



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

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2021
OF THE CONDITION AND AFFAIRS OF THE

Western-Southern Life Assurance Company

NAIC Group Code 0836 0836 NAIC Company Code 92622 Employer's ID Number 31-1000236
(Current) (Prior)

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 12/01/1980 Commenced Business 03/05/1981

Statutory Home Office 400 Broadway, Cincinnati, OH, US 45202
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 400 Broadway
(Street and Number)
Cincinnati, OH, US 45202 513-629-1800
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 400 Broadway, Cincinnati, OH, US 45202
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 400 Broadway
(Street and Number)
Cincinnati, OH, US 45202 513-629-1800
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address WWW.WesternSouthernLife.com

Statutory Statement Contact Wade Matthew Fugate, 513-629-1402
(Name) (Area Code) (Telephone Number)
CompAcctGrp@WesternSouthernLife.com, 513-629-1871
(E-mail Address) (FAX Number)

OFFICERS

Chairman of Board,
President & CEO John Finn Barrett
Secretary and Counsel Donald Joseph Wuebbling

OTHER

<u>Matthew Reid Abernethy #, VP</u>	<u>James Howard Acton Jr., VP</u>	<u>Gregory Scott Allhands, VP</u>
<u>Edward Joseph Babbitt, VP, Sr Counsel</u>	<u>Troy Dale Brodie, Sr VP, Chief Marketing Officer</u>	<u>Christopher Steven Brown, VP</u>
<u>Peter James Brown, VP</u>	<u>John Henry Bultema III, Sr VP</u>	<u>Keith Terrill Clark, MD, VP, Medical Director</u>
<u>Robert John DalSanto, VP</u>	<u>Michael Russ DeHart, VP</u>	<u>James Joseph DeLuca, VP</u>
<u>Brian Richard Doran, VP</u>	<u>Lisa Beth Fangman, Sr VP</u>	<u>James Jeffrey Fitzgerald #, Sr VP, Chf Information Off</u>
<u>Wade Matthew Fugate, VP, Controller</u>	<u>David Todd Henderson, Sr VP, Chf Acty, Risk, Data Off</u>	<u>Christopher Xavier Hill, VP</u>
<u>Valerie Ann Holmes, VP</u>	<u>Kevin Louis Howard, VP, Deputy Gen Counsel</u>	<u>Bradley Joseph Hunkler, Sr VP, Chief Financial Officer</u>
<u>Stephen Gale Hussey Jr., Sr VP</u>	<u>Mark Daniel Hutchinson #, VP</u>	<u>Jay Vincent Johnson, VP, Treasurer</u>
<u>Phillip Earl King, Sr VP, Auditor</u>	<u>Linda Marie Lake, Sr VP</u>	<u>Todd Anthony Lee, VP</u>
<u>Matthew William Loveless, VP</u>	<u>Joseph Hanlon Lynch Jr., VP</u>	<u>Bruce William Maisel, VP, CCO</u>
<u>Jill Tripp McGruder, Sr VP, Chief Marketing Officer</u>	<u>Jeffrey David Meek, VP</u>	<u>Edward Blake Moore Jr., Sr VP</u>
<u>Paul Brian Moore #, Sr VP, Chief Customer Officer</u>	<u>David Edward Nevers, VP</u>	<u>Jonathan David Niemeyer, Sr VP, CAO, & Gen Counsel</u>
<u>Maribeth Semba Rahe #, Sr VP</u>	<u>Michelle Ison Rice, VP</u>	<u>Ryan Keith Richey #, VP</u>
<u>Paul Charles Silva, VP</u>	<u>Rodrick Landon Snyder, VP</u>	<u>Denise Lynn Sparks, VP</u>
<u>Michael Shane Speas, VP, Chief Info Security Officer</u>	<u>Jeffrey Laurence Stainton, VP, Assoc Gen Counsel</u>	<u>Thomas Roy Stanek, VP, Assistant Treasurer</u>
<u>Jacob Cole Steuber #, VP</u>	<u>Charles Lawrence Thomas, VP</u>	<u>James Joseph Vance, Sr VP, Co-Chief Inv Officer</u>
<u>Brendan Matthew White, Sr VP, Co-Chief Inv Officer</u>	<u>Terrie Ann Wiedenheft, VP</u>	<u>Aaron Jason Wolf, VP, Chief Underwriter</u>

DIRECTORS OR TRUSTEES

<u>John Finn Barrett</u>	<u>James Norman Clark</u>	<u>Phillip Ralph Cox</u>
<u>Jo Ann Davidson</u>	<u>James Columbus Hale #</u>	<u>Robert Lloyd Lawrence</u>
<u>James Kirby Risk III</u>	<u>Robert Blair Truitt</u>	<u>Thomas Luke Williams</u>
<u>John Peter Zanotti</u>		

State of Ohio SS
County of Hamilton

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.

John Finn Barrett
Chairman of Board, President & CEO

Donald Joseph Wuebbli
Secretary and Counsel

Wade Matthew Fugate
VP and Controller

Subscribed and sworn to before me this
11th day of February, 2022

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Alabama

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: Ordinary, Credit Life (Group and Individual), Group, Industrial, Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: Ordinary (No. of Pols. & Certifs., Amount), Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), Group (No. of Certifs., Amount), Industrial (No. of Pols. & Certifs., Amount), Total (No. of Pols. & Certifs., Amount). Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: Direct Premiums, Direct Premiums Earned, Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, Direct Losses Paid, Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Alaska

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: Ordinary, Credit Life (Group and Individual), Group, Industrial, Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: Ordinary (No. of Pols. & Certifs., Amount), Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), Group (No. of Certifs., Amount), Industrial (No. of Pols. & Certifs., Amount), Total (No. of Pols. & Certifs., Amount). Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: Direct Premiums, Direct Premiums Earned, Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, Direct Losses Paid, Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Arizona

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Arkansas

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF California

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1-2 Ordinary (No. of Pols. & Certifs., Amount), 3-4 Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), 5-6 Group (No. of Certifs., Amount), 7-8 Industrial (No. of Pols. & Certifs., Amount), 9-10 Total (No. of Pols. & Certifs., Amount). Rows include Maturity and Settlements, and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Colorado

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred, and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Connecticut

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF District of Columbia

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Florida

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Georgia

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: Ordinary, Credit Life (Group and Individual), Group, Industrial, Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: Ordinary (No. of Pol. & Certifs., Amount), Credit Life (Group and Individual) (No. of Ind. Pol. & Gr. Certifs., Amount), Group (No. of Certifs., Amount), Industrial (No. of Pol. & Certifs., Amount), Total (No. of Pol. & Certifs., Amount). Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: Direct Premiums, Direct Premiums Earned, Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, Direct Losses Paid, Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Hawaii

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Idaho

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: Ordinary, Credit Life (Group and Individual), Group, Industrial, Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: Ordinary (No. of Pols. & Certifs., Amount), Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), Group (No. of Certifs., Amount), Industrial (No. of Pols. & Certifs., Amount), Total (No. of Pols. & Certifs., Amount). Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: Direct Premiums, Direct Premiums Earned, Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, Direct Losses Paid, Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Illinois

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 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 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Iowa

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: Ordinary, Credit Life (Group and Individual), Group, Industrial, Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: Ordinary (No. of Pols. & Certifs., Amount), Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), Group (No. of Certifs., Amount), Industrial (No. of Pols. & Certifs., Amount), Total (No. of Pols. & Certifs., Amount). Rows include Matures and Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: Direct Premiums, Direct Premiums Earned, Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, Direct Losses Paid, Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Kansas

