



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

## ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2022  
OF THE CONDITION AND AFFAIRS OF THE

### Family Heritage Life Insurance Company of America

NAIC Group Code 0290 0290 NAIC Company Code 77968 Employer's ID Number 34-1626521  
(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 08/22/1989 Commenced Business 11/17/1989

Statutory Home Office 6001 East Royalton Road, Suite 200, Cleveland, OH, US 44147-3529  
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 6001 East Royalton Road, Suite 200  
(Street and Number) Cleveland, OH, US 44147-3529, 440-922-5200  
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

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

Primary Location of Books and Records 3700 South Stonebridge Drive  
(Street and Number) McKinney, TX, US 75070-8080, 469-617-4407  
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address https://home.globelifeinsurance.com/familyheritage

Statutory Statement Contact Brett Turner, 469-617-4407  
(Name) bturner@globe.life, 972-569-3734  
(E-mail Address) (Area Code) (Telephone Number) (FAX Number)

#### OFFICERS

President	<u>Thomas Peter Kalmbach #</u>	Secretary	<u>Joel Patrick Scarborough</u>
Treasurer	<u>Michael Shane Henrie</u>	Appointed Actuary	<u>Hongwei "David" Zhao #</u>

#### OTHER

<u>David Kendall Carlson, Divisional Senior Vice President</u>	<u>David Robert Cochrane, Divisional Senior Vice President</u>	<u>Seamus Fitzpatrick, Division Senior Vice President</u>
<u>Robert Edward Hensley, Divisional Senior Vice President</u>	<u>Tony Michael Martella, Division Senior Vice President</u>	<u>Jeffrey Scott Morris, Divisional Senior Vice President</u>

#### DIRECTORS OR TRUSTEES

<u>Thomas Peter Kalmbach</u>	<u>Joel Patrick Scarborough</u>	<u>Jeffrey Scott Morris</u>
<u>Maria Rose Burnett</u>	<u>Jon Andrew Adams #</u>	<u>Rebecca Evans Zorn #</u>

State of Texas SS  
County of Collin

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.

Thomas Peter Kalmbach  
President

Michael Shane Henrie  
Treasurer

Joel Patrick Scarborough  
Secretary

Subscribed and sworn to before me this  
23rd day of February, 2023

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.....

Michelle Batiste  
Notary Public  
January 12, 2024



**ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF Alabama

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		53,552				53,552
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		53,552	0	0	0	53,552
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....		6,524				6,524
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....		0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....		6,524	0	0	0	6,524
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>				No. of Policies						
20. In force December 31, prior year .....	190	5,435,000	0	(a)	0	0	0	0	190	5,435,000
21. Issued during year .....	32	790,000							32	790,000
22. Other changes to in force (Net) .....	(19)	(670,000)							(19)	(670,000)
23. In force December 31 of current year .....	203	5,555,000	0	(a)	0	0	0	0	203	5,555,000

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

**ACCIDENT AND HEALTH INSURANCE**

		1 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) .....		10,661	10,694		12,640	14,877
24.1 Federal Employees Health Benefits Plan premium (b) .....						
24.2 Credit (Group and Individual) .....						
24.3 Collectively renewable policies/certificates (b) .....						
24.4 Medicare Title XVIII exempt from state taxes or fees						
Other Individual Policies:						
25.1 Non-cancellable (b) .....						
25.2 Guaranteed renewable (b) .....		3,517,222	3,517,992		2,008,449	2,068,436
25.3 Non-renewable for stated reasons only (b) .....						
25.4 Other accident only .....						
25.5 All other (b) .....						
25.6 Totals (sum of Lines 25.1 to 25.5) .....		3,517,222	3,517,992	0	2,008,449	2,068,436
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....		3,527,883	3,528,686	0	2,021,089	2,083,313

(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 2022 OF THE Family Heritage Life Insurance Company of America

DIRECT BUSINESS IN THE STATE OF Alaska

## DURING THE YEAR 2022

NAIC Group Code 0290

NAIC Company Code 77968

## LIFE INSURANCE

NAIC Company Code 77968

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

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 .....										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6)										
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year .....				(a) .....						
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....				(a) .....						

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

## ACCIDENT AND HEALTH INSURANCE

ACCIDENT AND HEALTH INSURANCE					
	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	1,170	1,173			
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) .....	71,798	71,813		18,404	18,841
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) .....	71,798	71,813	0	18,404	18,841
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	72,968	72,986	0	18,404	18,841

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF Arizona

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	102,224					102,224
2. Annuity considerations .....						0
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	102,224	0	0	0	0	102,224
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....	0	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....	25,000					25,000
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....	10,638					10,638
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	0	0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....	35,638	0	0	0	0	35,638
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....	0	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....	0	0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	1	25,000			0	0	0	0	1	25,000
Settled during current year:										
18.1 By payment in full .....	1	25,000							1	25,000
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	1	25,000	0	0	0	0	0	0	1	25,000
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	1	25,000	0	0	0	0	0	0	1	25,000
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	228	7,280,000	0	(a)	0	0	0	0	228	7,280,000
21. Issued during year .....	14	265,000			0	0	0	0	14	265,000
22. Other changes to in force (Net) .....	(17)	(600,000)							(17)	(600,000)
23. In force December 31 of current year .....	225	6,945,000	0	(a)	0	0	0	0	225	6,945,000

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

**ACCIDENT AND HEALTH INSURANCE**

	1 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) .....	19,838	19,897		120	141
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancellable (b) .....					
25.2 Guaranteed renewable (b) .....	6,110,114	6,111,451		1,368,079	1,429,427
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	6,110,114	6,111,451	0	1,368,079	1,429,427
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	6,129,952	6,131,348	0	1,368,199	1,429,568

(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 2022 OF THE Family Heritage Life Insurance Company of America

DIRECT BUSINESS IN THE STATE OF Arkansas

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	401,610					401,610
2. Annuity considerations .....						0
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	401,610	0		0	0	401,610
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....	0	0		0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits .....	50,000					50,000
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....	15,685					15,685
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 .....	65,685	0		0	0	65,685
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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	2	50,000			0	0	0	0	2	50,000
Settled during current year:										
18.1 By payment in full .....	2	50,000							2	50,000
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	2	50,000	0	0	0	0	0	0	2	50,000
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	2	50,000	0	0	0	0	0	0	2	50,000
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	1,519	35,300,000	0	(a)	0	0	0	0	1,519	35,300,000
21. Issued during year .....	338	9,015,000			0	0	0	0	338	9,015,000
22. Other changes to in force (Net) .....	(290)	(7,725,000)							(290)	(7,725,000)
23. In force December 31 of current year .....	1,567	36,590,000	0	(a)	0	0	0	0	1,567	36,590,000

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

**ACCIDENT AND HEALTH INSURANCE**

	1 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) .....	5,096	5,112			
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancellable (b) .....					
25.2 Guaranteed renewable (b) .....	9,873,068	9,875,229		3,047,215	3,141,725
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	9,873,068	9,875,229	0	3,047,215	3,141,725
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	9,878,164	9,880,341	0	3,047,215	3,141,725

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF California

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		71,739				71,739
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		71,739	0	0	0	71,739
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....		8,368				8,368
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 .....		8,368	0	0	0	8,368
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>				No. of Policies						
20. In force December 31, prior year .....	201	6,780,000	0	(a)	0	0	0	0	201	6,780,000
21. Issued during year .....	6	260,000							6	260,000
22. Other changes to in force (Net) .....	(26)	(1,025,000)							(26)	(1,025,000)
23. In force December 31 of current year .....	181	6,015,000	0	(a)	0	0	0	0	181	6,015,000

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

**ACCIDENT AND HEALTH INSURANCE**

		1 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) .....		14,921	14,966		450	530
24.1 Federal Employees Health Benefits Plan premium (b) .....						
24.2 Credit (Group and Individual) .....						
24.3 Collectively renewable policies/certificates (b) .....						
24.4 Medicare Title XVIII exempt from state taxes or fees						
Other Individual Policies:						
25.1 Non-cancellable (b) .....						
25.2 Guaranteed renewable (b) .....		7,962,383	7,964,126		2,632,202	2,829,683
25.3 Non-renewable for stated reasons only (b) .....						
25.4 Other accident only .....						
25.5 All other (b) .....						
25.6 Totals (sum of Lines 25.1 to 25.5) .....		7,962,383	7,964,126	0	2,632,202	2,829,683
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....		7,977,304	7,979,092	0	2,632,652	2,830,213

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF Colorado

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		73,702				73,702
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		73,702	0	0	0	73,702
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....		1,679				1,679
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....		0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....		1,679	0	0	0	1,679
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	237	7,435,000	0	(a)	0	0	0	0	237	7,435,000
21. Issued during year .....	12	405,000							12	405,000
22. Other changes to in force (Net) .....	(27)	(1,060,000)							(27)	(1,060,000)
23. In force December 31 of current year .....	222	6,780,000	0	(a)	0	0	0	0	222	6,780,000

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

**ACCIDENT AND HEALTH INSURANCE**

		1 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) .....		24,464	24,537		120	141
24.1 Federal Employees Health Benefits Plan premium (b) .....						
24.2 Credit (Group and Individual) .....						
24.3 Collectively renewable policies/certificates (b) .....						
24.4 Medicare Title XVIII exempt from state taxes or fees						
Other Individual Policies:						
25.1 Non-cancellable (b) .....						
25.2 Guaranteed renewable (b) .....		10,534,002	10,536,308		2,049,899	2,068,044
25.3 Non-renewable for stated reasons only (b) .....						
25.4 Other accident only .....						
25.5 All other (b) .....						
25.6 Totals (sum of Lines 25.1 to 25.5) .....		10,534,002	10,536,308	0	2,049,899	2,068,044
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....		10,558,466	10,560,845	0	2,050,019	2,068,185

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF Connecticut

DURING THE YEAR 2022

NAIC Group Code 0290

**LIFE INSURANCE**

NAIC Company Code 77968

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

		1 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) .....		732	734			
24.1 Federal Employees Health Benefits Plan premium (b) .....						
24.2 Credit (Group and Individual) .....						
24.3 Collectively renewable policies/certificates (b) .....						
24.4 Medicare Title XVIII exempt from state taxes or fees						
Other Individual Policies:						
25.1 Non-cancellable (b) .....		792	795			
25.2 Guaranteed renewable (b) .....		23,613	23,617		4,800	4,914
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) .....		24,405	24,412	0	4,800	4,914
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....		25,137	25,146	0	4,800	4,914

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF Delaware

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		2,477				2,477
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		2,477	0	0	0	2,477
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....		0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....		0	0	0	0	0
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>				No. of Policies						
20. In force December 31, prior year .....	3	95,000	0	(a)	0	0	0	0	3	95,000
21. Issued during year .....	6	90,000							6	90,000
22. Other changes to in force (Net) .....										0
23. In force December 31 of current year .....	9	185,000	0	(a)	0	0	0	0	9	185,000

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

**ACCIDENT AND HEALTH INSURANCE**

	1 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
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancellable (b) .....					
25.2 Guaranteed renewable (b) .....	510,183	510,295		79,186	81,066
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) .....	510,183	510,295	0	79,186	81,066
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	510,183	510,295	0	79,186	81,066

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF District of Columbia

DURING THE YEAR 2022

NAIC Group Code 0290

**LIFE INSURANCE**

NAIC Company Code 77968

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		192				192
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		192	0	0	0	192
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....		0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....		0	0	0	0	0
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....		0	0	0	0	0

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

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

**ACCIDENT AND HEALTH INSURANCE**

		1 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-cancellable (b) .....						
25.2 Guaranteed renewable (b) .....		27,961	27,967		520	532
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) .....		27,961	27,967	0	520	532
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....		27,961	27,967	0	520	532

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF Florida

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	109,028					109,028
2. Annuity considerations .....						0
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	109,028	0		0	0	109,028
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....	0	0		0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....	1,645					1,645
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....	3,413					3,413
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 .....	5,058	0		0	0	5,058
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....	0	0		0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....	0	0		0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	1	1,645							1	1,645
Settled during current year:										
18.1 By payment in full .....	1	1,645							1	1,645
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	1	1,645	0	0	0	0	0	0	1	1,645
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	1	1,645	0	0	0	0	0	0	1	1,645
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	424	10,660,699	0	(a)	0	0	0	0	424	10,660,699
21. Issued during year .....	45	1,655,000							45	1,655,000
22. Other changes to in force (Net) .....	(83)	(2,535,000)							(83)	(2,535,000)
23. In force December 31 of current year .....	386	9,780,699	0	(a)	0	0	0	0	386	9,780,699

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

**ACCIDENT AND HEALTH INSURANCE**

	1 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) .....	55,720	55,888		3,053	3,593
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancellable (b) .....					
25.2 Guaranteed renewable (b) .....	13,888,812	13,891,851		2,519,169	2,528,886
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) .....	13,888,812	13,891,851	0	2,519,169	2,528,886
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	13,944,532	13,947,739	0	2,522,222	2,532,479

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF Georgia

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	203,948					203,948
2. Annuity considerations .....						0
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	203,948	0		0	0	203,948
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....	0	0		0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....	11,546					11,546
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 .....	11,546	0		0	0	11,546
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....	0	0		0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....	0	0		0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....									0	0
Settled during current year:										
18.1 By payment in full .....									0	0
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	771	18,677,418	0	(a)	0	0	0	0	771	18,677,418
21. Issued during year .....	136	4,720,000							136	4,720,000
22. Other changes to in force (Net) .....	(100)	(2,611,682)							(100)	(2,611,682)
23. In force December 31 of current year .....	807	20,785,736	0	(a)	0	0	0	0	807	20,785,736

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

**ACCIDENT AND HEALTH INSURANCE**

	1 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
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	14,799	14,843			
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) .....	51	51			
25.2 Guaranteed renewable (b) .....	12,776,330	12,779,126		3,950,995	4,046,900
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) .....	12,776,381	12,779,177	0	3,950,995	4,046,900
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	12,791,180	12,794,020	0	3,950,995	4,046,900

(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 2022 OF THE Family Heritage Life Insurance Company of America

