ..... |    |
| 33. This supplement is not required to be filed by the Company   | ..... |    |
| 34. This supplement is not required to be filed by the Company   | ..... |    |
| 36. This supplement is not required to be filed by the Company   | ..... |    |
| 37. This supplement is not required to be filed by the Company   | ..... |    |
| 38. This supplement is not required to be filed by the Company   | ..... |    |
| 39. This supplement is not required to be filed by the Company   | ..... |    |
| 42. This supplement is not required to be filed by the Company   | ..... |    |
| 43. This supplement is not required to be filed by the Company   | ..... |    |
| 45. This supplement is not required to be filed by the Company   | ..... |    |
| 46. This supplement is not required to be filed by the Company   | ..... |    |
| 47. This supplement is not required to be filed by the Company   | ..... |    |
| 48. This supplement is not required to be filed by the Company   | ..... |    |
| 49. This supplement is not required to be filed by the Company   | ..... |    |
| 52. This supplement is not required to be filed by the Company   | ..... |    |
| 53. This supplement is not required to be filed by the Company   | ..... |    |

**Bar Codes:**

13. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]



14. Trusteed Surplus Statement [Document Identifier 490]



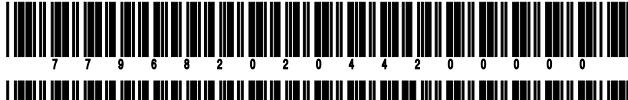
15. Participating Opinion for Exhibit 5 [Document Identifier 371]



16. Non-Guaranteed Opinion for Exhibit 5 [Document Identifier 370]



17. Actuarial Opinion on X-Factors [Document Identifier 442]

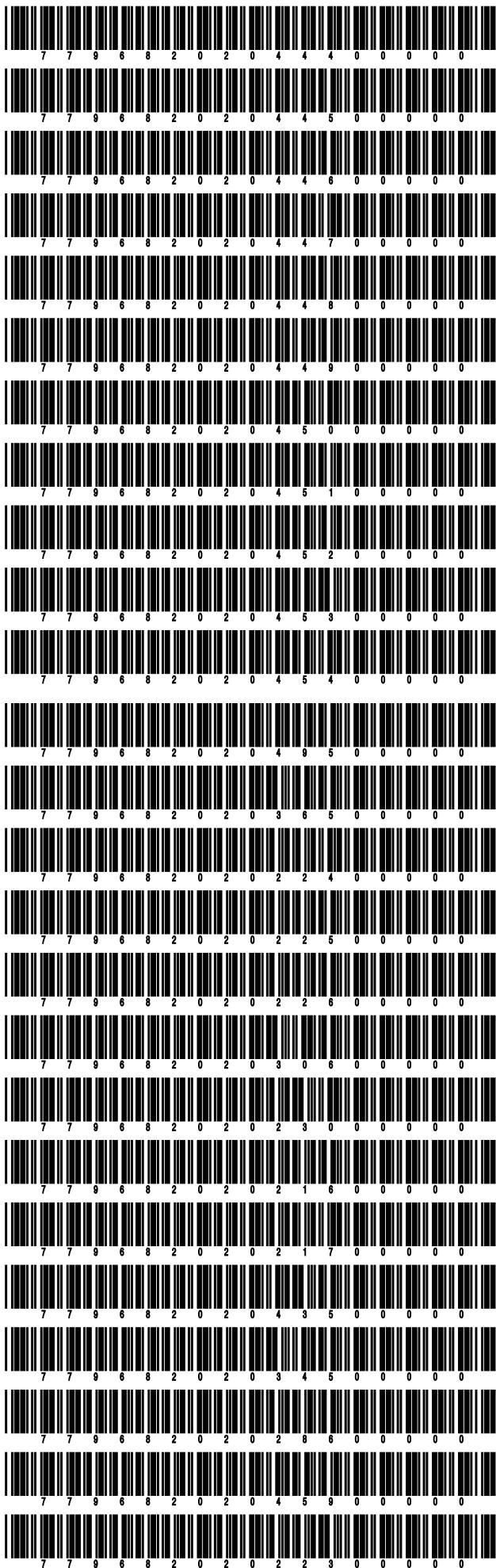


18. Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit [Document Identifier 443]