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Louisiana

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Maine

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: Ordinary, Credit Life (Group and Individual), Group, Industrial, Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: Ordinary (No. of Pol. & Certifs., Amount), Credit Life (No. of Ind. Pol. & Gr. Certifs., Amount), Group (No. of Certifs., Amount), Industrial (No. of Pol. & Certifs., Amount), Total (No. of Pol. & Certifs., Amount). Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: Direct Premiums, Direct Premiums Earned, Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, Direct Losses Paid, Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Maryland

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Massachusetts

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: Ordinary, Credit Life (Group and Individual), Group, Industrial, Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: Ordinary (No. of Pols. & Certifs., Amount), Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), Group (No. of Certifs., Amount), Industrial (No. of Pols. & Certifs., Amount), Total (No. of Pols. & Certifs., Amount). Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: Direct Premiums, Direct Premiums Earned, Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, Direct Losses Paid, Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Michigan

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Minnesota

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: Ordinary, Credit Life (Group and Individual), Group, Industrial, Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: Ordinary (No. of Pols. & Certifs., Amount), Credit Life (Group and Individual) (No. of Ind. Pols. & Gr. Certifs., Amount), Group (No. of Certifs., Amount), Industrial (No. of Pols. & Certifs., Amount), Total (No. of Pols. & Certifs., Amount). Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: Direct Premiums, Direct Premiums Earned, Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, Direct Losses Paid, Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Mississippi

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Life insurance, Annuity considerations, Direct Dividends, and Direct Claims and Benefits Paid.

Table with 10 columns: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Unpaid December 31, prior year, Incurred during current year, and POLICY EXHIBIT.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies, Federal Employees Health Benefits Plan, Medicare Title XVIII, and Non-cancelable policies.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Nevada

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF New Hampshire

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF New Jersey

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF New York

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF North Carolina

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: Ordinary, Credit Life (Group and Individual), Group, Industrial, Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: Ordinary (No. of Pols. & Certifs., Amount), Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), Group (No. of Certifs., Amount), Industrial (No. of Pols. & Certifs., Amount), Total (No. of Pols. & Certifs., Amount). Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: Direct Premiums, Direct Premiums Earned, Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, Direct Losses Paid, Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Oklahoma

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Oregon

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Pennsylvania

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF South Carolina

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: Ordinary, Credit Life (Group and Individual), Group, Industrial, Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: Ordinary (No. of Pols. & Certifs., Amount), Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), Group (No. of Certifs., Amount), Industrial (No. of Pols. & Certifs., Amount), Total (No. of Pols. & Certifs., Amount). Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: Direct Premiums, Direct Premiums Earned, Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, Direct Losses Paid, Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred, and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Utah

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Vermont

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: Ordinary, Credit Life (Group and Individual), Group, Industrial, Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: Ordinary (No. of Pols. & Certifs., Amount), Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), Group (No. of Certifs., Amount), Industrial (No. of Pols. & Certifs., Amount), Total (No. of Pols. & Certifs., Amount). Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: Direct Premiums, Direct Premiums Earned, Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, Direct Losses Paid, Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Virginia

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Washington

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred, and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF West Virginia

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Wisconsin

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Wyoming

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: Ordinary, Credit Life (Group and Individual), Group, Industrial, Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: Ordinary (No. of Pols. & Certifs., Amount), Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), Group (No. of Certifs., Amount), Industrial (No. of Pols. & Certifs., Amount), Total (No. of Pols. & Certifs., Amount). Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: Direct Premiums, Direct Premiums Earned, Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, Direct Losses Paid, Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF American Samoa

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Guam
NAIC Group Code 0836

DURING THE YEAR 2021
NAIC Company Code 92622

LIFE INSURANCE

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Puerto Rico

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pol. & Certifs., 2 Amount, 3 No. of Ind. Pol. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pol. & Certifs., 8 Amount, 9 No. of Pol. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Northern Mariana Islands

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life insurance					0
2.	Annuity considerations					0
3.	Deposit-type contract funds		XXX		XXX	0
4.	Other considerations					0
5.	Totals (Sum of Lines 1 to 4)	0	0	0	0	0
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 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
	16.	Unpaid December 31, prior year								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
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
19.	Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT										
20.	In force December 31, prior year			(a)	No. of Policies				0	0
21.	Issued during year								0	0
22.	Other changes to in force (Net)								0	0
23.	In force December 31 of current year	0	0	0 (a)	0	0	0	0	0	0

(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 Direct Premiums	2 Direct Premiums Earned	3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	4 Direct Losses Paid	5 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)	0	0	0	0
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	0	0	0	0

(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 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Other Aliens

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 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, 24.5 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 0 and number of persons insured under indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Western-Southern Life Assurance Company

DIRECT BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2021

NAIC Group Code 0836

LIFE INSURANCE

NAIC Company Code 92622

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1 No. of Pols. & Certifs., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No. of Pols. & Certifs., 8 Amount, 9 No. of Pols. & Certifs., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

(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 2021 OF THE Western-Southern Life Assurance Company
FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

INTEREST MAINTENANCE RESERVE

	1 Amount
1. Reserve as of December 31, Prior Year	7,057,725
2. Current year's realized pre-tax capital gains/(losses) of \$13,845,304 transferred into the reserve net of taxes of \$2,907,514	10,937,790
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)	17,995,515
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)	984,268
6. Reserve as of December 31, current year (Line 4 minus Line 5)	17,011,247

AMORTIZATION

	1	2	3	4
Year of Amortization	Reserve as of December 31, Prior Year	Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	Balance Before Reduction for Current Year's Amortization (Cols. 1 + 2 + 3)
1. 2021	(1,222,131)	2,206,399	0	984,268
2. 2022	(1,103,754)	2,813,574	0	1,709,820
3. 2023	(336,455)	1,540,203	0	1,203,748
4. 2024	304,709	1,180,277	0	1,484,985
5. 2025	809,628	798,832	0	1,608,460
6. 2026	962,359	406,942	0	1,369,301
7. 2027	794,576	200,937	0	995,513
8. 2028	669,110	175,839	0	844,950
9. 2029	579,626	151,286	0	730,913
10. 2030	488,593	126,022	0	614,614
11. 2031	433,756	99,671	0	533,426
12. 2032	366,086	87,146	0	453,232
13. 2033	304,079	88,551	0	392,630
14. 2034	261,976	90,928	0	352,904
15. 2035	249,669	91,656	0	341,326
16. 2036	260,346	93,507	0	353,853
17. 2037	278,107	93,385	0	371,492
18. 2038	301,890	91,563	0	393,453
19. 2039	334,226	87,312	0	421,539
20. 2040	365,743	86,340	0	452,083
21. 2041	383,008	82,187	0	465,195
22. 2042	381,448	76,603	0	458,051
23. 2043	347,524	64,818	0	412,343
24. 2044	294,067	55,652	0	349,720
25. 2045	213,843	44,335	0	258,178
26. 2046	147,263	33,672	0	180,935
27. 2047	98,190	24,693	0	122,884
28. 2048	57,061	19,642	0	76,703
29. 2049	25,090	14,030	0	39,120
30. 2050	8,095	8,979	0	17,074
31. 2051 and Later		2,806	0	2,806
32. Total (Lines 1 to 31)	7,057,729	10,937,790	0	17,995,519

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Western-Southern Life Assurance Company