DIRECT BUSINESS IN THE STATE OF Hawaii

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		1,199				1,199
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		1,199	0	0	0	1,199
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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT				No. of Policies						
20. In force December 31, prior year .....	5	140,000	0	(a)	0	0	0	0	5	140,000
21. Issued during year .....									0	0
22. Other changes to in force (Net) .....									0	0
23. In force December 31 of current year .....	5	140,000	0	(a)	0	0	0	0	5	140,000

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

**ACCIDENT AND HEALTH INSURANCE**

	1 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-cancellable (b) .....					
25.2 Guaranteed renewable (b) .....	116,647	116,673		22,151	22,677
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) .....	116,647	116,673	0	22,151	22,677
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	116,647	116,673	0	22,151	22,677

(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 2022 OF THE Family Heritage Life Insurance Company of America

DIRECT BUSINESS IN THE STATE OF Idaho

DURING THE YEAR 2022

NAIC Group Code 0290

LIFE INSURANCE

NAIC Company Code 77968

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		3,923				3,923
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		3,923	0	0	0	3,923
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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT				No. of Policies						
20. In force December 31, prior year .....	16	435,000	0	(a)	0	0	0	0	16	435,000
21. Issued during year .....									0	0
22. Other changes to in force (Net) .....									0	0
23. In force December 31 of current year .....	16	435,000	0	(a)	0	0	0	0	16	435,000

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

ACCIDENT AND HEALTH INSURANCE

		1 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) .....		2,709	2,717		2,000	2,354
24.1 Federal Employees Health Benefits Plan premium (b) .....						
24.2 Credit (Group and Individual) .....						
24.3 Collectively renewable policies/certificates (b) .....						
24.4 Medicare Title XVIII exempt from state taxes or fees						
Other Individual Policies:						
25.1 Non-cancellable (b) .....						
25.2 Guaranteed renewable (b) .....		2,204,172	2,204,655		377,123	392,772
25.3 Non-renewable for stated reasons only (b) .....						
25.4 Other accident only .....						
25.5 All other (b) .....						
25.6 Totals (sum of Lines 25.1 to 25.5) .....		2,204,172	2,204,655	0	377,123	392,772
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....		2,206,881	2,207,372	0	379,123	395,126

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF Illinois

DURING THE YEAR 2022

NAIC Group Code 0290

**LIFE INSURANCE**

NAIC Company Code 77968

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	106,438					106,438
2. Annuity considerations .....						0
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	106,438	0		0	0	106,438
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....	0	0		0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....	8,318					8,318
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	0	0		0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....	8,318	0		0	0	8,318
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....	0	0		0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....	0	0		0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....									0	0
Settled during current year:										
18.1 By payment in full .....									0	0
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	351	10,400,000	0	(a)	0	0	0	0	351	10,400,000
21. Issued during year .....	28	900,000							28	900,000
22. Other changes to in force (Net) .....	(42)	(975,000)							(42)	(975,000)
23. In force December 31 of current year .....	337	10,325,000	0	(a)	0	0	0	0	337	10,325,000

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

**ACCIDENT AND HEALTH INSURANCE**

		1 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) .....		8,272,206	8,296,970		748,298	876,261
24.1 Federal Employees Health Benefits Plan premium (b) .....						
24.2 Credit (Group and Individual) .....						
24.3 Collectively renewable policies/certificates (b) .....						
24.4 Medicare Title XVIII exempt from state taxes or fees						
Other Individual Policies:						
25.1 Non-cancellable (b) .....						
25.2 Guaranteed renewable (b) .....		4,824,608	4,825,665		5,374,563	5,488,560
25.3 Non-renewable for stated reasons only (b) .....						
25.4 Other accident only .....						
25.5 All other (b) .....						
25.6 Totals (sum of Lines 25.1 to 25.5) .....		4,824,608	4,825,665	0	5,374,563	5,488,560
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....		13,096,814	13,122,635	0	6,122,861	6,364,821

(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 2022 OF THE Family Heritage Life Insurance Company of America

DIRECT BUSINESS IN THE STATE OF Indiana

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	24,908					24,908
2. Annuity considerations .....						0
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	24,908	0		0	0	24,908
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 .....	166					166
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 .....	166	0		0	0	166
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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....									0	0
Settled during current year:										
18.1 By payment in full .....									0	0
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT				No. of Policies						
20. In force December 31, prior year .....	94	2,420,000	0	(a)	0	0	0	0	94	2,420,000
21. Issued during year .....	17	765,000							17	765,000
22. Other changes to in force (Net) .....	(9)	(265,000)							(9)	(265,000)
23. In force December 31 of current year .....	102	2,920,000	0	(a)	0	0	0	0	102	2,920,000

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

**ACCIDENT AND HEALTH INSURANCE**

		1 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) .....		67,445	67,647		840	989
24.1 Federal Employees Health Benefits Plan premium (b) .....						
24.2 Credit (Group and Individual) .....						
24.3 Collectively renewable policies/certificates (b) .....						
24.4 Medicare Title XVIII exempt from state taxes or fees						
Other Individual Policies:						
25.1 Non-cancellable (b) .....						
25.2 Guaranteed renewable (b) .....		10,746,039	10,748,391		4,714,963	4,915,882
25.3 Non-renewable for stated reasons only (b) .....						
25.4 Other accident only .....						
25.5 All other (b) .....						
25.6 Totals (sum of Lines 25.1 to 25.5) .....		10,746,039	10,748,391	0	4,714,963	4,915,882
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....		10,813,484	10,816,038	0	4,715,803	4,916,871

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF Iowa

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		74,130				74,130
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		74,130	0	0	0	74,130
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....		2,230				2,230
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....		0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....		2,230	0	0	0	2,230
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	275	7,410,000	0	(a)	0	0	0	0	275	7,410,000
21. Issued during year .....	.54	1,495,000							.54	1,495,000
22. Other changes to in force (Net) .....	(24)	(910,000)							(24)	(910,000)
23. In force December 31 of current year .....	305	7,995,000	0	(a)	0	0	0	0	305	7,995,000

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

**ACCIDENT AND HEALTH INSURANCE**

		1 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) .....		10,219,769	10,250,366		933,937	1,121,738
24.1 Federal Employees Health Benefits Plan premium (b) .....						
24.2 Credit (Group and Individual) .....						
24.3 Collectively renewable policies/certificates (b) .....						
24.4 Medicare Title XVIII exempt from state taxes or fees						
Other Individual Policies:						
25.1 Non-cancellable (b) .....						
25.2 Guaranteed renewable (b) .....		813,775	813,953		321,935	323,812
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) .....		813,775	813,953	0	321,935	323,812
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....		11,033,544	11,064,319	0	1,255,872	1,445,550

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF Kansas

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	246,265					246,265
2. Annuity considerations .....						0
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	246,265	0	0	0	0	246,265
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....	0	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....	20,000					20,000
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....	8,680					8,680
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	0	0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....	28,680	0	0	0	0	28,680
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....	0	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....	0	0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	1	20,000			0	0	0	0	1	20,000
Settled during current year:										
18.1 By payment in full .....	1	20,000							1	20,000
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	1	20,000	0	0	0	0	0	0	1	20,000
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	1	20,000	0	0	0	0	0	0	1	20,000
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	709	20,060,000	0	(a)	0	0	0	0	709	20,060,000
21. Issued during year .....	218	5,350,000							218	5,350,000
22. Other changes to in force (Net) .....	(100)	(3,085,000)							(100)	(3,085,000)
23. In force December 31 of current year .....	827	22,325,000	0	(a)	0	0	0	0	827	22,325,000

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

**ACCIDENT AND HEALTH INSURANCE**

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	13,552	13,593		90	106
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancellable (b) .....					
25.2 Guaranteed renewable (b) .....	12,090,234	12,092,881		2,492,579	2,627,537
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) .....	12,090,234	12,092,881	0	2,492,579	2,627,537
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	12,103,786	12,106,474	0	2,492,669	2,627,643

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF Kentucky

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	262,032					262,032
2. Annuity considerations .....						0
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	262,032	0		0	0	262,032
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....	0	0		0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....	25,000					25,000
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....	5,177					5,177
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 .....	30,177	0		0	0	30,177
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....	0	0		0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....	0	0		0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	1	25,000			0	0	0	0	1	25,000
Settled during current year:										
18.1 By payment in full .....	1	25,000							1	25,000
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	1	25,000	0	0	0	0	0	0	1	25,000
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	1	25,000	0	0	0	0	0	0	1	25,000
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	879	21,792,287	0	(a)	0	0	0	0	879	21,792,287
21. Issued during year .....	216	5,780,000							216	5,780,000
22. Other changes to in force (Net) .....	(100)	(2,810,000)							(100)	(2,810,000)
23. In force December 31 of current year .....	995	24,762,287	0	(a)	0	0	0	0	995	24,762,287

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

**ACCIDENT AND HEALTH INSURANCE**

	1 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) .....	12,636	12,674		40	47
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancellable (b) .....					
25.2 Guaranteed renewable (b) .....	9,193,740	9,195,752		1,938,063	2,104,482
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	9,193,740	9,195,752	0	1,938,063	2,104,482
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	9,206,376	9,208,426	0	1,938,103	2,104,529

(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 2022 OF THE Family Heritage Life Insurance Company of America

DIRECT BUSINESS IN THE STATE OF Louisiana

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		85,786				85,786
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		85,786	0	0	0	85,786
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits .....		25,000				25,000
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....		544				544
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....		0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....		25,544	0	0	0	25,544
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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	1	25,000			0	0	0	0	1	25,000
Settled during current year:										
18.1 By payment in full .....	1	25,000							1	25,000
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	1	25,000	0	0	0	0	0	0	1	25,000
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	1	25,000	0	0	0	0	0	0	1	25,000
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	245	7,065,000	0	(a)	0	0	0	0	245	7,065,000
21. Issued during year .....	187	4,890,000							187	4,890,000
22. Other changes to in force (Net) .....	(77)	(2,325,000)							(77)	(2,325,000)
23. In force December 31 of current year .....	355	9,630,000	0	(a)	0	0	0	0	355	9,630,000

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

**ACCIDENT AND HEALTH INSURANCE**

	1 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) .....	3,679	3,690			
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancellable (b) .....					
25.2 Guaranteed renewable (b) .....	9,174,675	9,176,684		2,277,807	2,360,374
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	9,174,675	9,176,684	0	2,277,807	2,360,374
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	9,178,354	9,180,374	0	2,277,807	2,360,374

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



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America

DIRECT BUSINESS IN THE STATE OF Maine

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		10,286				10,286
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		10,286	0	0	0	10,286
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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT				No. of Policies						
20. In force December 31, prior year .....	9	455,000	0	(a)	0	0	0	0	9	455,000
21. Issued during year .....									0	0
22. Other changes to in force (Net) .....	(1)	(50,000)							(1)	(50,000)
23. In force December 31 of current year .....	8	405,000	0	(a)	0	0	0	0	8	405,000

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

**ACCIDENT AND HEALTH INSURANCE**

	1 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
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	2,368	2,375			
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) .....	468	470			
25.2 Guaranteed renewable (b) .....	623,313	623,450		468,892	458,310
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) .....	623,781	623,920	0	468,892	458,310
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	626,149	626,295	0	468,892	458,310

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF Maryland

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		37,644				37,644
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		37,644	0	0	0	37,644
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....		1,266				1,266
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....		0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....		1,266	0	0	0	1,266
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>				No. of Policies						
20. In force December 31, prior year .....	78	2,280,745	0	(a)	0	0	0	0	78	2,280,745
21. Issued during year .....	120	5,160,000							120	5,160,000
22. Other changes to in force (Net) .....	(84)	(3,324,008)							(84)	(3,324,008)
23. In force December 31 of current year .....	114	4,116,737	0	(a)	0	0	0	0	114	4,116,737

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

**ACCIDENT AND HEALTH INSURANCE**

		1 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) .....		2,184	2,191			
24.1 Federal Employees Health Benefits Plan premium (b) .....						
24.2 Credit (Group and Individual) .....						
24.3 Collectively renewable policies/certificates (b) .....						
24.4 Medicare Title XVIII exempt from state taxes or fees						
Other Individual Policies:						
25.1 Non-cancellable (b) .....						
25.2 Guaranteed renewable (b) .....		1,882,201	1,882,613		380,489	375,947
25.3 Non-renewable for stated reasons only (b) .....						
25.4 Other accident only .....						
25.5 All other (b) .....						
25.6 Totals (sum of Lines 25.1 to 25.5) .....		1,882,201	1,882,613	0	380,489	375,947
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....		1,884,385	1,884,804	0	380,489	375,947

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF Massachusetts

DURING THE YEAR 2022

NAIC Group Code 0290

**LIFE INSURANCE**

NAIC Company Code 77968

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

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

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

**ACCIDENT AND HEALTH INSURANCE**

		1 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) .....		1,372	1,376			
24.1 Federal Employees Health Benefits Plan premium (b) .....						
24.2 Credit (Group and Individual) .....						
24.3 Collectively renewable policies/certificates (b) .....						
24.4 Medicare Title XVIII exempt from state taxes or fees						
Other Individual Policies:						
25.1 Non-cancellable (b) .....						
25.2 Guaranteed renewable (b) .....		30,570	30,576		31,777	32,531
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) .....		30,570	30,576	0	31,777	32,531
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....		31,942	31,952	0	31,777	32,531

(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 2022 OF THE Family Heritage Life Insurance Company of America

DIRECT BUSINESS IN THE STATE OF Michigan

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		16,676				16,676
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		16,676	0	0	0	16,676
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....		1,895				1,895
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....		0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....		1,895	0	0	0	1,895
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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	21	515,000	0	(a)	0	0	0	0	21	515,000
21. Issued during year .....	19	550,000							19	550,000
22. Other changes to in force (Net) .....	(3)	(100,000)							(3)	(100,000)
23. In force December 31 of current year .....	37	965,000	0	(a)	0	0	0	0	37	965,000