## **SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

19. Actuarial Opinion on Synthetic Guaranteed Investment Contracts [Document Identifier 444]
20. Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 445]
21. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 446]
22. Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI [Document Identifier 447]
23. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI [Document Identifier 448]
24. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) [Document Identifier 449]
25. C-3 RBC Certifications Required Under C-3 Phase I [Document Identifier 450]
  
26. C-3 RBC Certifications Required Under C-3 Phase II [Document Identifier 451]
  
27. Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities [Document Identifier 452]
28. Modified Guaranteed Annuity Model Regulation [Document Identifier 453]
  
33. Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities [Document Identifier 454]
34. Workers' Compensation Carve-Out Supplement [Document Identifier 495]
  
36. Medicare Part D Coverage Supplement [Document Identifier 365]
  
37. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]
38. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]
39. Relief from the Requirements for Audit Committees [Document Identifier 226]
  
42. Long-Term Care Experience Reporting Forms [Document Identifier 306]
  
43. Credit Insurance Experience Exhibit [Document Identifier 230]
  
45. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]
  
46. Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217]
47. Actuarial Memorandum Required by Actuarial Guideline XXXVIII 8D [Document Identifier 435]
48. Supplemental Term and Universal Life Insurance Reinsurance Exhibit [Document Identifier 345]
49. Variable Annuities Supplement [Document Identifier 286]
  
52. Variable Annuities Summary of the PBR Actuarial Report [Document Identifier 459]
53. Management's Report of Internal Control Over Financial Reporting [Document Identifier 223]



ANNUAL STATEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America  
**OVERFLOW PAGE FOR WRITE-INS**

Additional Write-ins for Exhibit 2 Line 9.3

|   | Insurance |                       |                |                                     | 5<br>Investment | 6<br>Fraternal | 7<br>Total |  |  |  |
|---|-----------|-----------------------|----------------|-------------------------------------|-----------------|----------------|------------|--|--|--|
|   | 1<br>Life | Accident and Health   |                | 4<br>All Other Lines of<br>Business |                 |                |            |  |  |  |
|   |           | 2<br>Cost Containment | 3<br>All Other |                                     |                 |                |            |  |  |  |
| 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<br>from overflow page | 0         | 0                     | 451,096        | 0                                   | 0               | 0              | 451,096    |  |  |  |



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

## VM-20 RESERVES SUPPLEMENT – PART 1A

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

For The Year Ended December 31, 2020

(To Be Filed by March 1)

| NAIC Group Code             | 0290   | NAIC Company Code 77968 |                                |        |
|-----------------------------|--|-------------------------|--------------------------------|--------|
|                             |  | Prior Year              | Current Year                   |        |
|                             | 1  | 2                       | 3                              |        |
|                             | Reported Reserve   | Reported Reserve        | Due and Deferred Premium Asset |        |
| 1.                          | Post-Reinsurance-Ceded Reserve                                       |                         |                                |        |
| 1.1.                        | Term Life Insurance.....   | 0                       | 109                            | 79     |
| 1.2.                        | Universal Life With Secondary Guarantee .....                        | 0                       |                                |        |
| 1.3.                        | Non-Participating Whole Life .....                                   | 5,000                   | 219,247                        | 13,962 |
| 1.4.                        | Participating Whole Life .....                                       | 0                       |                                |        |
| 1.5.                        | Universal Life Without Secondary Guarantee .....                     | 0                       |                                |        |
| 1.6.                        | Variable Universal Life Without Secondary Guarantee .....            | 0                       |                                |        |
| 1.7.                        | Variable Life Without Secondary Guarantee .....                      | 0                       |                                |        |
| 1.8.                        | Indexed Life Without Secondary Guarantee .....                       | 0                       |                                |        |
| 1.9.                        | Aggregate Write-Ins for Other Products .....                         | 0                       | 0                              | 0      |
| 2.                          | Total Post-Reinsurance-Ceded Reserve (Sum of Lines 1.1 through 1.9)  | 5,000                   | 219,356                        | XXX    |
| 3.                          | Pre-Reinsurance-Ceded Reserve  |                         |                                |        |
| 3.1.                        | Term Life Insurance.....   | 0                       | 109                            | 79     |
| 3.2.                        | Universal Life With Secondary Guarantee .....                        | 0                       |                                |        |
| 3.3.                        | Non-Participating Whole Life .....                                   | 5,000                   | 219,247                        | 13,962 |
| 3.4.                        | Participating Whole Life .....                                       | 0                       |                                |        |
| 3.5.                        | Universal Life Without Secondary Guarantee .....                     | 0                       |                                |        |
| 3.6.                        | Variable Universal Life Without Secondary Guarantee .....            | 0                       |                                |        |
| 3.7.                        | Variable Life Without Secondary Guarantee .....                      | 0                       |                                |        |
| 3.8.                        | Indexed Life Without Secondary Guarantee .....                       | 0                       |                                |        |
| 3.9.                        | Aggregate Write-Ins for Other Products .....                         | 0                       | 0                              | 0      |
| 4.                          | Total Pre-Reinsurance-Ceded Reserve (Sum of Lines 3.1 through 3.9)   | 5,000                   | 219,356                        | XXX    |
| 5.                          | Total Reserves Ceded (Line 4 minus Line 2)                           | 0                       | 0                              | XXX    |
| <b>DETAILS OF WRITE-INS</b> |  |                         |                                |        |
| 1.901.                      | .....  |                         |                                |        |
| 1.902.                      | .....  |                         |                                |        |
| 1.903.                      | .....  |                         |                                |        |
| 1.998.                      | Summary of remaining write-ins for Line 1.9 from overflow page ..... | 0                       | 0                              | 0      |
| 1.999.                      | Totals (Lines 1.901 thru 1.903 plus 1.998) (Line 1.9 above)          | 0                       | 0                              | 0      |
| 3.901.                      | .....  |                         |                                |        |
| 3.902.                      | .....  |                         |                                |        |
| 3.903.                      | .....  |                         |                                |        |
| 3.998.                      | Summary of remaining write-ins for Line 3.9 from overflow page ..... | 0                       | 0                              | 0      |
| 3.999.                      | Totals (Lines 3.901 thru 3.903 plus 3.998) (Line 3.9 above)          | 0                       | 0                              | 0      |

## SUPPLEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America

## VM-20 RESERVES SUPPLEMENT – PART 1B

Life Insurance Reserves Valued According to VM-20 by Product Type  
 For The Year Ended December 31, 2020  
 (To Be Filed by March 1)  
 (\$000 Omitted for Face Amounts)

|   | Current Year                |                               |                            |                            |                  |                             |                               |                            |                  |                              |                             |                   |
|---|-----------------------------|-------------------------------|----------------------------|----------------------------|------------------|-----------------------------|-------------------------------|----------------------------|------------------|------------------------------|-----------------------------|-------------------|
|   | SECTION A                   |                               |                            |                            |                  | SECTION B                   |                               |                            |                  | SECTION C                    |                             |                   |
|   | 1<br>Net Premium<br>Reserve | 2<br>Deterministic<br>Reserve | 3<br>Stochastic<br>Reserve | 4<br>Number of<br>Policies | 5<br>Face Amount | 6<br>Net Premium<br>Reserve | 7<br>Deterministic<br>Reserve | 8<br>Number of<br>Policies | 9<br>Face Amount | 10<br>Net Premium<br>Reserve | 11<br>Number of<br>Policies | 12<br>Face Amount |
| 1. Post-Reinsurance-Ceded Reserve   |                             |                               |                            |                            |                  |                             |                               |                            |                  |                              |                             |                   |
| 1.1. Term Life Insurance .....  | 109                         | (21,033)                      |                            | XXX                        | XXX              |                             |                               | XXX                        | XXX              | XXX                          | XXX                         | XXX               |
| 1.2. Universal Life With Secondary Guarantee .....                        |                             |                               |                            | XXX                        | XXX              |                             |                               | XXX                        | XXX              |                              | XXX                         | XXX               |
| 1.3. Non-Participating Whole Life .....                                   | 219,247                     | (999,886)                     |                            | XXX                        | XXX              |                             |                               | XXX                        | XXX              |                              | XXX                         | XXX               |
| 1.4. Participating Whole Life .....                                       |                             |                               |                            | XXX                        | XXX              |                             |                               | XXX                        | XXX              |                              | XXX                         | XXX               |
| 1.5. Universal Life Without Secondary Guarantee .....                     |                             |                               |                            | XXX                        | XXX              |                             |                               | XXX                        | XXX              |                              | XXX                         | XXX               |
| 1.6. Variable Universal Life Without Secondary<br>Guarantee .....         |                             |                               |                            | XXX                        | XXX              |                             |                               | XXX                        | XXX              |                              | XXX                         | XXX               |
| 1.7. Variable Life Without Secondary Guarantee .....                      |                             |                               |                            | XXX                        | XXX              |                             |                               | XXX                        | XXX              |                              | XXX                         | XXX               |
| 1.8. Indexed Life Without Secondary Guarantee .....                       |                             |                               |                            | XXX                        | XXX              |                             |                               | XXX                        | XXX              |                              | XXX                         | XXX               |
| 1.9. Aggregate Write-Ins for Other Products                               | 0                           | 0                             | 0                          | XXX                        | XXX              | 0                           | 0                             | XXX                        | XXX              | 0                            | XXX                         | XXX               |
| 2. Total Post-Reinsurance-Ceded Reserve (Sum of Lines<br>1.1 through 1.9) | XXX                         | XXX                           | XXX                        | XXX                        | XXX              | XXX                         | XXX                           | XXX                        | XXX              | XXX                          | XXX                         | XXX               |
| 3. Pre-Reinsurance-Ceded Reserve  |                             |                               |                            |                            |                  |                             |                               |                            |                  |                              |                             |                   |
| 3.1. Term Life Insurance .....  | 109                         | (21,033)                      |                            |                            | 4,500            |                             |                               |                            |                  | XXX                          |                             |                   |
| 3.2. Universal Life With Secondary Guarantee .....                        |                             |                               |                            |                            |                  |                             |                               |                            |                  |                              |                             |                   |
| 3.3. Non-Participating Whole Life .....                                   | 219,247                     | (999,886)                     |                            | 4,569                      | 127,541          |                             |                               |                            |                  |                              |                             |                   |