ASSET VALUATION RESERVE

	Default Component			Equity Component			7 Total Amount (Cols. 3 + 6)
	1 Other Than Mortgage Loans	2 Mortgage Loans	3 Total (Cols. 1 + 2)	4 Common Stock	5 Real Estate and Other Invested Assets	6 Total (Cols. 4 + 5)	
1. Reserve as of December 31, prior year	136,564,699	25,361,122	161,925,821	79,280,121	33,332,376	112,612,497	274,538,318
2. Realized capital gains/(losses) net of taxes - General Account	(5,962,701)		(5,962,701)	17,714,380	(4,909,409)	12,804,971	6,842,270
3. Realized capital gains/(losses) net of taxes - Separate Accounts	279,458		279,458			0	279,458
4. Unrealized capital gains/(losses) net of deferred taxes - General Account	(1,400,999)		(1,400,999)	96,096,642	(21,640,556)	74,456,086	73,055,087
5. Unrealized capital gains/(losses) net of deferred taxes - Separate Accounts	(822,011)		(822,011)			0	(822,011)
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves			0			0	0
7. Basic contribution	39,317,364	10,743,668	50,061,033	0	5,458,291	5,458,291	55,519,324
8. Accumulated balances (Lines 1 through 5 - 6 + 7)	167,975,810	36,104,790	204,080,601	193,091,143	12,240,702	205,331,845	409,412,446
9. Maximum reserve	168,408,895	41,818,601	210,227,496	125,805,625	45,787,397	171,593,021	381,820,518
10. Reserve objective	107,125,703	32,157,006	139,282,709	125,480,958	40,269,251	165,750,209	305,032,918
11. 20% of (Line 10 - Line 8)	(12,170,021)	(789,557)	(12,959,578)	(13,522,037)	5,605,710	(7,916,327)	(20,875,905)
12. Balance before transfers (Lines 8 + 11)	155,805,789	35,315,233	191,121,022	179,569,106	17,846,412	197,415,518	388,536,540
13. Transfers			0	(27,940,985)	27,940,985	0	0
14. Voluntary contribution			0			0	0
15. Adjustment down to maximum/up to zero			0	(25,822,496)		(25,822,496)	(25,822,496)
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	155,805,789	35,315,233	191,121,022	125,805,625	45,787,397	171,593,022	362,714,044

ASSET VALUATION RESERVE (Continued)
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)
		MORTGAGE LOANS										
		In Good Standing:										
35.		Farm Mortgages - CM1 - Highest Quality			XXX	0	0.0011	0	0.0057	0	0.0074	0
36.		Farm Mortgages - CM2 - High Quality			XXX	0	0.0040	0	0.0114	0	0.0149	0
37.		Farm Mortgages - CM3 - Medium Quality			XXX	0	0.0069	0	0.0200	0	0.0257	0
38.		Farm Mortgages - CM4 - Low Medium Quality			XXX	0	0.0120	0	0.0343	0	0.0428	0
39.		Farm Mortgages - CM5 - Low Quality			XXX	0	0.0183	0	0.0486	0	0.0628	0
40.		Residential Mortgages - Insured or Guaranteed			XXX	0	0.0003	0	0.0007	0	0.0011	0
41.		Residential Mortgages - All Other			XXX	0	0.0015	0	0.0034	0	0.0046	0
42.		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0003	0	0.0007	0	0.0011	0
43.		Commercial Mortgages - All Other - CM1 - Highest Quality	546,405,282		XXX	546,405,282	0.0011	601,046	0.0057	3,114,510	0.0074	4,043,399
44.		Commercial Mortgages - All Other - CM2 - High Quality	1,828,635,918		XXX	1,828,635,918	0.0040	7,314,544	0.0114	20,846,449	0.0149	27,246,675
45.		Commercial Mortgages - All Other - CM3 - Medium Quality	405,240,426		XXX	405,240,426	0.0069	2,796,159	0.0200	8,104,809	0.0257	10,414,679
46.		Commercial Mortgages - All Other - CM4 - Low Medium Quality	2,660,000		XXX	2,660,000	0.0120	31,920	0.0343	91,238	0.0428	113,848
47.		Commercial Mortgages - All Other - CM5 - Low Quality			XXX	0	0.0183	0	0.0486	0	0.0628	0
		Overdue, Not in Process:										
48.		Farm Mortgages			XXX	0	0.0480	0	0.0868	0	0.1371	0
49.		Residential Mortgages - Insured or Guaranteed			XXX	0	0.0006	0	0.0014	0	0.0023	0
50.		Residential Mortgages - All Other			XXX	0	0.0029	0	0.0066	0	0.0103	0
51.		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0006	0	0.0014	0	0.0023	0
52.		Commercial Mortgages - All Other			XXX	0	0.0480	0	0.0868	0	0.1371	0
		In Process of Foreclosure:										
53.		Farm Mortgages			XXX	0	0.0000	0	0.1942	0	0.1942	0
54.		Residential Mortgages - Insured or Guaranteed			XXX	0	0.0000	0	0.0046	0	0.0046	0
55.		Residential Mortgages - All Other			XXX	0	0.0000	0	0.0149	0	0.0149	0
56.		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0000	0	0.0046	0	0.0046	0
57.		Commercial Mortgages - All Other			XXX	0	0.0000	0	0.1942	0	0.1942	0
58.		Total Schedule B Mortgages (Sum of Lines 35 through 57)	2,782,941,626	0	XXX	2,782,941,626	XXX	10,743,668	XXX	32,157,006	XXX	41,818,601
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)	2,782,941,626	0	XXX	2,782,941,626	XXX	10,743,668	XXX	32,157,006	XXX	41,818,601

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

Line Number	NAIC Designation	Description					Basic Contribution		Reserve Objective		Maximum Reserve	
			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)	5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
COMMON STOCK												
1.		Unaffiliated - Public	819,956,502	XXX	XXX	819,956,502	0.0000	0	0.1518 (a)	124,469,397	0.1518 (a)	124,469,397
2.		Unaffiliated - Private		XXX	XXX	0	0.0000	0	0.1945	0	0.1945	0
3.		Federal Home Loan Bank	90,185,300	XXX	XXX	90,185,300	0.0000	0	0.0061	550,130	0.0097	874,797
4.		Affiliated - Life with AVR		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
Affiliated - Investment Subsidiary:												
5.		Fixed Income - Exempt Obligations				0	XXX		XXX		XXX	
6.		Fixed Income - Highest Quality				0	XXX		XXX		XXX	
7.		Fixed Income - High Quality				0	XXX		XXX		XXX	
8.		Fixed Income - Medium Quality				0	XXX		XXX		XXX	
9.		Fixed Income - Low Quality				0	XXX		XXX		XXX	
10.		Fixed Income - Lower Quality				0	XXX		XXX		XXX	
11.		Fixed Income - In/Near Default				0	XXX		XXX		XXX	
12.		Unaffiliated Common Stock - Public				0	0.0000	0	0.1518 (a)	0	0.1518 (a)	0
13.		Unaffiliated Common Stock - Private				0	0.0000	0	0.1945	0	0.1945	0
14.		Real Estate				0	(b)	0	(b)	0	(b)	0
15.		Affiliated - Certain Other (See SVO Purposes and Procedures Manual)	2,920,445	XXX	XXX	2,920,445	0.0000	0	0.1580	461,430	0.1580	461,430
16.		Affiliated - All Other		XXX	XXX	0	0.0000	0	0.1945	0	0.1945	0
17.		Total Common Stock (Sum of Lines 1 through 16)	913,062,247	0	0	913,062,247	XXX	0	XXX	125,480,958	XXX	125,805,625
REAL ESTATE												
18.		Home Office Property (General Account only)				0	0.0000	0	0.0912	0	0.0912	0
19.		Investment Properties				0	0.0000	0	0.0912	0	0.0912	0
20.		Properties Acquired in Satisfaction of Debt				0	0.0000	0	0.1337	0	0.1337	0
21.		Total Real Estate (Sum of Lines 18 through 20)	0	0	0	0	XXX	0	XXX	0	XXX	0
OTHER INVESTED ASSETS												
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS												
22.		Exempt Obligations		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
23.	1	Highest Quality	1,275,361	XXX	XXX	1,275,361	0.0005	638	0.0016	2,041	0.0033	4,209
24.	2	High Quality		XXX	XXX	0	0.0021	0	0.0064	0	0.0106	0
25.	3	Medium Quality		XXX	XXX	0	0.0099	0	0.0263	0	0.0376	0
26.	4	Low Quality	219,385,439	XXX	XXX	219,385,439	0.0245	5,374,943	0.0572	12,548,847	0.0817	17,923,790
27.	5	Lower Quality		XXX	XXX	0	0.0630	0	0.1128	0	0.1880	0
28.	6	In or Near Default		XXX	XXX	0	0.0000	0	0.2370	0	0.2370	0
29.		Total with Bond Characteristics (Sum of Lines 22 through 28)	220,660,800	XXX	XXX	220,660,800	XXX	5,375,581	XXX	12,550,888	XXX	17,927,999