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

**ACCIDENT AND HEALTH INSURANCE**

		1 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) .....		9,929	9,959		80	94
24.1 Federal Employees Health Benefits Plan premium (b) .....						
24.2 Credit (Group and Individual) .....						
24.3 Collectively renewable policies/certificates (b) .....						
24.4 Medicare Title XVIII exempt from state taxes or fees						
Other Individual Policies:						
25.1 Non-cancellable (b) .....						
25.2 Guaranteed renewable (b) .....		3,372,525	3,373,262		656,071	662,887
25.3 Non-renewable for stated reasons only (b) .....						
25.4 Other accident only .....						
25.5 All other (b) .....						
25.6 Totals (sum of Lines 25.1 to 25.5) .....		3,372,525	3,373,262	0	656,071	662,887
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....		3,382,454	3,383,221	0	656,151	662,981

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF Minnesota

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		72,237				72,237
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		72,237	0	0	0	72,237
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....		966				966
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 .....		966	0	0	0	966
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>				No. of Policies						
20. In force December 31, prior year .....	205	6,280,000	0	(a)	0	0	0	0	205	6,280,000
21. Issued during year .....	25	900,000							25	900,000
22. Other changes to in force (Net) .....	(21)	(750,000)							(21)	(750,000)
23. In force December 31 of current year .....	209	6,430,000	0	(a)	0	0	0	0	209	6,430,000

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

**ACCIDENT AND HEALTH INSURANCE**

		1 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) .....		33,378	33,477		50	59
24.1 Federal Employees Health Benefits Plan premium (b) .....						
24.2 Credit (Group and Individual) .....						
24.3 Collectively renewable policies/certificates (b) .....						
24.4 Medicare Title XVIII exempt from state taxes or fees						
Other Individual Policies:						
25.1 Non-cancellable (b) .....						
25.2 Guaranteed renewable (b) .....		19,367,798	19,372,036		2,853,447	2,925,742
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) .....		19,367,798	19,372,036	0	2,853,447	2,925,742
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....		19,401,176	19,405,513	0	2,853,497	2,925,801

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF Mississippi

DURING THE YEAR 2022

NAIC Group Code 0290

**LIFE INSURANCE**

NAIC Company Code 77968

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	26,139					26,139
2. Annuity considerations .....						0
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	26,139	0		0	0	26,139
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....	0	0		0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....	842					842
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 .....	842	0		0	0	842
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....	0	0		0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....	0	0		0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....									0	0
Settled during current year:										
18.1 By payment in full .....									0	0
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	88	2,450,000	0	(a)	0	0	0	0	88	2,450,000
21. Issued during year .....	16	425,000							16	425,000
22. Other changes to in force (Net) .....	(16)	(525,000)							(16)	(525,000)
23. In force December 31 of current year .....	88	2,350,000	0	(a)	0	0	0	0	88	2,350,000

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

**ACCIDENT AND HEALTH INSURANCE**

		1 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) .....		3,363	3,374			
24.1 Federal Employees Health Benefits Plan premium (b) .....						
24.2 Credit (Group and Individual) .....						
24.3 Collectively renewable policies/certificates (b) .....						
24.4 Medicare Title XVIII exempt from state taxes or fees						
Other Individual Policies:						
25.1 Non-cancellable (b) .....						
25.2 Guaranteed renewable (b) .....	1,389,515	1,389,818		565,833		634,444
25.3 Non-renewable for stated reasons only (b) .....						
25.4 Other accident only .....						
25.5 All other (b) .....						
25.6 Totals (sum of Lines 25.1 to 25.5) .....	1,389,515	1,389,818	0	565,833		634,444
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	1,392,878	1,393,192	0	565,833		634,444

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF Missouri

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	150,779					150,779
2. Annuity considerations .....						0
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	150,779	0		0	0	150,779
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....	0	0		0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....	50,000					50,000
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....	13,808					13,808
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 .....	63,808	0		0	0	63,808
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....	0	0		0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....	0	0		0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	1	50,000			0	0	0	0	1	50,000
Settled during current year:										
18.1 By payment in full .....	1	50,000							1	50,000
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	1	50,000	0	0	0	0	0	0	1	50,000
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	1	50,000	0	0	0	0	0	0	1	50,000
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	397	12,625,000	0	(a)	0	0	0	0	397	12,625,000
21. Issued during year .....	158	4,025,000							158	4,025,000
22. Other changes to in force (Net) .....	(59)	(1,795,000)							(59)	(1,795,000)
23. In force December 31 of current year .....	496	14,855,000	0	(a)	0	0	0	0	496	14,855,000

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

**ACCIDENT AND HEALTH INSURANCE**

	1 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) .....	76,470	76,699		8,869	10,438
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancellable (b) .....					
25.2 Guaranteed renewable (b) .....	11,132,591	11,135,027		2,315,486	2,308,816
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	11,132,591	11,135,027	0	2,315,486	2,308,816
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	11,209,061	11,211,726	0	2,324,355	2,319,254

(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 2022 OF THE Family Heritage Life Insurance Company of America

DIRECT BUSINESS IN THE STATE OF Montana

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		23,243				23,243
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		23,243	0	0	0	23,243
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 .....		4,289				4,289
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....		0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....		4,289	0	0	0	4,289
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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT				No. of Policies						
20. In force December 31, prior year .....	24	1,575,000	0	(a)	0	0	0	0	24	1,575,000
21. Issued during year .....	2	175,000							2	175,000
22. Other changes to in force (Net) .....	(3)	(225,000)							(3)	(225,000)
23. In force December 31 of current year .....	23	1,525,000	0	(a)	0	0	0	0	23	1,525,000

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	4	5
				Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancellable (b) .....					
25.2 Guaranteed renewable (b) .....	4,745,208	4,746,246		608,724	605,220
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	4,745,208	4,746,246	0	608,724	605,220
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	4,745,208	4,746,246	0	608,724	605,220

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF Nebraska

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		39,627				39,627
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		39,627	0	0	0	39,627
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....		13				13
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....		0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....		13	0	0	0	13
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>				No. of Policies						
20. In force December 31, prior year .....	98	3,455,000	0	(a)	0	0	0	0	98	3,455,000
21. Issued during year .....	14	495,000							14	495,000
22. Other changes to in force (Net) .....	(3)	(220,000)							(3)	(220,000)
23. In force December 31 of current year .....	109	3,730,000	0	(a)	0	0	0	0	109	3,730,000

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

**ACCIDENT AND HEALTH INSURANCE**

		1 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) .....		189,129	189,695		14,699	17,300
24.1 Federal Employees Health Benefits Plan premium (b) .....						
24.2 Credit (Group and Individual) .....						
24.3 Collectively renewable policies/certificates (b) .....						
24.4 Medicare Title XVIII exempt from state taxes or fees						
Other Individual Policies:						
25.1 Non-cancellable (b) .....						
25.2 Guaranteed renewable (b) .....		11,623,365	11,625,909		4,552,127	4,647,189
25.3 Non-renewable for stated reasons only (b) .....						
25.4 Other accident only .....						
25.5 All other (b) .....						
25.6 Totals (sum of Lines 25.1 to 25.5) .....		11,623,365	11,625,909	0	4,552,127	4,647,189
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....		11,812,494	11,815,604	0	4,566,826	4,664,489

(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 2022 OF THE Family Heritage Life Insurance Company of America

DIRECT BUSINESS IN THE STATE OF Nevada

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		15,966				15,966
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		15,966	0	0	0	15,966
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 .....		43				43
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....		0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....		43	0	0	0	43
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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	32	1,485,000	0	(a)	0	0	0	0	32	1,485,000
21. Issued during year .....	2	130,000							2	130,000
22. Other changes to in force (Net) .....	(1)	35,000							(1)	35,000
23. In force December 31 of current year .....	33	1,650,000	0	(a)	0	0	0	0	33	1,650,000

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

**ACCIDENT AND HEALTH INSURANCE**

		1 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) .....		2,154	2,160			
24.1 Federal Employees Health Benefits Plan premium (b) .....						
24.2 Credit (Group and Individual) .....						
24.3 Collectively renewable policies/certificates (b) .....						
24.4 Medicare Title XVIII exempt from state taxes or fees						
Other Individual Policies:						
25.1 Non-cancellable (b) .....						
25.2 Guaranteed renewable (b) .....		1,851,961	1,852,366		419,771	436,822
25.3 Non-renewable for stated reasons only (b) .....						
25.4 Other accident only .....						
25.5 All other (b) .....						
25.6 Totals (sum of Lines 25.1 to 25.5) .....		1,851,961	1,852,366	0	419,771	436,822
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....		1,854,115	1,854,526	0	419,771	436,822

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF New Hampshire

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		8,662				8,662
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		8,662	0	0	0	8,662
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....		3,267				3,267
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....		0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....		3,267	0	0	0	3,267
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	10	420,000	0	(a)	0	0	0	0	10	420,000
21. Issued during year .....									0	0
22. Other changes to in force (Net) .....	(1)	(75,000)							(1)	(75,000)
23. In force December 31 of current year .....	9	345,000	0	(a)	0	0	0	0	9	345,000

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

**ACCIDENT AND HEALTH INSURANCE**

		1 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) .....		720	722			
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) .....		247,404	248,425		46,298	39,913
25.2 Guaranteed renewable (b) .....		188,121	188,162		38,976	49,441
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) .....		435,525	436,587	0	85,274	89,354
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....		436,245	437,309	0	85,274	89,354

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF New Jersey

DURING THE YEAR 2022

NAIC Group Code 0290

**LIFE INSURANCE**

NAIC Company Code 77968

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		1,530				1,530
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		1,530	0	0	0	1,530
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....		0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....		0	0	0	0	0
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	4	275,000	0	(a)	0	0	0	0	4	275,000
21. Issued during year .....									0	0
22. Other changes to in force (Net) .....	1	30,000							1	30,000
23. In force December 31 of current year .....	5	305,000	0	(a)	0	0	0	0	5	305,000

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

**ACCIDENT AND HEALTH INSURANCE**

		1 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) .....		2,402	2,409			
24.1 Federal Employees Health Benefits Plan premium (b) .....						
24.2 Credit (Group and Individual) .....						
24.3 Collectively renewable policies/certificates (b) .....						
24.4 Medicare Title XVIII exempt from state taxes or fees						
Other Individual Policies:						
25.1 Non-cancellable (b) .....						
25.2 Guaranteed renewable (b) .....		184,289	184,329		162	166
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) .....		184,289	184,329	0	162	166
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....		186,691	186,738	0	162	166

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2022

NAIC Group Code 0290

**LIFE INSURANCE**

NAIC Company Code 77968

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	31,531					31,531
2. Annuity considerations .....						0
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	31,531	0	0	0	0	31,531
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....	0	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....	100,000					100,000
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	0	0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....	100,000	0	0	0	0	100,000
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....	0	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....	0	0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	1	100,000			0	0	0	0	1	100,000
Settled during current year:										
18.1 By payment in full .....	1	100,000							1	100,000
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	1	100,000	0	0	0	0	0	0	1	100,000
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	1	100,000	0	0	0	0	0	0	1	100,000
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	98	2,970,000	0	(a)	0	0	0	0	98	2,970,000
21. Issued during year .....	25	540,000			0	0	0	0	25	540,000
22. Other changes to in force (Net) .....	(18)	(545,000)							(18)	(545,000)
23. In force December 31 of current year .....	105	2,965,000	0	(a)	0	0	0	0	105	2,965,000

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

**ACCIDENT AND HEALTH INSURANCE**

	1 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) .....	5,750	5,767		72	85
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancellable (b) .....					
25.2 Guaranteed renewable (b) .....	1,920,629	1,921,049		610,419	652,376
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	1,920,629	1,921,049	0	610,419	652,376
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	1,926,379	1,926,816	0	610,491	652,461

(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 2022 OF THE Family Heritage Life Insurance Company of America

DIRECT BUSINESS IN THE STATE OF New York

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

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

**NONE**

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 .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....			(a) .....							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a) .....							

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

**ACCIDENT AND HEALTH INSURANCE**

	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 fee Other Individual Policies:					
25.1 Non-cancellable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



**ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF North Carolina

DURING THE YEAR 2022

NAIC Group Code 0290

**LIFE INSURANCE**

NAIC Company Code 77968

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	162,431					162,431
2. Annuity considerations .....						0
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	162,431	0	0	0	0	162,431
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....	0	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....	25,000					25,000
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....	14,480					14,480
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	0	0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....	39,480	0	0	0	0	39,480
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....	0	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....	0	0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	1	25,000			0	0	0	0	1	25,000
Settled during current year:										
18.1 By payment in full .....	1	25,000							1	25,000
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	1	25,000	0	0	0	0	0	0	1	25,000
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	1	25,000	0	0	0	0	0	0	1	25,000
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	596	15,365,000	0	(a)	0	0	0	0	596	15,365,000
21. Issued during year .....	.87	2,480,000							.87	2,480,000
22. Other changes to in force (Net) .....	(83)	(2,500,000)							(83)	(2,500,000)
23. In force December 31 of current year .....	600	15,345,000	0	(a)	0	0	0	0	600	15,345,000

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

**ACCIDENT AND HEALTH INSURANCE**

	1 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
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	5,877	5,895			
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) .....	14,148,252	14,151,349		6,431,563	6,466,362
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	14,148,252	14,151,349	0	6,431,563	6,466,362
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	14,154,129	14,157,244	0	6,431,563	6,466,362

(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 2022 OF THE Family Heritage Life Insurance Company of America

DIRECT BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2022

NAIC Group Code 0290

**LIFE INSURANCE**

NAIC Company Code 77968

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		11,637				11,637
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		11,637	0	0	0	11,637
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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT				No. of Policies						
20. In force December 31, prior year .....	39	1,235,000	0	(a)	0	0	0	0	39	1,235,000
21. Issued during year .....	7	170,000					0	0	7	170,000
22. Other changes to in force (Net) .....		(100,000)							0	(100,000)
23. In force December 31 of current year .....	46	1,305,000	0	(a)	0	0	0	0	46	1,305,000

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

**ACCIDENT AND HEALTH INSURANCE**

	1 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-cancellable (b) .....					
25.2 Guaranteed renewable (b) .....	3,730,599	3,731,417		850,101	872,423
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	3,730,599	3,731,417	0	850,101	872,423
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	3,730,599	3,731,417	0	850,101	872,423