| 3.4. Participating Whole Life .....                                       |                             |                               |                            |                            |                  |                             |                               |                            |                  |                              |                             |                   |
| 3.5. Universal Life Without Secondary Guarantee .....                     |                             |                               |                            |                            |                  |                             |                               |                            |                  |                              |                             |                   |
| 3.6. Variable Universal Life Without Secondary<br>Guarantee .....         |                             |                               |                            |                            |                  |                             |                               |                            |                  |                              |                             |                   |
| 3.7. Variable Life Without Secondary Guarantee .....                      |                             |                               |                            |                            |                  |                             |                               |                            |                  |                              |                             |                   |
| 3.8. Indexed Life Without Secondary Guarantee .....                       |                             |                               |                            |                            |                  |                             |                               |                            |                  |                              |                             |                   |
| 3.9. Aggregate Write-Ins for Other Products                               | 0                           | 0                             | 0                          | 0                          | 0                | 0                           | 0                             | 0                          | 0                | 0                            | 0                           | 0                 |
| 4. Total Pre-Reinsurance-Ceded Reserve (Sum of Lines<br>3.1 through 3.9)  | XXX                         | XXX                           | XXX                        | XXX                        | XXX              | XXX                         | XXX                           | XXX                        | XXX              | XXX                          | XXX                         | XXX               |
| 5. Total Reserves Ceded (Line 4 minus Line 2)                             | XXX                         | XXX                           | XXX                        | XXX                        | XXX              | XXX                         | XXX                           | XXX                        | XXX              | XXX                          | XXX                         | XXX               |
| <b>DETAILS OF WRITE-INS</b>   |                             |                               |                            |                            |                  |                             |                               |                            |                  |                              |                             |                   |
| 1.901.  |                             |                               |                            | XXX                        | XXX              |                             |                               | XXX                        | XXX              |                              | XXX                         | XXX               |
| 1.902.  |                             |                               |                            | XXX                        | XXX              |                             |                               | XXX                        | XXX              |                              | XXX                         | XXX               |
| 1.903.  |                             |                               |                            | XXX                        | XXX              |                             |                               | XXX                        | XXX              |                              | XXX                         | XXX               |
| 1.998. Summary of remaining write-ins for Line 1.9 from<br>overflow page  | 0                           | 0                             | 0                          | XXX                        | XXX              | 0                           | 0                             | XXX                        | XXX              | 0                            | XXX                         | XXX               |
| 1.999. Totals (Lines 1.901 thru 1.903 plus 1.998) (Line 1.9<br>above)     | 0                           | 0                             | 0                          | XXX                        | XXX              | 0                           | 0                             | XXX                        | XXX              | 0                            | XXX                         | XXX               |
| 3.901.  |                             |                               |                            |                            |                  |                             |                               |                            |                  |                              |                             |                   |
| 3.902.  |                             |                               |                            |                            |                  |                             |                               |                            |                  |                              |                             |                   |
| 3.903.  |                             |                               |                            |                            |                  |                             |                               |                            |                  |                              |                             |                   |
| 3.998. Summary of remaining write-ins for Line 3.9 from<br>overflow page  | 0                           | 0                             | 0                          | 0                          | 0                | 0                           | 0                             | 0                          | 0                | 0                            | 0                           | 0                 |
| 3.999. Totals (Lines 3.901 thru 3.903 plus 3.998) (Line 3.9<br>above)     | 0                           | 0                             | 0                          | 0                          | 0                | 0                           | 0                             | 0                          | 0                | 0                            | 0                           | 0                 |