ASSET VALUATION RESERVE (Continued)
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS
EQUITY AND OTHER INVESTED ASSET 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)
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK												
65.		Unaffiliated Public		XXX	XXX	0	0.0000	0	0.1518 (a)	0	0.1518 (a)	0
66.		Unaffiliated Private	14,474,974	XXX	XXX	14,474,974	0.0000	0	0.1945	2,815,382	0.1945	2,815,382
67.		Affiliated Life with AVR		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
68.		Affiliated Certain Other (See SVO Purposes & Procedures Manual)		XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
69.		Affiliated Other - All Other		XXX	XXX	0	0.0000	0	0.1945	0	0.1945	0
70.		Total with Common Stock Characteristics (Sum of Lines 65 through 69)	14,474,974	XXX	XXX	14,474,974	XXX	0	XXX	2,815,382	XXX	2,815,382
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE												
71.		Home Office Property (General Account only)				0	0.0000	0	0.0912	0	0.0912	0
72.		Investment Properties	77,849,153		93,942,675	171,791,828	0.0000	0	0.0912	15,667,415	0.0912	15,667,415
73.		Properties Acquired in Satisfaction of Debt				0	0.0000	0	0.1337	0	0.1337	0
74.		Total with Real Estate Characteristics (Sum of Lines 71 through 73)	77,849,153	0	93,942,675	171,791,828	XXX	0	XXX	15,667,415	XXX	15,667,415
LOW INCOME HOUSING TAX CREDIT INVESTMENTS												
75.		Guaranteed Federal Low Income Housing Tax Credit	0			0	0.0003	0	0.0006	0	0.0010	0
76.		Non-guaranteed Federal Low Income Housing Tax Credit	6,451,088			6,451,088	0.0063	40,642	0.0120	77,413	0.0190	122,571
77.		Guaranteed State Low Income Housing Tax Credit	0			0	0.0003	0	0.0006	0	0.0010	0
78.		Non-guaranteed State Low Income Housing Tax Credit	0			0	0.0063	0	0.0120	0	0.0190	0
79.		All Other Low Income Housing Tax Credit	0			0	0.0273	0	0.0600	0	0.0975	0
80.		Total LIHTC (Sum of Lines 75 through 79)	6,451,088	0	0	6,451,088	XXX	40,642	XXX	77,413	XXX	122,571
ALL OTHER INVESTMENTS												
81.		NAIC 1 Working Capital Finance Investments		XXX		0	0.0000	0	0.0042	0	0.0042	0
82.		NAIC 2 Working Capital Finance Investments		XXX		0	0.0000	0	0.0137	0	0.0137	0
83.		Other Invested Assets - Schedule BA	57,152,348	XXX		57,152,348	0.0000	0	0.1580	9,030,071	0.1580	9,030,071
84.		Other Short-Term Invested Assets - Schedule DA		XXX		0	0.0000	0	0.1580	0	0.1580	0
85.		Total All Other (Sum of Lines 81, 82, 83 and 84)	57,152,348	XXX	0	57,152,348	XXX	0	XXX	9,030,071	XXX	9,030,071
86.		Total Other Invested Assets - Schedules BA & DA (Sum of Lines 29, 37, 64, 70, 74, 80 and 85)	428,042,696	0	93,942,675	521,985,371	XXX	5,458,291	XXX	40,269,251	XXX	45,787,397

(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

BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS REPLICATIONS (SYNTHETIC) ASSETS

1 RSAT Number	2 Type	3 CUSIP	4 Description of Asset(s)	5 NAIC Designation or Other Description of Asset	6 Value of Asset	7 AVR Basic Contribution	8 AVR Reserve Objective	9 AVR Maximum Reserve
NONE								
0599999 - Total								

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Western-Southern Life Assurance Company

SCHEDULE F

Showing all claims for death losses and all other contract claims resisted or compromised during the year, and all claims for death losses and all other contract claims resisted December 31 of current year

1	2	3	4	5	6	7	8
Contract Numbers	Claim Numbers	State of Residence of Claimant	Year of Claim for Death or Disability	Amount Claimed	Amount Paid During the Year	Amount Resisted Dec. 31 of Current Year	Why Compromised or Resisted
W-340829	3328077	CA	2021	50,000	560	0	No Contract
W-80903944	3410461	CA	2021	25,000	1,858	0	No Contract
W-32420735	3445867	FL	2021	375,375	250,000	0	No Contract
W-80777463	3394630	FL	2021	45,000	1,631	0	No Contract
W-32416936	3411959	IL	2021	15,710	10,000	0	No Contract
W-32423639	3318522	IN	2021	135,910	99,000	0	No Contract
W-32417025	3451581	MI	2021	78,225	50,000	0	No Contract
W-32432351	3447205	MI	2021	115,370	75,000	0	No Contract
W-80882623	3355395	MI	2021	25,000	649	0	No Contract
W-633515	3312870	OH	2021	22,875	1,457	0	No Contract
W-32412660	3380886	OH	2021	32,264	24,000	0	No Contract
W-32412981	3333363	OH	2021	28,727	20,000	0	No Contract
W-32416540	3450597	PA	2021	132,299	100,000	0	No Contract
W-80880089	3433627	SC	2021	50,000	3,024	0	No Contract
W-32413577	3403523	TN	2021	27,676	20,000	0	No Contract
W-32422603	3390849	TN	2021	44,896	30,000	0	No Contract
W-32422607	3390796	TN	2021	74,826	50,000	0	No Contract
W-80892197	3313147	VA	2021	25,000	2,511	0	No Contract
0199999. Death Claims - Ordinary				1,304,153	739,690	0	XXX
0599999. Death Claims - Disposed Of				1,304,153	739,690	0	XXX
1099999. Additional Accidental Death Benefits Claims - Disposed Of				0	0	0	XXX
1599999. Disability Benefits Claims - Disposed Of				0	0	0	XXX
2099999. Matured Endowments Claims - Disposed Of				0	0	0	XXX
2599999. Annuities with Life Contingency Claims - Disposed Of				0	0	0	XXX
2699999. Claims Disposed of During Current Year				1,304,153	739,690	0	XXX
W-32421281	03410013	FL	2021	30,631	0	30,631	
W-80900990	3150969	IL	2020	50,000	0	50,000	
2799999. Death Claims - Ordinary				80,631	0	80,631	XXX
3199999. Death Claims - Resisted				80,631	0	80,631	XXX
3699999. Additional Accidental Death Benefits Claims - Resisted				0	0	0	XXX
4199999. Disability Benefits Claims - Resisted				0	0	0	XXX
4699999. Matured Endowments Claims - Resisted				0	0	0	XXX
5199999. Annuities with Life Contingencies Claims - Resisted				0	0	0	XXX
5299999. Claims Resisted During Current Year				80,631	0	80,631	XXX
5399999 - Totals				1,384,784	739,690	80,631	XXX