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF Ohio

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	125,217					125,217
2. Annuity considerations .....						0
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	125,217	0		0	0	125,217
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....	0	0		0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....	24,532					24,532
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....	1,398					1,398
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	0	0		0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....	25,930	0		0	0	25,930
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....	0	0		0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....	0	0		0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	6	24,532							6	24,532
Settled during current year:										
18.1 By payment in full .....	6	24,532							6	24,532
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	6	24,532	0	0	0	0	0	0	6	24,532
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	6	24,532	0	0	0	0	0	0	6	24,532
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	305	9,402,868	0	(a)	0	0	0	0	305	9,402,868
21. Issued during year .....	87	1,850,000							87	1,850,000
22. Other changes to in force (Net) .....	(15)	(386,177)							(15)	(386,177)
23. In force December 31 of current year .....	377	10,866,691	0	(a)	0	0	0	0	377	10,866,691

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

**ACCIDENT AND HEALTH INSURANCE**

	1 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) .....	9,895	9,920		450	530
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) .....	188	189			
25.2 Guaranteed renewable (b) .....	23,474,524	23,479,665		16,401,075	17,033,860
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) .....	23,474,712	23,479,854	0	16,401,075	17,033,860
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	23,484,607	23,489,774	0	16,401,525	17,034,390

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF Oklahoma

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		96,701				96,701
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		96,701	0	0	0	96,701
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....		3,131				3,131
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....		0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....		3,131	0	0	0	3,131
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	316	8,830,000	0	(a)	0	0	0	0	316	8,830,000
21. Issued during year .....	39	1,495,000							39	1,495,000
22. Other changes to in force (Net) .....	(56)	(1,750,000)							(56)	(1,750,000)
23. In force December 31 of current year .....	299	8,575,000	0	(a)	0	0	0	0	299	8,575,000

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

**ACCIDENT AND HEALTH INSURANCE**

		1 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) .....		7,289	7,311			
24.1 Federal Employees Health Benefits Plan premium (b) .....						
24.2 Credit (Group and Individual) .....						
24.3 Collectively renewable policies/certificates (b) .....						
24.4 Medicare Title XVIII exempt from state taxes or fees						
Other Individual Policies:						
25.1 Non-cancellable (b) .....						
25.2 Guaranteed renewable (b) .....		5,414,450	5,415,635		1,233,935	1,366,641
25.3 Non-renewable for stated reasons only (b) .....						
25.4 Other accident only .....						
25.5 All other (b) .....						
25.6 Totals (sum of Lines 25.1 to 25.5) .....		5,414,450	5,415,635	0	1,233,935	1,366,641
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....		5,421,739	5,422,946	0	1,233,935	1,366,641

(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 2022 OF THE Family Heritage Life Insurance Company of America

DIRECT BUSINESS IN THE STATE OF Oregon

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		8,132				8,132
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		8,132	0	0	0	8,132
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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	30	680,000	0	(a)	0	0	0	0	30	680,000
21. Issued during year .....									0	0
22. Other changes to in force (Net) .....	(2)	(70,000)							(2)	(70,000)
23. In force December 31 of current year .....	28	610,000	0	(a)	0	0	0	0	28	610,000

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

**ACCIDENT AND HEALTH INSURANCE**

	1 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
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	360	361			
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancellable (b) .....					
25.2 Guaranteed renewable (b) .....	2,091,651	2,092,108		526,318	539,291
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	2,091,651	2,092,108	0	526,318	539,291
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	2,092,011	2,092,469	0	526,318	539,291

(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 2022 OF THE Family Heritage Life Insurance Company of America

DIRECT BUSINESS IN THE STATE OF Pennsylvania

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		34,105				34,105
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		34,105	0	0	0	34,105
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 .....		56				56
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 .....		56	0	0	0	56
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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT				No. of Policies						
20. In force December 31, prior year .....	69	1,670,000	0	(a)	0	0	0	0	69	1,670,000
21. Issued during year .....	53	1,180,000							53	1,180,000
22. Other changes to in force (Net) .....	2	145,000							2	145,000
23. In force December 31 of current year .....	124	2,995,000	0	(a)	0	0	0	0	124	2,995,000

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

**ACCIDENT AND HEALTH INSURANCE**

		1 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) .....		5,468	5,485			
24.1 Federal Employees Health Benefits Plan premium (b) .....						
24.2 Credit (Group and Individual) .....						
24.3 Collectively renewable policies/certificates (b) .....						
24.4 Medicare Title XVIII exempt from state taxes or fees						
Other Individual Policies:						
25.1 Non-cancellable (b) .....						
25.2 Guaranteed renewable (b) .....		3,176,379	3,177,075		997,396	1,044,101
25.3 Non-renewable for stated reasons only (b) .....						
25.4 Other accident only .....						
25.5 All other (b) .....						
25.6 Totals (sum of Lines 25.1 to 25.5) .....		3,176,379	3,177,075	0	997,396	1,044,101
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....		3,181,847	3,182,560	0	997,396	1,044,101

(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 2022 OF THE Family Heritage Life Insurance Company of America

DIRECT BUSINESS IN THE STATE OF Rhode Island

## DURING THE YEAR 2022

NAIC Group Code 0290

NAIC Company Code 77968

## LIFE INSURANCE

NAIC Company Code 77968

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....						
2. Annuity considerations .....						
3. Deposit-type contract funds .....			XXX			
4. Other considerations .....					XXX	
5. Totals (Sum of Lines 1 to 4)						
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						
6.2 Applied to pay renewal premiums .....						
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						
6.4 Other .....						
6.5 Totals (Sum of Lines 6.1 to 6.4)						
Annuities:						
7.1 Paid in cash or left on deposit .....						
7.2 Applied to provide paid-up annuities .....						
7.3 Other .....						
7.4 Totals (Sum of Lines 7.1 to 7.3)						
8. Grand Totals (Lines 6.5 plus 7.4)						
<b>DIRECT CLAIMS AND BENEFITS PAID</b>		<b>NONE</b>				
9. Death benefits .....						
10. Matured endowments .....						
11. Annuity benefits .....						
12. Surrender values and withdrawals for life contracts .....						
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....						
14. All other benefits, except accident and health .....						
15. Totals						
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....						
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)						

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 .....										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6)										
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year .....				(a) .....						
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....				(a) .....						

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

## ACCIDENT AND HEALTH INSURANCE

ACCIDENT AND HEALTH INSURANCE					
	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	436	438			
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b) .....	372	374			
25.2 Guaranteed renewable (b) .....	46,891	46,901		86,147	88,192
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) .....	47,263	47,275	0	86,147	88,192
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	47,699	47,713	0	86,147	88,192

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF South Carolina

DURING THE YEAR 2022

NAIC Group Code 0290

**LIFE INSURANCE**

NAIC Company Code 77968

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	121,643					121,643
2. Annuity considerations .....						0
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	121,643	0		0	0	121,643
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....	0	0		0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....	25,000					25,000
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....	4,525					4,525
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 .....	29,525	0		0	0	29,525
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....	0	0		0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....	0	0		0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	1	25,000			0	0	0	0	1	25,000
Settled during current year:										
18.1 By payment in full .....	1	25,000							1	25,000
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	1	25,000	0	0	0	0	0	0	1	25,000
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	1	25,000	0	0	0	0	0	0	1	25,000
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	359	9,300,000	0	(a)	0	0	0	0	359	9,300,000
21. Issued during year .....	.84	2,385,000							.84	2,385,000
22. Other changes to in force (Net) .....	(56)	(1,885,427)							(56)	(1,885,427)
23. In force December 31 of current year .....	387	9,799,573	0	(a)	0	0	0	0	387	9,799,573

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

**ACCIDENT AND HEALTH INSURANCE**

	1 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
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	5,533	5,549		280	330
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancellable (b) .....					
25.2 Guaranteed renewable (b) .....	4,580,145	4,581,147		1,582,696	1,555,519
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	4,580,145	4,581,147	0	1,582,696	1,555,519
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	4,585,678	4,586,696	0	1,582,976	1,555,849

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



**ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF South Dakota

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		16,369				16,369
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		16,369	0	0	0	16,369
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....		90				90
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 .....		90	0	0	0	90
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>				No. of Policies						
20. In force December 31, prior year .....	.42	1,620,000	0	(a)	0	0	0	0	.42	1,620,000
21. Issued during year .....	1	50,000							1	50,000
22. Other changes to in force (Net) .....	(3)	(200,000)							(3)	(200,000)
23. In force December 31 of current year .....	40	1,470,000	0	(a)	0	0	0	0	40	1,470,000

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

**ACCIDENT AND HEALTH INSURANCE**

		1 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) .....		21,823	21,889			
24.1 Federal Employees Health Benefits Plan premium (b) .....						
24.2 Credit (Group and Individual) .....						
24.3 Collectively renewable policies/certificates (b) .....						
24.4 Medicare Title XVIII exempt from state taxes or fees						
Other Individual Policies:						
25.1 Non-cancellable (b) .....						
25.2 Guaranteed renewable (b) .....		7,803,348	7,805,057		5,492,904	5,541,510
25.3 Non-renewable for stated reasons only (b) .....						
25.4 Other accident only .....						
25.5 All other (b) .....						
25.6 Totals (sum of Lines 25.1 to 25.5) .....		7,803,348	7,805,057	0	5,492,904	5,541,510
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....		7,825,171	7,826,946	0	5,492,904	5,541,510

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2022

NAIC Group Code 0290

**LIFE INSURANCE**

NAIC Company Code 77968

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	148,223					148,223
2. Annuity considerations .....						0
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	148,223	0		0	0	148,223
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....	0	0		0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....	55,000					55,000
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....	15,559					15,559
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 .....	70,559	0		0	0	70,559
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....	0	0		0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....	0	0		0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	3	55,000			0	0	0	0	3	55,000
Settled during current year:										
18.1 By payment in full .....	3	55,000							3	55,000
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	3	55,000	0	0	0	0	0	0	3	55,000
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	3	55,000	0	0	0	0	0	0	3	55,000
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	301	10,420,000	0	(a)	0	0	0	0	301	10,420,000
21. Issued during year .....	18	500,000			0	0	0	0	18	500,000
22. Other changes to in force (Net) .....		(620,000)							0	(620,000)
23. In force December 31 of current year .....	319	10,300,000	0	(a)	0	0	0	0	319	10,300,000

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

**ACCIDENT AND HEALTH INSURANCE**

		1 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) .....		22,381	22,449		26,414	31,088
24.1 Federal Employees Health Benefits Plan premium (b) .....						
24.2 Credit (Group and Individual) .....						
24.3 Collectively renewable policies/certificates (b) .....						
24.4 Medicare Title XVIII exempt from state taxes or fees						
Other Individual Policies:						
25.1 Non-cancellable (b) .....						
25.2 Guaranteed renewable (b) .....		7,978,323	7,980,069		2,842,057	2,820,049
25.3 Non-renewable for stated reasons only (b) .....						
25.4 Other accident only .....						
25.5 All other (b) .....						
25.6 Totals (sum of Lines 25.1 to 25.5) .....		7,978,323	7,980,069	0	2,842,057	2,820,049
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....		8,000,704	8,002,518	0	2,868,471	2,851,137

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2022

NAIC Group Code 0290

**LIFE INSURANCE**

NAIC Company Code 77968

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	2,346,019					2,346,019
2. Annuity considerations .....						0
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	2,346,019	0		0	0	2,346,019
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....	0	0		0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....	637,000					637,000
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....	156,621					156,621
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 .....	793,621	0		0	0	793,621
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....	0	0		0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....	0	0		0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	11	637,000							11	637,000
Settled during current year:										
18.1 By payment in full .....	11	637,000							11	637,000
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	11	637,000	0	0	0	0	0	0	11	637,000
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	11	637,000	0	0	0	0	0	0	11	637,000
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	7,273	208,653,000	0	(a)	0	0	0	0	7,273	208,653,000
21. Issued during year .....	1,530	41,835,000							1,530	41,835,000
22. Other changes to in force (Net) .....	(1,500)	(42,802,000)							(1,500)	(42,802,000)
23. In force December 31 of current year .....	7,303	207,686,000	0	(a)	0	0	0	0	7,303	207,686,000

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

**ACCIDENT AND HEALTH INSURANCE**

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	38,273	38,388		3,442	4,051
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancellable (b) .....					
25.2 Guaranteed renewable (b) .....	71,857,245	71,872,973		21,471,506	22,111,181
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) .....	71,857,245	71,872,973	0	21,471,506	22,111,181
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	71,895,518	71,911,361	0	21,474,948	22,115,232

(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 2022 OF THE Family Heritage Life Insurance Company of America

DIRECT BUSINESS IN THE STATE OF Utah

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		4,379				4,379
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		4,379	0	0	0	4,379
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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	4	175,000	0	(a)	0	0	0	0	4	175,000
21. Issued during year .....	5	110,000							5	110,000
22. Other changes to in force (Net) .....	(1)	(30,000)							(1)	(30,000)
23. In force December 31 of current year .....	8	255,000	0	(a)	0	0	0	0	8	255,000

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

**ACCIDENT AND HEALTH INSURANCE**

	1 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
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....	907	910			
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancellable (b) .....					
25.2 Guaranteed renewable (b) .....	6,965,881	6,967,406		1,086,110	1,109,016
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	6,965,881	6,967,406	0	1,086,110	1,109,016
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	6,966,788	6,968,316	0	1,086,110	1,109,016

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF Vermont

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		469				469
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		469	0	0	0	469
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....		0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....		0	0	0	0	0
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>				No. of Policies						
20. In force December 31, prior year .....	1	75,000	0	(a)	0	0	0	0	1	75,000
21. Issued during year .....									0	0
22. Other changes to in force (Net) .....									0	0
23. In force December 31 of current year .....	1	75,000	0	(a)	0	0	0	0	1	75,000