**VM-20 RESERVES SUPPLEMENT – PART 2**

Life PBR Exemption  
 For The Year Ended December 31, 2020  
 (To Be Filed by March 1)

**Life PBR Exemption as defined in the NAIC adopted Valuation Manual (VM)**

1. Has the company filed and been granted a Life PBR Exemption from the reserve requirements of VM-20 of the Valuation Manual by their state of domicile? ..... Yes [ ] No [ X ]
2. If the response to Question 1 is "Yes", then check the source of the granted "Life PBR Exemption" definition? (Check either 2.1, 2.2 or 2.3)
  - 2.1 NAIC Adopted VM [ ]
  - 2.2 State Statute (SVL) [ ] Complete items "a" and "b" as appropriate.
    - a. Is the criteria in the State Statute (SVL) different from the NAIC adopted VM? ..... Yes [ ] No [ ]
    - b. If the answer to "a" above is "Yes", provide the criteria the state has used to grant the Life PBR Exemption (e.g., Group/Legal Entity criteria) and the minimum reserve requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS NAIC VM):
 .....  
 .....  
 .....  
 .....  
 .....
  - 2.3 State Regulation [ ] Complete items "a" and "b" as appropriate.
    - a. Is the criteria in the State Regulation different from the NAIC adopted VM? ..... Yes [ ] No [ ]
    - b. If the answer to "a" above is "Yes", provide the criteria the state has used to grant the Life PBR Exemption (e.g., Group/Legal Entity criteria) and the minimum reserve requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS NAIC VM):
 .....  
 .....  
 .....  
 .....  
 .....

**VM-20 RESERVES SUPPLEMENT – PART 3**

Other Exclusions from Life PBR  
 For The Year Ended December 31, 2020  
 (To Be Filed by March 1)

- 1A. Has the company filed and been granted a Single State Exemption from the reserve requirements of VM-20 of the Valuation Manual by their state of domicile? ..... Yes [ ] No [ X ]
- 1B. If the answer to question 1A is "Yes" please discuss any business not covered under the Single State Exemption.
 .....  
 .....
- 2A. If the answer to question 1A is "Yes", does the company have risks for policies issued outside its state of domicile? ..... Yes [ ] No [ ]
- 2B. If the answer to question 2A is "Yes" please discuss the risks for policies issued outside the state of domicile, how those risks came to be a responsibility of the company, and why the company would still be considered a Single State Company with such risks.
 .....  
 .....
3. Is all of the company's individual ordinary life insurance business excluded from the requirements of VM-20 pursuant to Section II.B of the Valuation Manual? ..... Yes [ ] No [ X ]



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

## SCHEDULE O SUPPLEMENT

For The Year Ended December 31, 2020  
(To Be Filed by March 1)

Of The Family Heritage Life Insurance Company of America  
ADDRESS (City, State and Zip Code) Cleveland, OH 44147-3529  
NAIC Group Code 0290 NAIC Company Code 77968 Employer's Identification Number (FEIN) 34-1626521