Schedule H - Part 1 - Analysis of Underwriting Operations

NONE

Schedule H - Part 2 - Reserves and Liabilities

NONE

Schedule H - Part 3 - Test of Prior Year's Claim Reserves and Liabilities

NONE

Schedule H - Part 4 - Reinsurance

NONE

Schedule H - Part 5 - Health Claims

NONE

Schedule S - Part 1 - Section 1

NONE

Schedule S - Part 1 - Section 2

NONE

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Western-Southern Life Assurance Company

SCHEDULE S - PART 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 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
80659	82-4533188	08/01/2008	Canada Life Assurance Co. USB	MI	163,183	377,922
86258	13-2572994	08/01/1997	General Re Life Corporation	CT	0	1,424
88340	59-2859797	12/01/1999	Hannover Life Reinsurance Co.	FL	0	2,365
66346	58-0828824	01/01/1966	Munich American Reassurance Co.	GA	0	74,619
93572	43-1235868	01/01/1982	RGA Reinsurance Co.	MO	784,190	1,146,983
97071	13-3126819	08/01/2014	SCOR Global Life USA Reinsurance Co.	DE	181,586	247,121
82627	06-0839705	09/30/2005	Swiss Re Life & Health America	MO	691,932	1,008,320
65676	35-0472300	11/15/1999	The Lincoln National Life Insurance Co.	IN	366,296	831,313
0899999. Life and Annuity - U.S. Non-Affiliates					2,187,187	3,690,067
00000	AA-1580095	07/27/2008	TOA Reinsurance Company	JPN	140,683	298,561
0999999. Life and Annuity - Non-U.S. Non-Affiliates					140,683	298,561
1099999. Total Life and Annuity - Non-Affiliates					2,327,870	3,988,628
1199999. Total Life and Annuity					2,327,870	3,988,628
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
2199999. Total Accident and Health - Non-Affiliates					0	0
2299999. Total Accident and Health					0	0
2399999. Total U.S. (Sum of 0399999, 0899999, 1499999 and 1999999)					2,187,187	3,690,067
2499999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999 and 2099999)					140,683	298,561
9999999 Totals - Life, Annuity and Accident and Health					2,327,870	3,988,628

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Western-Southern Life Assurance Company

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 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domi- ciliary Juris- diction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount in Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9 Current Year	10 Prior Year		12 Current Year	13 Prior Year		
9199999	Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3699999, 4199999, 4899999, 5399999, 5999999, 6499999, 7099999, 7599999, 8199999 and 8699999)						8,700,035,794	23,401,881	24,877,022	22,663,770	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)						1,033,863,002	1,579,538	1,471,770	1,802,133	0	0	0	0
9999999	Totals						9,733,898,796	24,981,419	26,348,792	24,465,903	0	0	0	0

Schedule S - Part 3 - Section 2

NONE

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Western-Southern Life Assurance Company

SCHEDULE S - PART 4

Reinsurance Ceded to Unauthorized Companies

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Reserve Credit Taken	6 Paid and Unpaid Losses Recoverable (Debit)	7 Other Debits	8 Total (Cols.5+6+7)	9 Letters of Credit	10 Issuing or Confirming Bank Reference Number (a)	11 Trust Agreements	12 Funds Deposited by and Withheld from Reinsurers	13 Other	14 Miscellaneous Balances (Credit)	15 Sum of Cols. 9+11+12+13 +14 but not in Excess of Col. 8
0399999			Total General Account - Life and Annuity U.S. Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
0699999			Total General Account - Life and Annuity Non-U.S. Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
0799999			Total General Account - Life and Annuity Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
00000	AA-1580095	08/01/2008	TOA Reinsurance Company	1,579,538	439,244	0	2,018,782	2,995,000	0001	0	0	0	0	2,018,782
0999999			General Account - Life and Annuity Non-U.S. Non-Affiliates	1,579,538	439,244	0	2,018,782	2,995,000	XXX	0	0	0	0	2,018,782
1099999			Total General Account - Life and Annuity Non-Affiliates	1,579,538	439,244	0	2,018,782	2,995,000	XXX	0	0	0	0	2,018,782
1199999			Total General Account Life and Annuity	1,579,538	439,244	0	2,018,782	2,995,000	XXX	0	0	0	0	2,018,782
1499999			Total General Account - Accident and Health U.S. Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
1799999			Total General Account - Accident and Health Non-U.S. Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
1899999			Total General Account - Accident and Health Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
2199999			Total General Account - Accident and Health Non-Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
2299999			Total General Account Accident and Health	0	0	0	0	0	XXX	0	0	0	0	0
2399999			Total General Account	1,579,538	439,244	0	2,018,782	2,995,000	XXX	0	0	0	0	2,018,782
2699999			Total Separate Accounts - U.S. Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
2999999			Total Separate Accounts - Non-U.S. Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
3099999			Total Separate Accounts - Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
3399999			Total Separate Accounts - Non-Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
3499999			Total Separate Accounts	0	0	0	0	0	XXX	0	0	0	0	0
3599999			Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2699999 and 3199999)	0	0	0	0	0	XXX	0	0	0	0	0
3699999			Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2999999 and 3299999)	1,579,538	439,244	0	2,018,782	2,995,000	XXX	0	0	0	0	2,018,782
9999999			Totals	1,579,538	439,244	0	2,018,782	2,995,000	XXX	0	0	0	0	2,018,782

(a)

Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
0001	1	026009674	Sumitomo Mitsui Banking Corporation	2,995,000

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Western-Southern Life Assurance Company

SCHEDULE S - PART 5

Reinsurance Ceded to Certified Reinsurers as of December 31, Current Year (\$000 Omitted)

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Domiciliary Jurisdiction	6 Certified Reinsurer Rating (1 through 6)	7 Effective Date of Certified Reinsurer Rating	8 Percent Collateral Required for Full Credit (0% - 100%)	9 Reserve Credit Taken	10 Paid and Unpaid Losses Recoverable (Debit)	11 Other Debits	12 Total Recoverable/ Reserve Credit Taken (Col. 9 + 10 + 11)	13 Miscellaneous Balances (Credit)	14 Net Obligation Subject to Collateral (Col. 12 - 13)	15 Dollar Amount of Collateral Required for Full Credit (Col. 14 Times Col. 8)	Collateral						23 Percent of Collateral Provided for Net Obligation Subject to Collateral (Col. 22 / Col. 14)	24 Percent Credit Allowed on Net Obligation Subject to Collateral (Col. 23 / Col. 8, not to Exceed 100%)	25 Amount of Credit Allowed for Net Obligation Subject to Collateral (Col. 14 x Col. 24)	26 Liability for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 14 - Col. 25)				
															16 Multiple Beneficiary Trust	17 Letters of Credit	18 Issuing or Confirming Bank Reference Number (a)	19 Trust Agreements	20 Funds Deposited by and Withheld from Reinsurers	21 Other					22 Total Collateral Provided (Col. 16 + 17 + 19 + 20 + 21)			
NONE																												
9999999 - Totals																					XXX				XXX	XXX		