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

**ACCIDENT AND HEALTH INSURANCE**

		1 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) .....		420	421			
24.1 Federal Employees Health Benefits Plan premium (b) .....						
24.2 Credit (Group and Individual) .....						
24.3 Collectively renewable policies/certificates (b) .....						
24.4 Medicare Title XVIII exempt from state taxes or fees						
Other Individual Policies:						
25.1 Non-cancellable (b) .....						
25.2 Guaranteed renewable (b) .....		42,135	42,144		9,920	10,156
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) .....		42,135	42,144	0	9,920	10,156
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....		42,555	42,565	0	9,920	10,156

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF Virginia

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		90,444				90,444
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		90,444	0	0	0	90,444
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....		18,170				18,170
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....		11,715				11,715
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 .....		29,885	0	0	0	29,885
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	2	18,170							2	18,170
Settled during current year:										
18.1 By payment in full .....	2	18,170							2	18,170
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	2	18,170	0	0	0	0	0	0	2	18,170
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	2	18,170	0	0	0	0	0	0	2	18,170
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	310	6,413,063	0	(a)	0	0	0	0	310	6,413,063
21. Issued during year .....	.59	1,960,000							.59	1,960,000
22. Other changes to in force (Net) .....	(24)	(896,260)							(24)	(896,260)
23. In force December 31 of current year .....	345	7,476,803	0	(a)	0	0	0	0	345	7,476,803

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

**ACCIDENT AND HEALTH INSURANCE**

	1 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) .....	6,613	6,633		7,746	9,117
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancellable (b) .....					
25.2 Guaranteed renewable (b) .....	5,681,655	5,682,898		4,139,382	4,262,725
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	5,681,655	5,682,898	0	4,139,382	4,262,725
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	5,688,268	5,689,531	0	4,147,128	4,271,842

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF Washington

DURING THE YEAR 2022

NAIC Group Code 0290

**LIFE INSURANCE**

NAIC Company Code 77968

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	102,859					102,859
2. Annuity considerations .....						0
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	102,859	0		0	0	102,859
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....	0	0		0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....	22,946					22,946
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 .....	22,946	0		0	0	22,946
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....	0	0		0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....	0	0		0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....									0	0
Settled during current year:										
18.1 By payment in full .....									0	0
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	159	7,980,000	0	(a)	0	0	0	0	159	7,980,000
21. Issued during year .....	17	720,000							17	720,000
22. Other changes to in force (Net) .....	(10)	(900,000)							(10)	(900,000)
23. In force December 31 of current year .....	166	7,800,000	0	(a)	0	0	0	0	166	7,800,000

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

**ACCIDENT AND HEALTH INSURANCE**

		1 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) .....		5,509	5,525		3,300	3,884
24.1 Federal Employees Health Benefits Plan premium (b) .....						
24.2 Credit (Group and Individual) .....						
24.3 Collectively renewable policies/certificates (b) .....						
24.4 Medicare Title XVIII exempt from state taxes or fees						
Other Individual Policies:						
25.1 Non-cancellable (b) .....						
25.2 Guaranteed renewable (b) .....		4,117,874	4,118,776		725,654	.764,633
25.3 Non-renewable for stated reasons only (b) .....						
25.4 Other accident only .....						
25.5 All other (b) .....						
25.6 Totals (sum of Lines 25.1 to 25.5) .....		4,117,874	4,118,776	0	725,654	.764,633
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....		4,123,383	4,124,301	0	728,954	768,517

(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 2022 OF THE Family Heritage Life Insurance Company of America

DIRECT BUSINESS IN THE STATE OF West Virginia

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	112,560					112,560
2. Annuity considerations .....						0
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	112,560	0		0	0	112,560
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....	0	0		0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits .....	20,000					20,000
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....	1,603					1,603
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	0	0		0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....	21,603	0		0	0	21,603
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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	1	20,000			0	0	0	0	1	20,000
Settled during current year:										
18.1 By payment in full .....	1	20,000							1	20,000
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	1	20,000	0	0	0	0	0	0	1	20,000
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	1	20,000	0	0	0	0	0	0	1	20,000
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	408	9,701,764	0	(a)	0	0	0	0	408	9,701,764
21. Issued during year .....	123	3,350,000							123	3,350,000
22. Other changes to in force (Net) .....	(32)	(595,000)							(32)	(595,000)
23. In force December 31 of current year .....	499	12,456,764	0	(a)	0	0	0	0	499	12,456,764

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

**ACCIDENT AND HEALTH INSURANCE**

	1 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) .....	1,764	1,769			
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancellable (b) .....					
25.2 Guaranteed renewable (b) .....	4,369,185	4,370,141		851,313	881,216
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	4,369,185	4,370,141	0	851,313	881,216
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	4,370,949	4,371,910	0	851,313	881,216

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF Wisconsin

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	23,983					23,983
2. Annuity considerations .....						0
3. Deposit-type contract funds .....		XXX			XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....	23,983	0		0	0	23,983
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0		0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....	0	0		0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....	40					40
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 .....	40	0		0	0	40
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....	0	0		0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....	0	0		0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....									0	0
Settled during current year:										
18.1 By payment in full .....									0	0
18.2 By payment on compromised claims .....									0	0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....									0	0
18.5 Amount rejected .....									0	0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....	65	2,295,000	0	(a)	0	0	0	0	65	2,295,000
21. Issued during year .....	6	180,000							6	180,000
22. Other changes to in force (Net) .....	(3)	(170,000)							(3)	(170,000)
23. In force December 31 of current year .....	68	2,305,000	0	(a)	0	0	0	0	68	2,305,000

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

**ACCIDENT AND HEALTH INSURANCE**

		1 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) .....		64,504	64,697		18,344	21,590
24.1 Federal Employees Health Benefits Plan premium (b) .....						
24.2 Credit (Group and Individual) .....						
24.3 Collectively renewable policies/certificates (b) .....						
24.4 Medicare Title XVIII exempt from state taxes or fees						
Other Individual Policies:						
25.1 Non-cancellable (b) .....						
25.2 Guaranteed renewable (b) .....		8,525,492	8,527,358		974,128	997,921
25.3 Non-renewable for stated reasons only (b) .....						
25.4 Other accident only .....						
25.5 All other (b) .....						
25.6 Totals (sum of Lines 25.1 to 25.5) .....		8,525,492	8,527,358	0	974,128	997,921
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....		8,589,996	8,592,055	0	992,472	1,019,511

(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 2022 OF THE Family Heritage Life Insurance Company of America**

DIRECT BUSINESS IN THE STATE OF Wyoming

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		18,817				18,817
2. Annuity considerations .....						0
3. Deposit-type contract funds .....			XXX		XXX	0
4. Other considerations .....						0
5. Totals (Sum of Lines 1 to 4) .....		18,817	0	0	0	18,817
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						0
6.2 Applied to pay renewal premiums .....						0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						0
6.4 Other .....						0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						0
7.2 Applied to provide paid-up annuities .....						0
7.3 Other .....						0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4) .....		0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						0
10. Matured endowments .....						0
11. Annuity benefits .....						0
12. Surrender values and withdrawals for life contracts .....		3,685				3,685
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....		0	0	0	0	0
14. All other benefits, except accident and health .....						0
15. Totals .....		3,685	0	0	0	3,685
<b>DETAILS OF WRITE-INS</b>						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....		0	0	0	0	0

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										0
18.2 By payment on compromised claims .....										0
18.3 Totals paid .....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise .....										0
18.5 Amount rejected .....										0
18.6 Total settlements .....	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6) .....	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>				No. of Policies						
20. In force December 31, prior year .....	.48	1,700,000	0	(a)	0	0	0	0	.48	1,700,000
21. Issued during year .....	3	140,000							3	140,000
22. Other changes to in force (Net) .....	(6)	(175,000)							(6)	(175,000)
23. In force December 31 of current year .....	45	1,665,000	0	(a)	0	0	0	0	45	1,665,000

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

**ACCIDENT AND HEALTH INSURANCE**

		1 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) .....		804	806			
24.1 Federal Employees Health Benefits Plan premium (b) .....						
24.2 Credit (Group and Individual) .....						
24.3 Collectively renewable policies/certificates (b) .....						
24.4 Medicare Title XVIII exempt from state taxes or fees						
Other Individual Policies:						
25.1 Non-cancellable (b) .....						
25.2 Guaranteed renewable (b) .....		3,201,472	3,202,173		402,941	417,537
25.3 Non-renewable for stated reasons only (b) .....						
25.4 Other accident only .....						
25.5 All other (b) .....						
25.6 Totals (sum of Lines 25.1 to 25.5) .....		3,201,472	3,202,173	0	402,941	417,537
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....		3,202,276	3,202,979	0	402,941	417,537

(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 2022 OF THE Family Heritage Life Insurance Company of America

DIRECT BUSINESS IN THE STATE OF Puerto Rico

NAIC Group Code 0290

DURING THE YEAR 2022

NAIC Company Code 77968

**LIFE INSURANCE**

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

**NONE**

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 .....										
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....			(a) .....							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a) .....							

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

**ACCIDENT AND HEALTH INSURANCE**

	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-cancellable (b) .....					
25.2 Guaranteed renewable (b) .....	31,598	31,605		550	563
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) .....	31,598	31,605	0	550	563
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	31,598	31,605	0	550	563

(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 2022 OF THE Family Heritage Life Insurance Company of America

DIRECT BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2022

NAIC Group Code 0290

LIFE INSURANCE

NAIC Company Code 77968

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....	5,682,795		0	0	0	5,682,795
2. Annuity considerations .....	0		0	0	0	0
3. Deposit-type contract funds .....	0	XXX		0	XXX	0
4. Other considerations .....	0		0	0	0	0
5. Totals (Sum of Lines 1 to 4)	5,682,795		0	0	0	5,682,795
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit .....	0	0	0	0	0	0
6.2 Applied to pay renewal premiums .....	0	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....	0	0	0	0	0	0
6.4 Other .....	0	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4) .....	0	0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....	0	0	0	0	0	0
7.2 Applied to provide paid-up annuities .....	0	0	0	0	0	0
7.3 Other .....	0	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3) .....	0	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits .....	1,101,347		0	0	0	1,101,347
10. Matured endowments .....	0		0	0	0	0
11. Annuity benefits .....	0		0	0	0	0
12. Surrender values and withdrawals for life contracts .....	345,206		0	0	0	345,206
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....	0		0	0	0	0
14. All other benefits, except accident and health .....	0		0	0	0	0
15. Totals	1,446,553		0	0	0	1,446,553
DETAILS OF WRITE-INS						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....	0	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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	0	0	0	0	0	0	0	0	0
17. Incurred during current year .....	34	1,101,347	0	0	0	0	0	0	.34	1,101,347
Settled during current year:										
18.1 By payment in full .....	34	1,101,347	0	0	0	0	0	0	.34	1,101,347
18.2 By payment on compromised claims .....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid .....	34	1,101,347	0	0	0	0	0	0	.34	1,101,347
18.4 Reduction by compromise .....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected .....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements .....	34	1,101,347	0	0	0	0	0	0	.34	1,101,347
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	17,540	491,796,844	0	(a) 0	0	0	0	0	17,540	491,796,844
21. Issued during year .....	3,817	107,550,000	0	0	0	0	0	0	3,817	107,550,000
22. Other changes to in force (Net) .....	(2,914)	(87,095,554)	0	0	0	0	0	0	(2,914)	(87,095,554)
23. In force December 31 of current year	18,443	512,251,290	0	(a) 0	0	0	0	0	18,443	512,251,290

(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 , current year \$ 0  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 , current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1 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) .....	19,266,472	19,324,151	0	1,785,334	2,119,343
24.1 Federal Employees Health Benefits Plan premium (b) .....	0	0	0	0	0
24.2 Credit (Group and Individual) .....	0	0	0	0	0
24.3 Collectively renewable policies/certificates (b) .....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b) .....	249,275	250,304	0	46,298	39,913
25.2 Guaranteed renewable (b) .....	350,008,561	350,085,169	0	114,805,972	118,127,337
25.3 Non-renewable for stated reasons only (b) .....	0	0	0	0	0
25.4 Other accident only .....	0	0	0	0	0
25.5 All other (b) .....	0	0	0	0	0
25.6 Totals (sum of Lines 25.1 to 25.5) .....	350,257,836	350,335,473	0	114,852,270	118,167,250
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	369,524,308	369,659,624	0	116,637,604	120,286,593

(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 2022 OF THE Family Heritage Life Insurance Company of America  
**FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE**

**INTEREST MAINTENANCE RESERVE**

	1 Amount
1. Reserve as of December 31, Prior Year .....	1,325,307
2. Current year's realized pre-tax capital gains/(losses) of \$ ..... (10,147,415) transferred into the reserve net of taxes of \$ ..... (1,535,304) .....	(8,612,111)
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) .....	(7,286,804)
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4) .....	(680,516)
6. Reserve as of December 31, current year (Line 4 minus Line 5) .....	(6,606,287)

**AMORTIZATION**

Year of Amortization	1 Reserve as of December 31, Prior Year	2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3 Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	4 Balance Before Reduction for Current Year's Amortization (Cols. 1 + 2 + 3)
1. 2022 .....	(561,633)	(118,883)	0	(680,516)
2. 2023 .....	(604,940)	(373,976)	0	(978,916)
3. 2024 .....	(674,794)	(370,469)	0	(1,045,263)
4. 2025 .....	(727,904)	(354,654)	0	(1,082,558)
5. 2026 .....	(772,965)	(340,596)	0	(1,113,561)
6. 2027 .....	(816,799)	(321,476)	0	(1,138,276)
7. 2028 .....	(866,290)	(311,912)	0	(1,178,202)
8. 2029 .....	(907,213)	(313,907)	0	(1,221,120)
9. 2030 .....	(956,895)	(313,222)	0	(1,270,116)
10. 2031 .....	(1,010,898)	(310,279)	0	(1,321,178)
11. 2032 .....	(862,406)	(312,069)	0	(1,174,474)
12. 2033 .....	(509,908)	(323,781)	0	(833,689)
13. 2034 .....	(81,054)	(329,908)	0	(410,962)
14. 2035 .....	370,559	(347,420)	0	23,139
15. 2036 .....	824,099	(357,069)	0	467,030
16. 2037 .....	1,093,679	(375,031)	0	718,649
17. 2038 .....	1,156,787	(372,460)	0	784,327
18. 2039 .....	1,160,430	(354,429)	0	806,001
19. 2040 .....	1,206,253	(340,245)	0	866,008
20. 2041 .....	1,212,281	(321,910)	0	890,371
21. 2042 .....	1,126,377	(301,877)	0	824,500
22. 2043 .....	884,049	(282,520)	0	601,529
23. 2044 .....	680,853	(268,440)	0	412,413
24. 2045 .....	459,877	(244,214)	0	215,662
25. 2046 .....	230,028	(229,538)	0	490
26. 2047 .....	98,787	(207,461)	0	(108,674)
27. 2048 .....	75,868	(181,322)	0	(105,454)
28. 2049 .....	53,910	(144,318)	0	(90,408)
29. 2050 .....	34,413	(103,613)	0	(69,200)
30. 2051 .....	10,756	(62,908)	0	(52,152)
31. 2052 and Later .....		(22,203)	0	(22,203)
32. Total (Lines 1 to 31) .....	1,325,308	(8,612,111)	0	(7,286,803)

## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America

## 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 .....	11,231,775	271,585	11,503,360	715	864,908	865,623	12,368,983
2. Realized capital gains/(losses) net of taxes - General Account .....	(512,143)		(512,143)			0	(512,143)
3. Realized capital gains/(losses) net of taxes - Separate Accounts .....			0			0	0
4. Unrealized capital gains/(losses) net of deferred taxes - General Account .....			0		(332,219)	(332,219)	(332,219)
5. Unrealized capital gains/(losses) net of deferred taxes - Separate Accounts .....			0			0	0
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves .....			0			0	0
7. Basic contribution .....	2,510,732	12,146	2,522,878	0	324,729	324,729	2,847,607
8. Accumulated balances (Lines 1 through 5 - 6 + 7) .....	13,230,364	283,731	13,514,096	715	857,418	858,133	14,372,229
9. Maximum reserve .....	12,899,838	45,244	12,945,082	16,258	5,308,571	5,324,829	18,269,911
10. Reserve objective .....	7,505,149	34,616	7,539,766	10,224	4,910,743	4,920,968	12,460,733
11. 20% of (Line 10 - Line 8) .....	(1,145,043)	(49,823)	(1,194,866)	1,902	810,665	812,567	(382,299)
12. Balance before transfers (Lines 8 + 11) .....	12,085,321	233,908	12,319,230	2,616	1,668,083	1,670,700	13,989,930
13. Transfers .....			0			0	0
14. Voluntary contribution .....			0			0	0
15. Adjustment down to maximum/up to zero .....			0			0	0
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	12,085,321	233,908	12,319,230	2,616	1,668,083	1,670,700	13,989,930

## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
1.		LONG-TERM BONDS										
1.		Exempt Obligations .....	24,707,304	XXX	XXX	24,707,304	0.0000	0	0.0000	0	0.0000	0
2.1	1	NAIC Designation Category 1.A .....	244,066,018	XXX	XXX	244,066,018	0.0002	48,813	0.0007	170,846	0.0013	317,286
2.2	1	NAIC Designation Category 1.B .....	53,159,783	XXX	XXX	53,159,783	0.0004	21,264	0.0011	58,476	0.0023	122,268
2.3	1	NAIC Designation Category 1.C .....	131,367,387	XXX	XXX	131,367,387	0.0006	78,820	0.0018	236,461	0.0035	459,786
2.4	1	NAIC Designation Category 1.D .....	58,811,342	XXX	XXX	58,811,342	0.0007	41,168	0.0022	129,385	0.0044	258,770
2.5	1	NAIC Designation Category 1.E .....	53,680,194	XXX	XXX	53,680,194	0.0009	48,312	0.0027	144,937	0.0055	295,241
2.6	1	NAIC Designation Category 1.F .....	70,494,154	XXX	XXX	70,494,154	0.0011	77,544	0.0034	239,680	0.0068	479,360
2.7	1	NAIC Designation Category 1.G .....	142,593,284	XXX	XXX	142,593,284	0.0014	199,631	0.0042	598,892	0.0085	1,212,043
2.8		Subtotal NAIC 1 (2.1+2.2+2.3+2.4+2.5+2.6+2.7) .....	754,172,162	XXX	XXX	754,172,162	XXX	515,552	XXX	1,578,677	XXX	3,144,753
3.1	2	NAIC Designation Category 2.A .....	281,049,969	XXX	XXX	281,049,969	0.0021	590,205	0.0063	1,770,615	0.0105	2,951,025
3.2	2	NAIC Designation Category 2.B .....	349,140,170	XXX	XXX	349,140,170	0.0025	872,850	0.0076	2,653,465	0.0127	4,434,080
3.3	2	NAIC Designation Category 2.C .....	86,790,883	XXX	XXX	86,790,883	0.0036	312,447	0.0108	937,342	0.0180	1,562,236
3.4		Subtotal NAIC 2 (3.1+3.2+3.3) .....	716,981,022	XXX	XXX	716,981,022	XXX	1,775,503	XXX	5,361,422	XXX	8,947,341
4.1	3	NAIC Designation Category 3.A .....	10,105,247	XXX	XXX	10,105,247	0.0069	69,726	0.0183	184,926	0.0262	264,757
4.2	3	NAIC Designation Category 3.B .....	5,957,996	XXX	XXX	5,957,996	0.0099	58,984	0.0264	157,291	0.0377	224,616
4.3	3	NAIC Designation Category 3.C .....	2,404,735	XXX	XXX	2,404,735	0.0131	31,502	0.0350	84,166	0.0500	120,237
4.4		Subtotal NAIC 3 (4.1+4.2+4.3) .....	18,467,978	XXX	XXX	18,467,978	XXX	160,212	XXX	426,383	XXX	609,611
5.1	4	NAIC Designation Category 4.A .....		XXX	XXX	0	0.0184	0	0.0430	0	0.0615	0
5.2	4	NAIC Designation Category 4.B .....	2,498,527	XXX	XXX	2,498,527	0.0238	59,465	0.0555	138,668	0.0793	198,133
5.3	4	NAIC Designation Category 4.C .....		XXX	XXX	0	0.0310	0	0.0724	0	0.1034	0
5.4		Subtotal NAIC 4 (5.1+5.2+5.3) .....	2,498,527	XXX	XXX	2,498,527	XXX	59,465	XXX	138,668	XXX	198,133
6.1	5	NAIC Designation Category 5.A .....		XXX	XXX	0	0.0472	0	0.0846	0	0.1410	0
6.2	5	NAIC Designation Category 5.B .....		XXX	XXX	0	0.0663	0	0.1188	0	0.1980	0
6.3	5	NAIC Designation Category 5.C .....		XXX	XXX	0	0.0836	0	0.1498	0	0.2496	0
6.4		Subtotal NAIC 5 (6.1+6.2+6.3) .....	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
7.	6	NAIC 6 .....		XXX	XXX	0	0.0000	0	0.2370	0	0.2370	0
8.		Total Unrated Multi-class Securities Acquired by Conversion .....		XXX	XXX	0	XXX	0	XXX	0	XXX	0
9.		Total Long-Term Bonds (1+2.8+3.4+4.4+5.4+6.4+7+8) .....	1,516,826,993	XXX	XXX	1,516,826,993	XXX	2,510,732	XXX	7,505,149	XXX	12,899,838
		PREFERRED STOCKS										
10.	1	Highest Quality .....		XXX	XXX	0	0.0005	0	0.0016	0	0.0033	0
11.	2	High Quality .....		XXX	XXX	0	0.0021	0	0.0064	0	0.0106	0
12.	3	Medium Quality .....		XXX	XXX	0	0.0099	0	0.0263	0	0.0376	0
13.	4	Low Quality .....		XXX	XXX	0	0.0245	0	0.0572	0	0.0817	0
14.	5	Lower Quality .....		XXX	XXX	0	0.0630	0	0.1128	0	0.1880	0
15.	6	In or Near Default .....		XXX	XXX	0	0.0000	0	0.2370	0	0.2370	0
16.		Affiliated Life with AVR .....		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
17.		Total Preferred Stocks (Sum of Lines 10 through 16) .....	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0

## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America

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

Line Number	NAIC Designation	Description	1 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)
18.		SHORT-TERM BONDS										
19.1	1	Exempt Obligations .....		XXX..	XXX..	0	0.0000	0	0.0000	0	0.0000	0
19.1	1	NAIC Designation Category 1.A .....		XXX..	XXX..	0	0.0002	0	0.0007	0	0.0013	0
19.2	1	NAIC Designation Category 1.B .....		XXX..	XXX..	0	0.0004	0	0.0011	0	0.0023	0
19.3	1	NAIC Designation Category 1.C .....		XXX..	XXX..	0	0.0006	0	0.0018	0	0.0035	0
19.4	1	NAIC Designation Category 1.D .....		XXX..	XXX..	0	0.0007	0	0.0022	0	0.0044	0
19.5	1	NAIC Designation Category 1.E .....		XXX..	XXX..	0	0.0009	0	0.0027	0	0.0055	0
19.6	1	NAIC Designation Category 1.F .....		XXX..	XXX..	0	0.0011	0	0.0034	0	0.0068	0
19.7	1	NAIC Designation Category 1.G .....		XXX..	XXX..	0	0.0014	0	0.0042	0	0.0085	0
19.8		Subtotal NAIC 1 (19.1+19.2+19.3+19.4+19.5+19.6+19.7) .....	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
20.1	2	NAIC Designation Category 2.A .....		XXX..	XXX..	0	0.0021	0	0.0063	0	0.0105	0
20.2	2	NAIC Designation Category 2.B .....		XXX..	XXX..	0	0.0025	0	0.0076	0	0.0127	0
20.3	2	NAIC Designation Category 2.C .....		XXX..	XXX..	0	0.0036	0	0.0108	0	0.0180	0
20.4		Subtotal NAIC 2 (20.1+20.2+20.3) .....	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
21.1	3	NAIC Designation Category 3.A .....		XXX..	XXX..	0	0.0069	0	0.0183	0	0.0262	0
21.2	3	NAIC Designation Category 3.B .....		XXX..	XXX..	0	0.0099	0	0.0264	0	0.0377	0
21.3	3	NAIC Designation Category 3.C .....		XXX..	XXX..	0	0.0131	0	0.0350	0	0.0500	0
21.4		Subtotal NAIC 3 (21.1+21.2+21.3) .....	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
22.1	4	NAIC Designation Category 4.A .....		XXX..	XXX..	0	0.0184	0	0.0430	0	0.0615	0
22.2	4	NAIC Designation Category 4.B .....		XXX..	XXX..	0	0.0238	0	0.0555	0	0.0793	0
22.3	4	NAIC Designation Category 4.C .....		XXX..	XXX..	0	0.0310	0	0.0724	0	0.1034	0
22.4		Subtotal NAIC 4 (22.1+22.2+22.3) .....	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
23.1	5	NAIC Designation Category 5.A .....		XXX..	XXX..	0	0.0472	0	0.0846	0	0.1410	0
23.2	5	NAIC Designation Category 5.B .....		XXX..	XXX..	0	0.0663	0	0.1188	0	0.1980	0
23.3	5	NAIC Designation Category 5.C .....		XXX..	XXX..	0	0.0836	0	0.1498	0	0.2496	0
23.4		Subtotal NAIC 5 (23.1+23.2+23.3) .....	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
24.	6	NAIC 6 .....		XXX..	XXX..	0	0.0000	0	0.2370	0	0.2370	0
25.		Total Short-Term Bonds (18+19.8+20.4+21.4+22.4+23.4+24) .....	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
		DERIVATIVE INSTRUMENTS										
26.		Exchange Traded .....		XXX..	XXX..	0	0.0005	0	0.0016	0	0.0033	0
27.	1	Highest Quality .....		XXX..	XXX..	0	0.0005	0	0.0016	0	0.0033	0
28.	2	High Quality .....		XXX..	XXX..	0	0.0021	0	0.0064	0	0.0106	0
29.	3	Medium Quality .....		XXX..	XXX..	0	0.0099	0	0.0263	0	0.0376	0
30.	4	Low Quality .....		XXX..	XXX..	0	0.0245	0	0.0572	0	0.0817	0
31.	5	Lower Quality .....		XXX..	XXX..	0	0.0630	0	0.1128	0	0.1880	0
32.	6	In or Near Default .....		XXX..	XXX..	0	0.0000	0	0.2370	0	0.2370	0
33.		Total Derivative Instruments .....	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
34.		Total (Lines 9 + 17 + 25 + 33) .....	1,516,826,993	XXX	XXX	1,516,826,993	XXX	2,510,732	XXX	7,505,149	XXX	12,899,838

## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America

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

Line Number	NAIC Designation	Description	1 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)
32		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 .....		XXX		0	0.0011	0	0.0057	0	0.0074	0
44.		Commercial Mortgages - All Other - CM2 - High Quality .....	3,036,521	XXX	3,036,521	0.0040	12,146	0.0114	34,616	0.0149	0.0149	45,244
45.		Commercial Mortgages - All Other - CM3 - Medium Quality .....		XXX		0	0.0069	0	0.0200	0	0.0257	0
46.		Commercial Mortgages - All Other - CM4 - Low Medium Quality .....		XXX		0	0.0120	0	0.0343	0	0.0428	0
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)	3,036,521	0	XXX	3,036,521	XXX	12,146	XXX	34,616	XXX	45,244
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)	3,036,521	0	XXX	3,036,521	XXX	12,146	XXX	34,616	XXX	45,244

## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America

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

Line Number	NAIC Designation	Description	1 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)
33		COMMON STOCK										
1.		Unaffiliated - Public .....		XXX	XXX	0	0.0000	0	0.1580 (a)	0	0.1580 (a)	
2.		Unaffiliated - Private .....		XXX	XXX	0	0.0000	0	0.1945	0	0.1945	
3.		Federal Home Loan Bank .....	1,676,100	XXX	XXX	1,676,100	0.0000	0	0.0061	10,224	0.0097	
4.		Affiliated - Life with AVR .....		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	
5.		Affiliated - Investment Subsidiary:										
6.		Fixed Income - Exempt Obligations .....				0	XXX		XXX		XXX	
7.		Fixed Income - Highest Quality .....				0	XXX		XXX		XXX	
8.		Fixed Income - High Quality .....				0	XXX		XXX		XXX	
9.		Fixed Income - Medium Quality .....				0	XXX		XXX		XXX	
10.		Fixed Income - Low Quality .....				0	XXX		XXX		XXX	
11.		Fixed Income - Lower Quality .....				0	XXX		XXX		XXX	
12.		Fixed Income - In/Near Default .....				0	XXX		XXX		XXX	
13.		Unaffiliated Common Stock - Public .....				0	0.0000	0	0.1580 (a)	0	0.1580 (a)	
14.		Unaffiliated Common Stock - Private .....				0	0.0000	0	0.1945	0	0.1945	
15.		Real Estate .....				0	(b)	0	(b)	0	(b)	
16.		Affiliated - Certain Other (See SVO Purposes and Procedures Manual) .....		XXX	XXX	0	0.0000	0	0.1580	0	0.1580	
17.		Affiliated - All Other .....		XXX	XXX	0	0.0000	0	0.1945	0	0.1945	
		Total Common Stock (Sum of Lines 1 through 16)	1,676,100	0	0	1,676,100	XXX	0	XXX	10,224	XXX	
		REAL ESTATE										
18.		Home Office Property (General Account only) .....				0	0.0000	0	0.0912	0	0.0912	
19.		Investment Properties .....				0	0.0000	0	0.0912	0	0.0912	
20.		Properties Acquired in Satisfaction of Debt .....				0	0.0000	0	0.1337	0	0.1337	
21.		Total Real Estate (Sum of Lines 18 through 20)	0	0	0	0	XXX	0	XXX	0	XXX	
22.	1	OTHER INVESTED ASSETS										
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS										
		Exempt Obligations .....		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	
		Highest Quality .....		XXX	XXX	0	0.0005	0	0.0016	0	0.0033	
		High Quality .....		XXX	XXX	0	0.0021	0	0.0064	0	0.0106	
		Medium Quality .....		XXX	XXX	0	0.0099	0	0.0263	0	0.0376	
		Low Quality .....		XXX	XXX	0	0.0245	0	0.0572	0	0.0817	
		Lower Quality .....		XXX	XXX	0	0.0630	0	0.1128	0	0.1880	
27.	5	In or Near Default .....		XXX	XXX	0	0.0000	0	0.2370	0	0.2370	
		Total with Bond Characteristics (Sum of Lines 22 through 28)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	

## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America

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

Line Number	NAIC Designation	Description	1 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 PREFERRED STOCKS										
30.	1	Highest Quality .....	49,028,251	XXX	XXX	49,028,251	0.0005	24,514	0.0016	78,445	0.0033	161,793
31.	2	High Quality .....	7,233,004	XXX	XXX	7,233,004	0.0021	15,189	0.0064	46,291	0.0106	76,670
32.	3	Medium Quality .....		XXX	XXX	0	0.0099	0	0.0263	0	0.0376	0
33.	4	Low Quality .....		XXX	XXX	0	0.0245	0	0.0572	0	0.0817	0
34.	5	Lower Quality .....		XXX	XXX	0	0.0630	0	0.1128	0	0.1880	0
35.	6	In or Near Default .....		XXX	XXX	0	0.0000	0	0.2370	0	0.2370	0
36.		Affiliated Life with AVR .....		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
37.		Total with Preferred Stock Characteristics (Sum of Lines 30 through 36)	56,261,255	XXX	XXX	56,261,255	XXX	39,703	XXX	124,736	XXX	238,463
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS										
		In Good Standing Affiliated:										
38.		Mortgages - CM1 - Highest Quality .....		XXX	0	0.0011	0	0.0057	0	0.0074	0	
39.		Mortgages - CM2 - High Quality .....		XXX	0	0.0040	0	0.0114	0	0.0149	0	
40.		Mortgages - CM3 - Medium Quality .....		XXX	0	0.0069	0	0.0200	0	0.0257	0	
41.		Mortgages - CM4 - Low Medium Quality .....		XXX	0	0.0120	0	0.0343	0	0.0428	0	
42.		Mortgages - CM5 - Low Quality .....		XXX	0	0.0183	0	0.0486	0	0.0628	0	
43.		Residential Mortgages - Insured or Guaranteed .....		XXX	0	0.0003	0	0.0007	0	0.0011	0	
44.		Residential Mortgages - All Other .....		XXX	0	0.0015	0	0.0034	0	0.0046	0	
45.		Commercial Mortgages - Insured or Guaranteed .....		XXX	0	0.0003	0	0.0007	0	0.0011	0	
		Overdue, Not in Process Affiliated:										
46.		Farm Mortgages .....		XXX	0	0.0480	0	0.0868	0	0.1371	0	
47.		Residential Mortgages - Insured or Guaranteed .....		XXX	0	0.0006	0	0.0014	0	0.0023	0	
48.		Residential Mortgages - All Other .....		XXX	0	0.0029	0	0.0066	0	0.0103	0	
49.		Commercial Mortgages - Insured or Guaranteed .....		XXX	0	0.0006	0	0.0014	0	0.0023	0	
50.		Commercial Mortgages - All Other .....		XXX	0	0.0480	0	0.0868	0	0.1371	0	
		In Process of Foreclosure Affiliated:										
51.		Farm Mortgages .....		XXX	0	0.0000	0	0.1942	0	0.1942	0	
52.		Residential Mortgages - Insured or Guaranteed .....		XXX	0	0.0000	0	0.0046	0	0.0046	0	
53.		Residential Mortgages - All Other .....		XXX	0	0.0000	0	0.0149	0	0.0149	0	
54.		Commercial Mortgages - Insured or Guaranteed .....		XXX	0	0.0000	0	0.0046	0	0.0046	0	
55.		Commercial Mortgages - All Other .....		XXX	0	0.0000	0	0.1942	0	0.1942	0	
56.		Total Affiliated (Sum of Lines 38 through 55) .....	0	0	XXX	0	XXX	0	XXX	0	XXX	0
57.		Unaffiliated - In Good Standing With Covenants .....		XXX	0	(c)	0	(c)	0	(c)	0	
58.		Unaffiliated - In Good Standing Defeased With Government Securities .....		XXX	0	0.0011	0	0.0057	0	0.0074	0	
59.		Unaffiliated - In Good Standing Primarily Senior .....	34,512,264	XXX	34,512,264	0.0040	138,049	0.0114	393,440	0.0149	514,233	
60.		Unaffiliated - In Good Standing All Other .....		XXX	0	0.0069	0	0.0200	0	0.0257	0	
61.		Unaffiliated - Overdue, Not in Process .....		XXX	0	0.0480	0	0.0868	0	0.1371	0	
62.		Unaffiliated - In Process of Foreclosure .....		XXX	0	0.0000	0	0.1942	0	0.1942	0	
63.		Total Unaffiliated (Sum of Lines 57 through 62) .....	34,512,264	0	XXX	34,512,264	XXX	138,049	XXX	393,440	XXX	514,233
64.		Total with Mortgage Loan Characteristics (Lines 56 + 63) .....	34,512,264	0	XXX	34,512,264	XXX	138,049	XXX	393,440	XXX	514,233

## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America

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

Line Number	NAIC Designation	Description	1 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)
65.		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK										
66.		Unaffiliated Public .....		XXX	XXX	0	0.0000	0	0.1580 (a)	0	0.1580 (a)	0
67.		Unaffiliated Private .....	21,144,530	XXX	XXX	21,144,530	0.0000	0	0.1945	4,112,611	0.1945	4,112,611
68.		Affiliated Life with AVR .....		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
69.		Affiliated Certain Other (See SVO Purposes & Procedures Manual) .....		XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
70.		Affiliated Other - All Other .....		XXX	XXX	0	0.0000	0	0.1945	0	0.1945	0
		Total with Common Stock Characteristics (Sum of Lines 65 through 69)	21,144,530	XXX	XXX	21,144,530	XXX	0	XXX	4,112,611	XXX	4,112,611
71.		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE										
72.		Home Office Property (General Account only) .....				0	0.0000	0	0.0912	0	0.0912	0
73.		Investment Properties .....				0	0.0000	0	0.0912	0	0.0912	0
74.		Properties Acquired in Satisfaction of Debt .....				0	0.0000	0	0.1337	0	0.1337	0
		Total with Real Estate Characteristics (Sum of Lines 71 through 73)	0	0	0	0	XXX	0	XXX	0	XXX	0
75.		LOW INCOME HOUSING TAX CREDIT INVESTMENTS										
76.		Guaranteed Federal Low Income Housing Tax Credit .....	0			0	0.0003	0	0.0006	0	0.0010	0
77.		Non-guaranteed Federal Low Income Housing Tax Credit .....	23,329,681			23,329,681	0.0063	146,977	0.0120	279,956	0.0190	443,264
78.		Guaranteed State Low Income Housing Tax Credit .....	0			0	0.0003	0	0.0006	0	0.0010	0
79.		Non-guaranteed State Low Income Housing Tax Credit .....	0			0	0.0063	0	0.0120	0	0.0190	0
80.		All Other Low Income Housing Tax Credit .....	0			0	0.0273	0	0.0600	0	0.0975	0
		Total LIHTC (Sum of Lines 75 through 79)	23,329,681	0	0	23,329,681	XXX	146,977	XXX	279,956	XXX	443,264
81.		RESIDUAL TRANCES OR INTERESTS										
82.		Fixed Income Instruments - Unaffiliated .....	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
83.		Fixed Income Instruments - Affiliated .....	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
84.		Common Stock - Unaffiliated .....	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
85.		Common Stock - Affiliated .....	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
86.		Preferred Stock - Unaffiliated .....	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
87.		Preferred Stock - Affiliated .....	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
88.		Real Estate - Unaffiliated .....	0			0	0.0000	0	0.1580	0	0.1580	0
89.		Real Estate - Affiliated .....	0			0	0.0000	0	0.1580	0	0.1580	0
90.		Mortgage Loans - Unaffiliated .....	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
91.		Mortgage Loans - Affiliated .....	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
92.		Other - Unaffiliated .....	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
93.		Other - Affiliated .....	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
		Total Residual Trances or Interests (Sum of Lines 81 through 92)	0	0	0	0	XXX	0	XXX	0	XXX	0
94.		ALL OTHER INVESTMENTS										
95.		NAIC 1 Working Capital Finance Investments .....		XXX		0	0.0000	0	0.0042	0	0.0042	0
96.		NAIC 2 Working Capital Finance Investments .....		XXX		0	0.0000	0	0.0137	0	0.0137	0
97.		Other Invested Assets - Schedule BA .....		XXX		0	0.0000	0	0.1580	0	0.1580	0
98.		Other Short-Term Invested Assets - Schedule DA .....		XXX		0	0.0000	0	0.1580	0	0.1580	0
		Total All Other (Sum of Lines 94, 95, 96 and 97)	0	XXX	0	0	XXX	0	XXX	0	XXX	0
99.	Total Other Invested Assets - Schedules BA & DA (Sum of Lines 29, 37, 64, 70, 74, 80, 93 and 98)	135,247,730	0	0	135,247,730	XXX	324,729	XXX	4,910,743	XXX	5,308,571	

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

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

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

Asset Valuation Reserve - Replications (Synthetic) Assets

**N O N E**

Schedule F - Claims

**N O N E**

## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America

**SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT**  
**PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS**

	Total		Comprehensive (Hospital and Medical) Individual		Comprehensive (Hospital and Medical) Group		Medicare Supplement		Vision Only		Dental Only		Federal Employees Health Benefits Plan	
	1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %
1. Premiums written .....	367,696,841	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2. Premiums earned .....	366,850,556	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Incurred claims .....	119,965,358	32.7	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
4. Cost containment expenses .....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
5. Incurred claims and cost containment expenses (Lines 3 and 4) .....	119,965,358	32.7	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
6. Increase in contract reserves .....	128,858,829	35.1	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
7. Commissions (a) .....	79,321,065	21.6	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
8. Other general insurance expenses .....	40,991,414	11.2	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
9. Taxes, licenses and fees .....	8,092,286	2.2	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
10. Total other expenses incurred .....	128,404,765	35.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
11. Aggregate write-ins for deductions .....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
12. Gain from underwriting before dividends or refunds .....	(10,378,396)	(2.8)	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
13. Dividends or refunds .....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
14. Gain from underwriting after dividends or refunds .....	(10,378,396)	(2.8)	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
<b>DETAILS OF WRITE-INS</b>														
1101. ....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1102. ....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1103. ....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above) .....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0

	Medicare Title XVIII		Medicaid Title XIX		Credit A&H		Disability Income		Long-Term Care		Other Health	
	15 Amount	16 %	17 Amount	18 %	19 Amount	20 %	21 Amount	22 %	23 Amount	24 %	25 Amount	26 %
1. Premiums written .....	XXX		XXX		XXX		XXX		XXX		367,696,841	XXX
2. Premiums earned .....	XXX		XXX		XXX		XXX		XXX		366,850,556	XXX
3. Incurred claims .....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	119,965,358	32.7
4. Cost containment expenses .....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
5. Incurred claims and cost containment expenses (Lines 3 and 4) .....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	119,965,358	32.7
6. Increase in contract reserves .....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	128,858,829	35.1
7. Commissions (a) .....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	79,321,065	21.6
8. Other general insurance expenses .....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	40,991,414	11.2
9. Taxes, licenses and fees .....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	8,092,286	2.2
10. Total other expenses incurred .....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	128,404,765	35.0
11. Aggregate write-ins for deductions .....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	(10,378,396)	(2.8)
12. Gain from underwriting before dividends or refunds .....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
13. Dividends or refunds .....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
14. Gain from underwriting after dividends or refunds .....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	(10,378,396)	(2.8)
<b>DETAILS OF WRITE-INS</b>												
1101. ....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1102. ....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1103. ....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above) .....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0