### SUPPLEMENTAL SCHEDULE O - PART 1

#### Development of Incurred Losses (\$000 Omitted)

##### Section A - Group Accident and Health

| Years in Which Losses Were Incurred | Cumulative Net Amounts Paid Policyholders |           |           |           |              |
|-------------------------------------|---|-----------|-----------|-----------|--------------|
|                                     | 1<br>2016                                 | 2<br>2017 | 3<br>2018 | 4<br>2019 | 5<br>2020(a) |
| 1. Prior                            | 329                                       | 26        | 23        | 11        | 6            |
| 2. 2016                             | 753                                       | 362       | 53        | 27        | 13           |
| 3. 2017                             | XXX                                       | 697       | 297       | 24        | 13           |
| 4. 2018                             | XXX                                       | XXX       | 804       | 373       | 31           |
| 5. 2019                             | XXX                                       | XXX       | XXX       | 1,117     | 526          |
| 6. 2020                             | XXX                                       | XXX       | XXX       | XXX       | 919          |

##### Section B - Other Accident and Health

|          |        |        |        |        |        |
|----------|--------|--------|--------|--------|--------|
| 1. Prior | 13,509 | 2,352  | 1,171  | 744    | 495    |
| 2. 2016  | 43,397 | 12,630 | 1,266  | 610    | 230    |
| 3. 2017  | XXX    | 51,382 | 13,772 | 1,277  | 551    |
| 4. 2018  | XXX    | XXX    | 63,101 | 16,984 | 1,350  |
| 5. 2019  | XXX    | XXX    | XXX    | 78,990 | 16,339 |
| 6. 2020  | XXX    | XXX    | XXX    | XXX    | 82,283 |

##### Section C - Credit Accident and Health

|          |     |    |     |     |  |
|----------|-----|----|-----|-----|--|
| 1. Prior |     |    |     |     |  |
| 2. 2016  |     |    |     |     |  |
| 3. 2017  | XXX |    |     |     |  |
| 4. 2018  | XX  |    |     |     |  |
| 5. 2019  | XX  | XX | XXX |     |  |
| 6. 2020  | XXX | XX | XXX | XXX |  |

##### Section D -

|          |     |    |     |     |  |
|----------|-----|----|-----|-----|--|
| 1. Prior |     |    |     |     |  |
| 2. 2016  |     |    |     |     |  |
| 3. 2017  | XXX |    |     |     |  |
| 4. 2018  | XX  | X  |     |     |  |
| 5. 2019  | XX  | XX | XXX |     |  |
| 6. 2020  | XXX | XX | XXX | XXX |  |

##### Section E -

|          |     |    |     |     |  |
|----------|-----|----|-----|-----|--|
| 1. Prior |     |    |     |     |  |
| 2. 2016  |     |    |     |     |  |
| 3. 2017  | XXX |    |     |     |  |
| 4. 2018  | XX  | X  |     |     |  |
| 5. 2019  | XX  | XX | XXX |     |  |
| 6. 2020  | XXX | XX | XXX | XXX |  |

##### Section F -

|          |     |    |     |     |  |
|----------|-----|----|-----|-----|--|
| 1. Prior |     |    |     |     |  |
| 2. 2016  |     |    |     |     |  |
| 3. 2017  | XXX |    |     |     |  |
| 4. 2018  | XX  | X  |     |     |  |
| 5. 2019  | XX  | XX | XXX |     |  |
| 6. 2020  | XXX | XX | XXX | XXX |  |

##### Section G -

|          |     |    |     |     |  |
|----------|-----|----|-----|-----|--|
| 1. Prior |     |    |     |     |  |
| 2. 2016  |     |    |     |     |  |
| 3. 2017  | XXX |    |     |     |  |
| 4. 2018  | XX  | X  |     |     |  |
| 5. 2019  | XX  | XX | XXX |     |  |
| 6. 2020  | XXX | XX | XXX | XXX |  |

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

Supplement Schedule O - Part 2 Section A

**N O N E**

Supplement Schedule O - Part 2 Section B

**N O N E**

Supplement Schedule O - Part 2 Section C

**N O N E**

Supplement Schedule O - Part 2 Section D

**N O N E**

Supplement Schedule O - Part 2 Section E

**N O N E**

Supplement Schedule O - Part 2 Section F

**N O N E**

Supplement Schedule O - Part 2 Section G

**N O N E**

SUPPLEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America  
**SCHEDULE O SUPPLEMENT**

**SUPPLEMENTAL SCHEDULE O - PART 3**

Development of Incurred Losses

(\$000 Omitted)