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(a)	Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Western-Southern Life Assurance Company

SCHEDULE S - PART 6

Five Year Exhibit of Reinsurance Ceded Business
(\$000 Omitted)

	1 2021	2 2020	3 2019	4 2018	5 2017
A. OPERATIONS ITEMS					
1. Premiums and annuity considerations for life and accident and health contracts	24,466	25,715	22,913	21,727	19,091
2. Commissions and reinsurance expense allowances	0	0	0	0	0
3. Contract claims	21,540	21,167	15,913	16,661	13,588
4. Surrender benefits and withdrawals for life contracts					
5. Dividends to policyholders and refunds to members					
6. Reserve adjustments on reinsurance ceded	0	0	0	0	0
7. Increase in aggregate reserve for life and accident and health contracts	(1,367)	1,560	1,687	1,727	997
B. BALANCE SHEET ITEMS					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected	1,912	2,282	2,059	1,891	1,325
9. Aggregate reserves for life and accident and health contracts	24,981	26,349	24,789	23,102	21,375
10. Liability for deposit-type contracts					
11. Contract claims unpaid	3,989	4,411	3,008	3,406	2,743
12. Amounts recoverable on reinsurance	2,328	2,979	1,761	701	878
13. Experience rating refunds due or unpaid					
14. Policyholders' dividends and refunds to members (not included in Line 10)					
15. Commissions and reinsurance expense allowances due					
16. Unauthorized reinsurance offset	0	0	0	0	0
17. Offset for reinsurance with Certified Reinsurers				0	
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
18. Funds deposited by and withheld from (F)	0	0	0	0	0
19. Letters of credit (L)	2,995	2,720	2,400	2,378	2,420
20. Trust agreements (T)	0	0	0	0	0
21. Other (O)	0	0	0	0	0
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
22. Multiple Beneficiary Trust				0	
23. Funds deposited by and withheld from (F)				0	
24. Letters of credit (L)				0	
25. Trust agreements (T)				0	
26. Other (O)				0	

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Western-Southern Life Assurance Company

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	18,624,408,720		18,624,408,720
2. Reinsurance (Line 16)	2,327,870	(2,327,870)	0
3. Premiums and considerations (Line 15)	20,291,278	1,912,336	22,203,614
4. Net credit for ceded reinsurance	XXX	29,385,581	29,385,581
5. All other admitted assets (balance)	209,642,362		209,642,362
6. Total assets excluding Separate Accounts (Line 26)	18,856,670,230	28,970,047	18,885,640,277
7. Separate Account assets (Line 27)	680,895,618		680,895,618
8. Total assets (Line 28)	19,537,565,848	28,970,047	19,566,535,895
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9. Contract reserves (Lines 1 and 2)	14,756,867,501	24,981,419	14,781,848,920
10. Liability for deposit-type contracts (Line 3)	1,765,081,337		1,765,081,337
11. Claim reserves (Line 4)	26,380,413	3,988,628	30,369,041
12. Policyholder dividends/member refunds/reserves (Lines 5 through 7)	0		0
13. Premium & annuity considerations received in advance (Line 8)	151,212		151,212
14. Other contract liabilities (Line 9)	18,923,583		18,923,583
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		0
19. All other liabilities (balance)	749,970,257		749,970,257
20. Total liabilities excluding Separate Accounts (Line 26)	17,317,374,303	28,970,047	17,346,344,350
21. Separate Account liabilities (Line 27)	680,895,618		680,895,618
22. Total liabilities (Line 28)	17,998,269,921	28,970,047	18,027,239,968
23. Capital & surplus (Line 38)	1,539,295,927	XXX	1,539,295,927
24. Total liabilities, capital & surplus (Line 39)	19,537,565,848	28,970,047	19,566,535,895
NET CREDIT FOR CEDED REINSURANCE			
25. Contract reserves	24,981,419		
26. Claim reserves	3,988,628		
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	2,327,870		
32. Other ceded reinsurance recoverables	0		
33. Total ceded reinsurance recoverables	31,297,917		
34. Premiums and considerations	1,912,336		
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	1,912,336		
41. Total net credit for ceded reinsurance	29,385,581		

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Western-Southern Life Assurance Company

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 Ownership Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0836	Western-Southern Group	.00000	20-8843645				WSLR Columbus LLC	OH	NIA	WSLR Holdings LLC	Ownership	100.000	Western & Southern Mutual Holding Co	NO	
.0836	Western-Southern Group	.00000	20-8843653				WSLR Dallas LLC	TX	NIA	WSLR Holdings LLC	Ownership	100.000	Western & Southern Mutual Holding Co	NO	
.0836	Western-Southern Group	.00000	20-8843767				WSLR Hartford LLC	CT	NIA	WSLR Holdings LLC	Ownership	100.000	Western & Southern Mutual Holding Co	NO	
.0836	Western-Southern Group	.00000	20-8843577				WSLR Holdings LLC	OH	NIA	The Western and Southern Life Insurance Co	Ownership	24.490	Western & Southern Mutual Holding Co	NO	
.0836	Western-Southern Group	.00000	20-8843962				WSLR Skyport LLC	KY	NIA	WSLR Holdings LLC	Ownership	100.000	Western & Southern Mutual Holding Co	NO	
.0836	Western-Southern Group	.00000	20-8843814				WSLR Union LLC	OH	NIA	WSLR Holdings LLC	Ownership	100.000	Western & Southern Mutual Holding Co	NO	
.0836	Western-Southern Group	.00000	26-3526711				YT Crossing Holdings, LLC	TX	NIA	WS Real Estate Holdings LLC	Ownership	98.000	Western & Southern Mutual Holding Co	NO	

Asterisk	Explanation

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Western-Southern Life Assurance Company

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
00000	31-1732405	Western & Southern Mutual Holding Company	1,500,000				232,401				1,732,401	
00000	31-1732404	Western & Southern Financial Group, Inc.	48,500,000	(50,000,000)			(363,747)				(1,863,747)	
65242	35-0457540	The Lafayette Life Insurance Company		50,000,000			(26,427,194)				23,572,806	907,341
00000	35-2123483	LLIA, Inc.					1,390,658				1,390,658	
70483	31-0487145	The Western and Southern Life Insurance Company	(15,000,000)	(405,000,000)			370,707,350				(49,292,650)	459,140,583
92622	31-1000236	Western-Southern Life Assurance Company	15,000,000	207,600,000			(163,886,181)				58,713,819	
99937	31-1191427	Columbus Life Insurance Company		100,000,000			(25,264,921)				74,735,079	(460,047,924)
70939	13-2611847	Gerber Life Insurance Company					(1,207,639)				(1,207,639)	
74780	86-0214103	Integrity Life Insurance Company					(64,351,322)				(64,351,322)	
75264	16-0958252	National Integrity Life Insurance Company					(23,814,952)				(23,814,952)	
00000	47-6046379	Touchstone Securities, Inc.					606,380				606,380	
00000	31-1328371	IFS Financial Services, Inc.	(15,000,000)	40,000,000			(832)				24,999,168	
00000	31-0846576	W&S Brokerage Services, Inc.		2,400,000			(2,634,219)				(234,219)	
00000	31-1394672	Touchstone Advisors, Inc.					(27,339,942)				(27,339,942)	
00000	43-2081325	Gerber Life Agency, LLC		10,000,000			3,048,694				13,048,694	
00000	31-1018957	Eagle Realty Group, LLC					(10,598,782)				(10,598,782)	
00000	31-1301863	Fort Washington Investment Advisors, Inc.					(28,165,732)				(28,165,732)	
00000	31-1334221	W&S Financial Group Distributors, Inc.					(3,425)				(3,425)	
00000	06-1804434	Western & Southern Investment Holdings, LLC	(35,000,000)	45,000,000			71,717				10,071,717	
00000	84-3195821	Westad Leasing LLC					(1,998,312)				(1,998,312)	
00000	34-1998937	Queen City Square LLC									0	
999999	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
MARCH FILING	
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
APRIL FILING	
5. Will Management's Discussion and Analysis be filed by April 1?	YES
6. Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies)	YES
7. Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
JUNE FILING	
8. Will an audited financial report be filed by June 1?	YES
9. Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES

The following supplemental reports are required to be filed as part of your annual statement filing **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.** 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.

