

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

QUARTERLY STATEMENT

AS OF JUNE 30, 2021
OF THE CONDITION AND AFFAIRS OF THE

Loyal American Life Insurance Company

NAIC Group Code	0901 (Current)	0901 (Prior)	NAIC Company Code	65722	Employer's ID Number	63-0343428
Organized under the Laws of	Ohio		State of Domicile or Port of Entry	OH		
Country of Domicile	United States of America					
Licensed as business type:	Life, Accident and Health [X] Fraternal Benefit Societies []					
Incorporated/Organized	05/18/1955		Commenced Business	07/04/1955		
Statutory Home Office	1300 East Ninth Street (Street and Number)		Cleveland, OH, US 44114 (City or Town, State, Country and Zip Code)			
Main Administrative Office	11200 Lakeline Blvd., Suite 100 (Street and Number)		Austin, TX, US 78717 512-451-2224 (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)			
Mail Address	11200 Lakeline Blvd., Suite 100 (Street and Number or P.O. Box)		Austin, TX, US 78717 512-451-2224 (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)			
Primary Location of Books and Records	11200 Lakeline Blvd., Suite 100 (Street and Number)		Austin, TX, US 78717 512-451-2224 (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)			
Internet Website Address	www.CignaSupplementalBenefits.com					
Statutory Statement Contact	Renee Wilkins Feldman (Name)		512-531-1465 (Area Code) (Telephone Number)			
	CSBFInRpt@cigna.com (E-mail Address)		512-467-1399 (FAX Number)			

OFFICERS

President	Stephen Burnett Jones	Secretary	Jill Mary Stadelman
Treasurer and Chief Accounting Officer	Byron Keith Buescher	Vice President and Chief Actuary	David Leroy Swanson #

OTHER

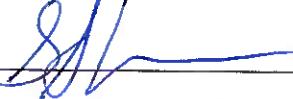
Tyler Michael Lester, Executive Vice President and Chief Financial Officer	David Lawrence Chambers, Vice President-Sales and Marketing	Mark Fleming, Vice President and Assistant Treasurer
Mohammed Umar Gilani, Appointed Actuary	Joanne Ruth Hart, Vice President and Assistant Treasurer	Scott Ronald Lambert, Vice President and Assistant Treasurer
Kathleen Murphy O'Neil, Vice President	Drew Jerome Reynolds, Vice President and Assistant Treasurer	

DIRECTORS OR TRUSTEES

Stephen Burnett Jones	Tyler Michael Lester	Frank Sataline Jr.
James Yablecki		

State of Texas
County of Williamson SS:

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


Stephen Burnett Jones
President


Byron Keith Buescher
Treasurer and Chief Accounting Officer


Jill Mary Stadelman
Secretary

Subscribed and sworn to before me this

12th day of August 2021



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

Yes [x] No []