**Section A - Group Accident and Health**

| Years in Which Losses Were Incurred | Sum of Net Cumulative Amount Paid Policyholders and Claim Liability and Reserve Outstanding at End of Year |           |           |           |           |
|-------------------------------------|--|-----------|-----------|-----------|-----------|
|                                     | 1<br>2016  | 2<br>2017 | 3<br>2018 | 4<br>2019 | 5<br>2020 |
| 1. 2016 .....                       | 1,490  | 1,202     | 1,226     | XXX       | XXX       |
| 2. 2017 .....                       | XXX  | 1,771     | 1,089     | 1,068     | XXX       |
| 3. 2018 .....                       | XXX  | XXX       | 2,011     | 1,285     | 1,263     |
| 4. 2019 .....                       | XXX  | XXX       | XXX       | 2,202     | 1,785     |
| 5. 2020                             | XXX  | XXX       | XXX       | XXX       | 2,264     |

**Section B - Other Accident and Health**

|               |        |        |        |         |         |
|---------------|--------|--------|--------|---------|---------|
| 1. 2016 ..... | 60,874 | 58,220 | 58,521 | XXX     | XXX     |
| 2. 2017 ..... | XXX    | 71,251 | 67,678 | 67,753  | XXX     |
| 3. 2018 ..... | XXX    | XXX    | 85,373 | 82,893  | 82,711  |
| 4. 2019 ..... | XXX    | XXX    | XXX    | 101,191 | 97,844  |
| 5. 2020       | XXX    | XXX    | XXX    | XXX     | 105,559 |

**Section C - Credit Accident and Health**

|               |     |     |     |     |     |
|---------------|-----|-----|-----|-----|-----|
| 1. 2016 ..... | XXX | XXX | XXX | XXX | XXX |
| 2. 2017 ..... | XXX | XXX | XXX | XXX | XXX |
| 3. 2018 ..... | XXX | XXX | XXX | XXX | XXX |
| 4. 2019 ..... | XXX | XXX | XXX | XXX | XXX |
| 5. 2020       | XXX | XXX | XXX | XXX | XXX |

**Section D -**

|               |     |     |     |     |     |
|---------------|-----|-----|-----|-----|-----|
| 1. 2016 ..... | XXX | XXX | XXX | XXX | XXX |
| 2. 2017 ..... | XXX | XXX | XXX | XXX | XXX |
| 3. 2018 ..... | XXX | XXX | XXX | XXX | XXX |
| 4. 2019 ..... | XXX | XXX | XXX | XXX | XXX |
| 5. 2020       | XXX | XXX | XXX | XXX | XXX |

**Section E -**

|               |     |     |     |     |     |
|---------------|-----|-----|-----|-----|-----|
| 1. 2016 ..... | XXX | XXX | XXX | XXX | XXX |
| 2. 2017 ..... | XXX | XXX | XXX | XXX | XXX |
| 3. 2018 ..... | XXX | XXX | XXX | XXX | XXX |
| 4. 2019 ..... | XXX | XXX | XXX | XXX | XXX |
| 5. 2020       | XXX | XXX | XXX | XXX | XXX |

**Section F -**

|               |     |     |     |     |     |
|---------------|-----|-----|-----|-----|-----|
| 1. 2016 ..... | XXX | XXX | XXX | XXX | XXX |
| 2. 2017 ..... | XXX | XXX | XXX | XXX | XXX |
| 3. 2018 ..... | XXX | XXX | XXX | XXX | XXX |
| 4. 2019 ..... | XXX | XXX | XXX | XXX | XXX |
| 5. 2020       | XXX | XXX | XXX | XXX | XXX |

**Section G -**

|               |     |     |     |     |     |
|---------------|-----|-----|-----|-----|-----|
| 1. 2016 ..... | XXX | XXX | XXX | XXX | XXX |
| 2. 2017 ..... | XXX | XXX | XXX | XXX | XXX |
| 3. 2018 ..... | XXX | XXX | XXX | XXX | XXX |
| 4. 2019 ..... | XXX | XXX | XXX | XXX | XXX |
| 5. 2020       | XXX | XXX | XXX | XXX | XXX |

SUPPLEMENT FOR THE YEAR 2020 OF THE Family Heritage Life Insurance Company of America  
**SCHEDULE O SUPPLEMENT**

**SUPPLEMENTAL SCHEDULE O - PART 4**

Development of Incurred Losses  
 (\$000 Omitted)

