

Office of Risk Assessment
50 W. Town Street, Ste 300
Columbus, OH 43215
(614) 644-2658
Fax (614) 644-3256
www.insurance.ohio.gov

Ohio Department of Insurance
Mike DeWine – Governor
Jillian Froment – Director



Electronic Filing Authenticity Affidavit

Ohio Domestic Insurers Only

Company Name: Universal Guaranty Life Insurance Company

NAIC No. 70130

We, the undersigned executive officers of Universal Guaranty Life Insurance Company (herein referred to as the "Company"), an insurance company organized under the laws of Ohio, hereby certify that the documents indicated below by an "X" were filed electronically with the National Association of Insurance Commissioners ("NAIC") and that the electronic filing or filings, including ".PDF" filings, are exact copies of the original documents, except for formatting differences due to electronic filing. The original documents are maintained in this Company's office and are available for inspection upon request by the Ohio Department of Insurance for at least five years following the date of filing. An executed, notarized NAIC Annual Statement or Quarterly Statement jurat page or an original, notarized signature page (if this filing relates to a supplemental filing without a jurat page) attesting to the accuracy and authenticity of the corresponding NAIC Annual Statement or Quarterly Statement or supplemental schedule is attached to this Affidavit.

Company Type: ☐ Fraternal ☐ Title ☐ Property & Casualty ☒ Life & Health ☐ Health ☐ Other _____

Applicable documents:

☐ The documents referred to in the *General Instructions* to the NAIC Checklist as "Annual Statement Electronic Filing[s]," which include "the annual statement data and all supplements due March 1, per the *Annual Statement Instructions*. This includes all detail investment schedules and other supplements for which the Annual Statement Instructions exempt printed detail." Date of filing with the NAIC: _____ ☐ An original jurat page is attached.

☐ Original filing. ☐ Amended filing.

☐ The documents referred to in the *General Instructions* to the NAIC Checklist as "Risk-Based Capital Electronic Filing," which "includes all risk-based capital data" due March 1. Date of filing with the NAIC: _____ ☐ An original, notarized signature page is attached.

☐ Original filing. ☐ Amended filing.

☐ The documents referred to in the *General Instructions* to the NAIC Checklist as "Supplemental Electronic Filing," which "includes all supplements due April 1, per the *Annual Statement Instructions*." Date of filing with the NAIC: _____ List of supplemental documents included in this Affidavit: _____

☐ All original notarized signature pages are attached, as applicable.

☐ Original filing. ☐ Amended filing.

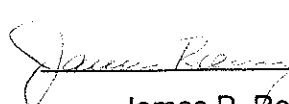
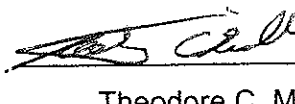

☒ The documents referred to in the *General Instructions* to the NAIC Checklist as "Quarterly Statement Electronic Filing," which "includes the complete quarterly statement data" due May 15, August 15, and November 15. Date of filing with the NAIC: _____

☒ Original filing. ☐ Amended filing.

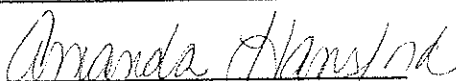
☐ The documents referred to in the *General Instructions* to the NAIC Checklist as "Combined Annual Statement Electronic Filing," which "includes the required pages of the combined annual statement and the combined Insurance Expense Exhibit" due May 1. Date of filing with the NAIC: _____

☐ The documents referred to in the *General Instructions* to the NAIC Checklist as "June. PDF Filing," which includes "the Audited Financial Statements" due June 1. Date of filing with the NAIC: _____

☐ Original filing. ☐ Amended filing.

 Date _____ (Name) <u>James P. Rousey</u> (Title)* <u>President</u>	 Date _____ (Name) <u>Theodore C. Miller</u> (Title)* <u>Secretary/CFO</u>	 Date _____ (Name) <u>Julie A. Abel</u> (Title)* <u>Treasurer</u>
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Notary Public



1D.616566



*Signers must be principal executive officers of the Company (Chairman, President, CEO, CFO, Treasurer, Secretary)

Accredited by the National Association of Insurance Commissioners (NAIC)



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

QUARTERLY STATEMENT

AS OF JUNE 30, 2022
OF THE CONDITION AND AFFAIRS OF THE

Universal Guaranty Life Insurance Company

NAIC Group Code _____ (Current) (Prior) NAIC Company Code 70130 Employer's ID Number 31-0727974

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 11/15/1966 Commenced Business 12/31/1966

Statutory Home Office 65 East State Street, Suite 2100 Columbus, OH, US 43215-4260
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 111 W Main Street
(Street and Number)
Stanford, KY, US 40484-1253
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address PO Box 410 Stanford, KY, US 40484-1253
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 111 W Main Street
(Street and Number)
Stanford, KY, US 40484-1253
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.utgins.com

Statutory Statement Contact Julie Ann Abel 217-241-6344
(Name) (Area Code) (Telephone Number)
accounting@utgins.com 888-686-6567
(E-mail Address) (FAX Number)

OFFICERS

President James Patrick Rousey Treasurer Julie Ann Abel
Secretary Bradley John Betack #

OTHER

Julie Ann Abel, Vice President Jacob Joncani Andrew, Chief Investment Officer Michael Keith Borden, Chief Operating Officer
Jesse Thomas Correll, Chairman & CEO Casey Jonathan Willis, Vice President Donald Shay Pendygraft, Vice President
Theodore Clayton Miller, Senior Vice President & CFO Michael Wayne Taylor, Assistant Vice President Douglas Paul Ditto, Vice President

DIRECTORS OR TRUSTEES

Preston Howard Correll John Michael Cortines Jesse Thomas Correll
Thomas Francis Darden II Howard Lape Dayton Jr Thomas Eugene Hamon
Peter Loyd Ochs James Patrick Rousey Gabriel John Molnar
April Rene Chapman

State of Kentucky SS:
County of Lincoln

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

James Patrick Rousey
James Patrick Rousey
President

Bradley John Betack
Bradley John Betack
Secretary

Julie Ann Abel
Julie Ann Abel
Treasurer

Subscribed and sworn to before me this 11th day of July, 2022
Amanda Hansford

- 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