MARCH FILING	
10. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? (Not applicable to fraternal benefit societies) ...	NO
11. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
12. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
13. 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
14. 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?	YES
15. Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?	YES
16. 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
17. 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
18. 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
19. 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
20. 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
21. 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
22. 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
23. 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?	YES
24. 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?	YES
25. 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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Western-Southern Life Assurance Company
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

- 26. 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? YES
- 27. 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
- 28. Will the Worker's Compensation Carve-Out Supplement be filed by March 1? (Not applicable to fraternal benefit societies) NO
- 29. Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1? YES
- 30. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1? NO
- 31. 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
- 32. 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
- 33. 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
- 34. Will the VM-20 Reserves Supplement be filed with the state of domicile and the NAIC by March 1? YES
- 35. Will the Health Care Receivables Supplement be filed with the state of domicile and the NAIC by March 1? NO

APRIL FILING

- 36. 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
- 37. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? NO
- 38. 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
- 39. Will the Accident and Health Policy Experience Exhibit be filed by April 1? NO
- 40. 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
- 41. 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
- 42. Will the confidential Actuarial Memorandum required by Actuarial Guideline XXXVIII 8D be filed with the state of domicile by April 30? NO
- 43. Will the Supplemental Term and Universal Life Insurance Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1? YES
- 44. Will the Variable Annuities Supplement be filed with the state of domicile and the NAIC by April 1? YES
- 45. Will the confidential Executive Summary of the PBR Actuarial Report be filed with the state of domicile by April 1? YES
- 46. Will the confidential Life Summary of the PBR Actuarial Report be filed with the state of domicile by April 1? YES
- 47. Will the confidential Variable Annuities Summary of the PBR Actuarial Report be filed with the state of domicile by April 1? YES

AUGUST FILING

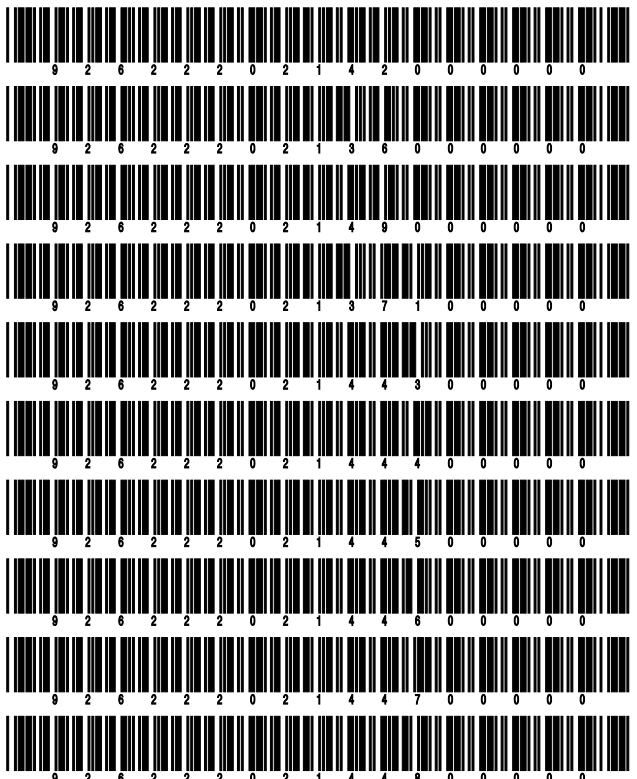
- 48. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? YES

Explanations:

- 10.
- 11.
- 12.
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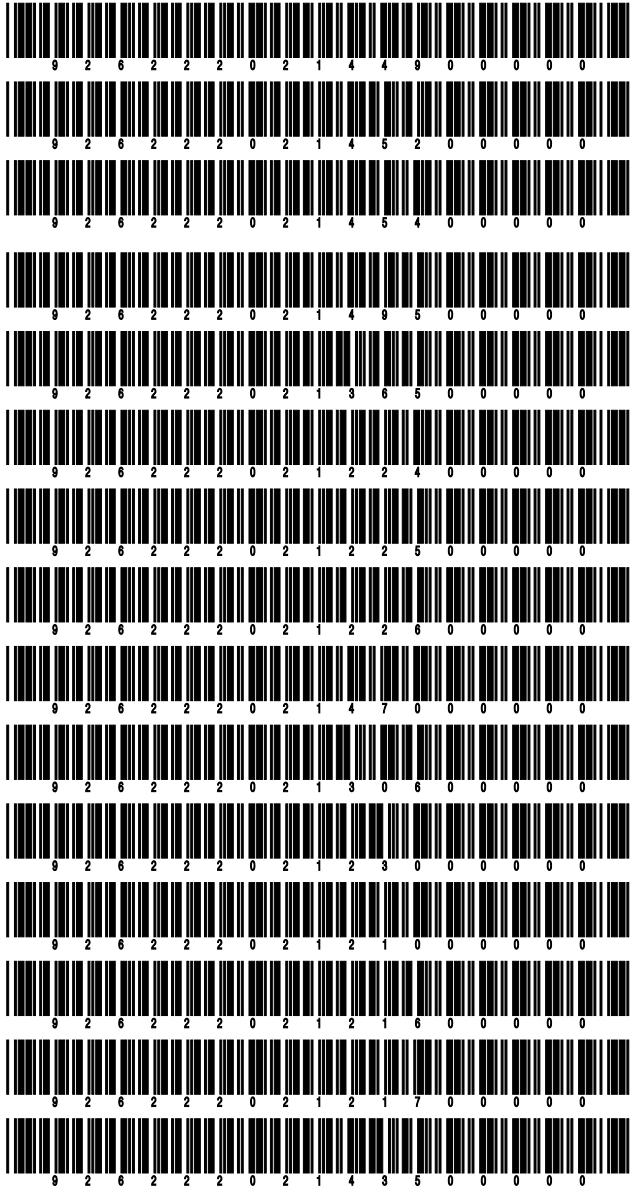
Bar Codes:

- 10. SIS Stockholder Information Supplement [Document Identifier 420]
- 11. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]
- 12. Trusteed Surplus Statement [Document Identifier 490]
- 13. Participating Opinion for Exhibit 5 [Document Identifier 371]
- 16. Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit [Document Identifier 443]
- 17. Actuarial Opinion on Synthetic Guaranteed Investment Contracts [Document Identifier 444]
- 18. Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 445]
- 19. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 446]
- 20. Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI [Document Identifier 447]
- 21. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI [Document Identifier 448]



SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

- 22. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) [Document Identifier 449]
- 25. Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities [Document Identifier 452]
- 27. 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]
- 28. Workers' Compensation Carve-Out Supplement [Document Identifier 495]
- 30. Medicare Part D Coverage Supplement [Document Identifier 365]
- 31. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]
- 32. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]
- 33. Relief from the Requirements for Audit Committees [Document Identifier 226]
- 35. Health Care Receivables Supplement [Document Identifier 470]
- 37. Long-Term Care Experience Reporting Forms [Document Identifier 306]
- 38. Credit Insurance Experience Exhibit [Document Identifier 230]
- 39. Accident and Health Policy Experience Exhibit [Document Identifier 210]
- 40. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]
- 41. Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217]
- 42. Actuarial Memorandum Required by Actuarial Guideline XXXVIII 8D [Document Identifier 435]



OVERFLOW PAGE FOR WRITE-INS

NONE



SUPPLEMENT FOR THE YEAR 2021 OF THE Western-Southern Life Assurance Company

VM-20 RESERVES SUPPLEMENT – PART 1A

Life Insurance Reserves Valued According to VM-20 by Product Type
 For The Year Ended December 31, 2021
 (To Be Filed by March 1)

NAIC Group Code 0836

NAIC Company Code 92622

	Prior Year	Current Year	
	1 Reported Reserve	2 Reported Reserve	3 Due and Deferred Premium Asset
1. Post-Reinsurance-Ceded Reserve			
1.1. Term Life Insurance.....	1,542,002	5,369,352	1,114,725
1.2. Universal Life With Secondary Guarantee	105,580,900	179,611,168	(1,137)
1.3. Non-Participating Whole Life		1,558	1,558
1.4. Participating Whole Life			
1.5. Universal Life Without Secondary Guarantee			
1.6. Variable Universal Life Without Secondary Guarantee			
1.7. Variable Life Without Secondary Guarantee			
1.8. Indexed Life Without Secondary Guarantee			
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)	107,122,902	184,982,078	XXX
3. Pre-Reinsurance-Ceded Reserve			
3.1. Term Life Insurance.....	1,894,185	6,109,940	1,133,045
3.2. Universal Life With Secondary Guarantee	106,013,847	180,361,932	0
3.3. Non-Participating Whole Life		1,558	1,558
3.4. Participating Whole Life			
3.5. Universal Life Without Secondary Guarantee			
3.6. Variable Universal Life Without Secondary 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
4. Total Pre-Reinsurance-Ceded Reserve (Sum of Lines 3.1 through 3.9)	107,908,032	186,473,430	XXX
5. Total Reserves Ceded (Line 4 minus Line 2)	785,130	1,491,352	XXX
DETAILS OF WRITE-INS			
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

456-1

SUPPLEMENT FOR THE YEAR 2021 OF THE Western-Southern Life Assurance Company

VM-20 RESERVES SUPPLEMENT – PART 1B

Life Insurance Reserves Valued According to VM-20 by Product Type
 For The Year Ended December 31, 2021
 (To Be Filed by March 1)
 (\$000 Omitted for Face Amounts)

	Current Year											
	SECTION A					SECTION B				SECTION C		
	1 Net Premium Reserve	2 Deterministic Reserve	3 Stochastic Reserve	4 Number of Policies	5 Face Amount	6 Net Premium Reserve	7 Deterministic Reserve	8 Number of Policies	9 Face Amount	10 Net Premium Reserve	11 Number of Policies	12 Face Amount
1. Post-Reinsurance-Ceded Reserve												
1.1. Term Life Insurance				.XXX	.XXX	1,673,966	5,369,352	.XXX	.XXX	.XXX	.XXX	.XXX
1.2. Universal Life With Secondary Guarantee				.XXX	.XXX	178,817,705	179,611,168	.XXX	.XXX		.XXX	.XXX
1.3. Non-Participating Whole Life				.XXX	.XXX			.XXX	.XXX	1,558	.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 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 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						2,414,554	6,109,940	8,368	1,682,456	.XXX		
3.2. Universal Life With Secondary Guarantee						179,568,469	180,361,932	6,313	569,511			
3.3. Non-Participating Whole Life										1,558	.29	1,965
3.4. Participating Whole Life												
3.5. Universal Life Without Secondary Guarantee												
3.6. Variable Universal Life Without Secondary 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 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
DETAILS OF WRITE-INS												
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 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 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 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 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, 2021
 (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 [<input type="checkbox"/>] No [<input checked="" type="checkbox"/>]
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 [<input type="checkbox"/>]	
2.2 State Statute (SVL) [<input type="checkbox"/>] Complete items "a" and "b" as appropriate.	
a. Is the criteria in the State Statute (SVL) different from the NAIC adopted VM?	Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]
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 [<input type="checkbox"/>] Complete items "a" and "b" as appropriate.	
a. Is the criteria in the State Regulation different from the NAIC adopted VM?	Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]
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, 2021
 (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 []
- 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 []

Supplement Schedule O - Part 1 Heading Information

N O N E

Supplement Schedule O - Part 1 Section A

N O N E

Supplement Schedule O - Part 1 Section B

N O N E

Supplement Schedule O - Part 1 Section C

N O N E

Supplement Schedule O - Part 1 Section D

N O N E

Supplement Schedule O - Part 1 Section E

N O N E

Supplement Schedule O - Part 1 Section F

N O N E

Supplement Schedule O - Part 1 Section G

N O N E

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 Schedule O - Part 3 Section A

N O N E

Supplement Schedule O - Part 3 Section B

N O N E

Supplement Schedule O - Part 3 Section C

N O N E

Supplement Schedule O - Part 3 Section D

N O N E

Supplement Schedule O - Part 3 Section E

N O N E

Supplement Schedule O - Part 3 Section F

N O N E

Supplement Schedule O - Part 3 Section G

N O N E

SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O - PART 4

**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, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at End of Year				
	1 2017	2 2018	3	4 2020	5 2021
1. 2017	NONE				
2. 2018					
3. 2019					
4. 2020					
5. 2021					

Section B - Other Accident and Health

1. 2017	NONE				
2. 2018					
3. 2019					
4. 2020					
5. 2021					

Section C - Credit Accident and Health

1. 2017	NONE				
2. 2018					
3. 2019					
4. 2020					
5. 2021					

Section D -

1. 2017	NONE				
2. 2018					
3. 2019					
4. 2020					
5. 2021					

Section E -

1. 2017	NONE				
2. 2018					
3. 2019					
4. 2020					
5. 2021					

Section F -

1. 2017	NONE				
2. 2018					
3. 2019					
4. 2020					
5. 2021					

Section G -

1. 2017	NONE				
2. 2018					
3. 2019					
4. 2020					
5. 2021					

SUPPLEMENTAL SCHEDULE O - PART 5

(\$000 OMITTED)

Reserve and Liability Methodology - Exhibits 6 and 8

Line of Business	1 Methodology	2 Amount
1. Industrial Life		
2. Ordinary Life	Other	26,311
3. Individual Annuity	Other	70
4. Supplementary Contracts		
5. Credit Life		
6. Group Life		
7. Group Annuities		
8. Group Accident and Health		
9. Credit Accident and Health		
10. Other Accident and Health		
11. Total		26,381



SUPPLEMENT FOR THE YEAR 2021 OF THE Western-Southern Life Assurance Company

HEALTH CARE RECEIVABLES SUPPLEMENT

For The Year Ended December 31, 2021
(To Be Filed by March 1)

Of The Western-Southern Life Assurance Company
Address (City, State and Zip Code) Cincinnati , OH 45202
NAIC Group Code 0836 NAIC Company Code 92622 Employer's ID Number 31-1000236

EXHIBIT 3 - HEALTH CARE RECEIVABLES

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0799999 Gross health care receivables						