**Section A - Group Accident and Health**

| Years in Which Losses<br>Were Incurred | Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment<br>Liability and Reserve Outstanding at End of Year |           |           |           |           |
|--|--|-----------|-----------|-----------|-----------|
|  | 1<br>2016  | 2<br>2017 | 3<br>2018 | 4<br>2019 | 5<br>2020 |
| 1. 2016 .....                          |  |           |           |           |           |
| 2. 2017 .....                          | XXX  |           |           |           |           |
| 3. 2018 .....                          | XXX  | XX        |           |           |           |
| 4. 2019 .....                          | XXX  | XXX       | XXX       |           |           |
| 5. 2020 .....                          | XXX  | XXX       | XXX       | XXX       |           |

**Section B - Other Accident and Health**

|               |     |    |     |     |  |
|---------------|-----|----|-----|-----|--|
| 1. 2016 ..... |     |    |     |     |  |
| 2. 2017 ..... | XXX |    |     |     |  |
| 3. 2018 ..... | XXX |    |     |     |  |
| 4. 2019 ..... | XX  | XX | XX  |     |  |
| 5. 2020 ..... | XX  | XX | XXX | XXX |  |

**Section C - Credit Accident and Health**

|               |     |    |     |     |  |
|---------------|-----|----|-----|-----|--|
| 1. 2016 ..... |     |    |     |     |  |
| 2. 2017 ..... | XXX |    |     |     |  |
| 3. 2018 ..... | XXX |    |     |     |  |
| 4. 2019 ..... | XX  | XX | XX  |     |  |
| 5. 2020 ..... | XX  | XX | XXX | XXX |  |

**Section D -**

|               |     |    |     |     |  |
|---------------|-----|----|-----|-----|--|
| 1. 2016 ..... |     |    |     |     |  |
| 2. 2017 ..... | XXX |    |     |     |  |
| 3. 2018 ..... | XXX |    |     |     |  |
| 4. 2019 ..... | XX  | XX | XX  |     |  |
| 5. 2020 ..... | XX  | XX | XXX | XXX |  |

**Section E -**

|               |     |    |     |     |  |
|---------------|-----|----|-----|-----|--|
| 1. 2016 ..... |     |    |     |     |  |
| 2. 2017 ..... | XXX |    |     |     |  |
| 3. 2018 ..... | XXX |    |     |     |  |
| 4. 2019 ..... | XX  | XX | XX  |     |  |
| 5. 2020 ..... | XX  | XX | XXX | XXX |  |

**Section F -**

|               |     |    |     |     |  |
|---------------|-----|----|-----|-----|--|
| 1. 2016 ..... |     |    |     |     |  |
| 2. 2017 ..... | XXX |    |     |     |  |
| 3. 2018 ..... | XXX |    |     |     |  |
| 4. 2019 ..... | XX  | XX | XX  |     |  |
| 5. 2020 ..... | XX  | XX | XXX | XXX |  |

**Section G -**

|               |     |    |     |     |  |
|---------------|-----|----|-----|-----|--|
| 1. 2016 ..... |     |    |     |     |  |
| 2. 2017 ..... | XXX |    |     |     |  |
| 3. 2018 ..... | XXX |    |     |     |  |
| 4. 2019 ..... | XX  | XX | XX  |     |  |
| 5. 2020 ..... | XX  | XX | XXX | XXX |  |

**SUPPLEMENTAL SCHEDULE O - PART 5**

(\$000 OMITTED)

Reserve and Liability Methodology - Exhibits 6 and 8

| Line of Business                    | 1<br>Methodology  | 2<br>Amount |
|-------------------------------------|-------------------|-------------|
| 1. Industrial Life .....            | Development ..... | 1,648       |
| 2. Ordinary Life .....              |                   |             |
| 3. Individual Annuity .....         |                   |             |
| 4. Supplementary Contracts .....    |                   |             |
| 5. Credit Life .....                |                   |             |
| 6. Group Life .....                 |                   |             |
| 7. Group Annuities .....            |                   |             |
| 8. Group Accident and Health .....  | Development ..... | 1,588       |
| 9. Credit Accident and Health ..... |                   |             |
| 10. Other Accident and Health ..... | Development ..... | 28,073      |
| 11. Total .....                     |                   | 31,309      |