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

## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America

**SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)****PART 2. - RESERVES AND LIABILITIES**

	1 Total	2 Comprehensive (Hospital and Medical) Individual	3 Comprehensive (Hospital and Medical) Group	4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Medicare Title XVIII	9 Medicaid Title XIX	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
A. Premium Reserves:													
1. Unearned premiums .....	20,008,955												20,008,955
2. Advance premiums .....	0												
3. Reserve for rate credits .....	0												
4. Total premium reserves, current year .....	20,008,955	0	0	0	0	0	0	0	0	0	0	0	20,008,955
5. Total premium reserves, prior year .....	19,162,669												19,162,669
6. Increase in total premium reserves .....	846,286	0	0	0	0	0	0	0	0	0	0	0	846,286
B. Contract Reserves:													
1. Additional reserves (a) .....	1,471,665,132												1,471,665,132
2. Reserve for future contingent benefits .....	0												
3. Total contract reserves, current year .....	1,471,665,132	0	0	0	0	0	0	0	0	0	0	0	1,471,665,132
4. Total contract reserves, prior year .....	1,342,806,303												1,342,806,303
5. Increase in contract reserves .....	128,858,829	0	0	0	0	0	0	0	0	0	0	0	128,858,829
C. Claim Reserves and Liabilities:													
1. Total current year .....	30,989,412	0	0	0	0	0	0	0	0	0	0	0	30,989,412
2. Total prior year .....	27,363,896												27,363,896
3. Increase .....	3,625,516	0	0	0	0	0	0	0	0	0	0	0	3,625,516

**PART 3. - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES**

	1 Total	2 Comprehensive (Hospital and Medical) Individual	3 Comprehensive (Hospital and Medical) Group	4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Medicare Title XVIII	9 Medicaid Title XIX	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
1. Claims paid during the year:													
1.1 On claims incurred prior to current year .....	20,349,998												20,349,998
1.2 On claims incurred during current year .....	95,989,844												95,989,844
2. Claim reserves and liabilities, December 31, current year:													
2.1 On claims incurred prior to current year .....	5,198,867												5,198,867
2.2 On claims incurred during current year .....	25,790,545												25,790,545
3. Test:													
3.1 Lines 1.1 and 2.1 .....	25,548,865	0	0	0	0	0	0	0	0	0	0	0	25,548,865
3.2 Claim reserves and liabilities, December 31, prior year .....	27,363,896												27,363,896
3.3 Line 3.1 minus Line 3.2 .....	(1,815,031)	0	0	0	0	0	0	0	0	0	0	0	(1,815,031)

**PART 4. - REINSURANCE**

	1 Total	2 Comprehensive (Hospital and Medical) Individual	3 Comprehensive (Hospital and Medical) Group	4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Medicare Title XVIII	9 Medicaid Title XIX	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
A. Reinsurance Assumed:													
1. Premiums written .....	0												
2. Premiums earned .....	0												
3. Incurred claims .....	0												
4. Commissions .....	0												
B. Reinsurance Ceded:													
1. Premiums written .....	2,798,520												2,798,520
2. Premiums earned .....	2,809,068												2,809,068
3. Incurred claims .....	321,235												321,235
4. Commissions .....	822,257												822,257

(a) Includes \$ ..... 0 premium deficiency reserve.

## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America

**SCHEDULE H - PART 5 - HEALTH CLAIMS**

	1 Comprehensive (Hospital and Medical) Individual	2 Comprehensive (Hospital and Medical) Group	3 Medicare Supplement	4 Vision Only	5 Dental Only	6 Federal Employees Health Benefits Plan	7 Medicare Title XVIII	8 Medicaid Title XIX	9 Credit A&H	10 Disability Income	11 Long-Term Care	12 Other Health	13 Total
A. Direct:													
1. Incurred claims .....												120,286,593	120,286,593
2. Beginning claim reserves and liabilities .....												27,624,671	27,624,671
3. Ending claim reserves and liabilities .....												31,273,660	31,273,660
4. Claims paid .....	0	0	0	0	0	0	0	0	0	0	0	116,637,604	116,637,604
B. Assumed Reinsurance:													
1. Incurred claims .....												0	0
2. Beginning claim reserves and liabilities .....												0	0
3. Ending claim reserves and liabilities .....												0	0
4. Claims paid .....	0	0	0	0	0	0	0	0	0	0	0	0	0
C. Ceded Reinsurance:													
1. Incurred claims .....												321,235	321,235
2. Beginning claim reserves and liabilities .....												260,775	260,775
3. Ending claim reserves and liabilities .....												284,248	284,248
4. Claims paid .....	0	0	0	0	0	0	0	0	0	0	0	297,762	297,762
D. Net:													
1. Incurred claims .....	0	0	0	0	0	0	0	0	0	0	0	119,965,358	119,965,358
2. Beginning claim reserves and liabilities .....	0	0	0	0	0	0	0	0	0	0	0	27,363,896	27,363,896
3. Ending claim reserves and liabilities .....	0	0	0	0	0	0	0	0	0	0	0	30,989,412	30,989,412
4. Claims paid .....	0	0	0	0	0	0	0	0	0	0	0	116,339,842	116,339,842
E. Net Incurred Claims and Cost Containment Expenses:													
1. Incurred claims and cost containment expenses .....	0	0	0	0	0	0	0	0	0	0	0	119,965,358	119,965,358
2. Beginning reserves and liabilities .....												27,363,896	27,363,896
3. Ending reserves and liabilities .....												30,989,412	30,989,412
4. Paid claims and cost containment expenses .....	0	0	0	0	0	0	0	0	0	0	0	116,339,842	116,339,842

Schedule S - Part 1 - Section 1

**N O N E**

Schedule S - Part 1 - Section 2

**N O N E**

## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America

**SCHEDULE S - PART 2**

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

1 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
....8809 .... ..75-1608507 .. ..08/01/2007 .. Optimum Re Insurance Company .....				TX.....	0	81,000
0899999. Life and Annuity - U.S. Non-Affiliates					0	81,000
1099999. Total Life and Annuity - Non-Affiliates					0	81,000
1199999. Total Life and Annuity					0	81,000
1499999. Total Accident and Health - U.S. Affiliates					0	0
1799999. Total Accident and Health - Non-U.S. Affiliates					0	0
1899999. Total Accident and Health - Affiliates					0	0
....6182 .... ..52-0676509 .. ..10/08/2010 .. Chesapeake Life Insurance Company .....				OK.....	0	284,248
1999999. Accident and Health - U.S. Non-Affiliates					0	284,248
2199999. Total Accident and Health - Non-Affiliates					0	284,248
2299999. Total Accident and Health					0	284,248
2399999. Total U.S. (Sum of 0399999, 0899999, 1499999 and 1999999)					0	365,248
2499999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999 and 2099999)					0	0
99999999 Totals - Life, Annuity and Accident and Health					0	365,248

## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America

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

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

1 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		
0399999. Total General Account - Authorized U.S. Affiliates							0	0	0	0	0	0	0	0
0699999. Total General Account - Authorized Non-U.S. Affiliates							0	0	0	0	0	0	0	0
0799999. Total General Account - Authorized Affiliates							0	0	0	0	0	0	0	0
... 88099 .. 75-1608507 .. 03/01/2007 .. Optimum Re Insurance Company .. TX .. CO/I .. OL .. 15,000 .. 4,619 .. 8,297 .. 169 .. 0 .. 0 .. 0 .. 0 .. 0 .. 0 .. 0 .. 0														
... 88099 .. 75-1608507 .. 08/01/2007 .. Optimum Re Insurance Company .. TX .. YRT/I .. OL .. 18,306,772 .. 7,191 .. 7,141 .. 91,569 .. 0 .. 0 .. 0 .. 0 .. 0 .. 0 .. 0 .. 0 .. 0														
0899999. General Account - Authorized U.S. Non-Affiliates							18,321,772	11,810	15,438	91,738	0	0	0	0
1099999. Total General Account - Authorized Non-Affiliates							18,321,772	11,810	15,438	91,738	0	0	0	0
1199999. Total General Account Authorized							18,321,772	11,810	15,438	91,738	0	0	0	0
1499999. Total General Account - Unauthorized U.S. Affiliates							0	0	0	0	0	0	0	0
1799999. Total General Account - Unauthorized Non-U.S. Affiliates							0	0	0	0	0	0	0	0
1899999. Total General Account - Unauthorized Affiliates							0	0	0	0	0	0	0	0
2199999. Total General Account - Unauthorized Non-Affiliates							0	0	0	0	0	0	0	0
2299999. Total General Account Unauthorized							0	0	0	0	0	0	0	0
2599999. Total General Account - Certified U.S. Affiliates							0	0	0	0	0	0	0	0
2899999. Total General Account - Certified Non-U.S. Affiliates							0	0	0	0	0	0	0	0
2999999. Total General Account - Certified Affiliates							0	0	0	0	0	0	0	0
3299999. Total General Account - Certified Non-Affiliates							0	0	0	0	0	0	0	0
3399999. Total General Account Certified							0	0	0	0	0	0	0	0
3699999. Total General Account - Reciprocal Jurisdiction U.S. Affiliates							0	0	0	0	0	0	0	0
3999999. Total General Account - Reciprocal Jurisdiction Non-U.S. Affiliates							0	0	0	0	0	0	0	0
4099999. Total General Account - Reciprocal Jurisdiction Affiliates							0	0	0	0	0	0	0	0
4399999. Total General Account - Reciprocal Jurisdiction Non-Affiliates							0	0	0	0	0	0	0	0
4499999. Total General Account Reciprocal Jurisdiction							0	0	0	0	0	0	0	0
4599999. Total General Account Authorized, Unauthorized, Reciprocal Jurisdiction and Certified							18,321,772	11,810	15,438	91,738	0	0	0	0
4899999. Total Separate Accounts - Authorized U.S. Affiliates							0	0	0	0	0	0	0	0
5199999. Total Separate Accounts - Authorized Non-U.S. Affiliates							0	0	0	0	0	0	0	0
5299999. Total Separate Accounts - Authorized Affiliates							0	0	0	0	0	0	0	0
5599999. Total Separate Accounts - Authorized Non-Affiliates							0	0	0	0	0	0	0	0
5699999. Total Separate Accounts Authorized							0	0	0	0	0	0	0	0
5999999. Total Separate Accounts - Unauthorized U.S. Affiliates							0	0	0	0	0	0	0	0
6299999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates							0	0	0	0	0	0	0	0
6399999. Total Separate Accounts - Unauthorized Affiliates							0	0	0	0	0	0	0	0
6699999. Total Separate Accounts - Unauthorized Non-Affiliates							0	0	0	0	0	0	0	0
6799999. Total Separate Accounts Unauthorized							0	0	0	0	0	0	0	0
7099999. Total Separate Accounts - Certified U.S. Affiliates							0	0	0	0	0	0	0	0
7399999. Total Separate Accounts - Certified Non-U.S. Affiliates							0	0	0	0	0	0	0	0
7499999. Total Separate Accounts - Certified Affiliates							0	0	0	0	0	0	0	0
7799999. Total Separate Accounts - Certified Non-Affiliates							0	0	0	0	0	0	0	0
7899999. Total Separate Accounts Certified							0	0	0	0	0	0	0	0
8199999. Total Separate Accounts - Reciprocal Jurisdiction U.S. Affiliates							0	0	0	0	0	0	0	0
8499999. Total Separate Accounts - Reciprocal Jurisdiction Non-U.S. Affiliates							0	0	0	0	0	0	0	0
8599999. Total Separate Accounts - Reciprocal Jurisdiction Affiliates							0	0	0	0	0	0	0	0
8899999. Total Separate Accounts - Reciprocal Jurisdiction Non-Affiliates							0	0	0	0	0	0	0	0
8999999. Total Separate Accounts Reciprocal Jurisdiction							0	0	0	0	0	0	0	0
9099999. Total Separate Accounts Authorized, Unauthorized, Reciprocal Jurisdiction and Certified							0	0	0	0	0	0	0	0
9199999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3699999, 4199999, 4899999, 5399999, 5999999, 6499999, 7099999, 7599999, 8199999 and 8699999)							18,321,772	11,810	15,438	91,738	0	0	0	0
9299999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 3999999, 4299999, 5199999, 5499999, 6299999, 6599999, 7399999, 7699999, 8499999 and 8799999)							0	0	0	0	0	0	0	0
9999999 - Totals							18,321,772	11,810	15,438	91,738	0	0	0	0

## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America

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

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

1 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 Premiums	9 Unearned Premiums (Estimated)	10 Reserve Credit Taken Other than for Unearned Premiums	Outstanding Surplus Relief		13 Modified Ccoinsurance Reserve	14 Funds Withheld Under Ccoinsurance
										11 Current Year	12 Prior Year		
0399999. Total General Account - Authorized U.S. Affiliates							0	0	0	0	0	0	0
0699999. Total General Account - Authorized Non-U.S. Affiliates							0	0	0	0	0	0	0
0799999. Total General Account - Authorized Affiliates							0	0	0	0	0	0	0
....61832 ..52-0676509 .. 10/08/2010 . Chesapeake Life Insurance Company .....	OK	OTH/I..	SD..	..2,052,978		90,241	7,411,422			0	0	0	0
....61832 ..52-0676509 .. 10/08/2010 . Chesapeake Life Insurance Company .....	OK	OTH/I..	A..	613,382		22,960	1,553,171			0	0	0	0
....61832 ..52-0676509 .. 10/08/2010 . Chesapeake Life Insurance Company .....	OK	OTH/I..	OM..	132,160		5,300	175,662			0	0	0	0
0899999. General Account - Authorized U.S. Non-Affiliates							2,798,520	118,501	9,140,255	0	0	0	0
1099999. Total General Account - Authorized Non-Affiliates							2,798,520	118,501	9,140,255	0	0	0	0
1199999. Total General Account Authorized							2,798,520	118,501	9,140,255	0	0	0	0
1499999. Total General Account - Unauthorized U.S. Affiliates							0	0	0	0	0	0	0
1799999. Total General Account - Unauthorized Non-U.S. Affiliates							0	0	0	0	0	0	0
1899999. Total General Account - Unauthorized Affiliates							0	0	0	0	0	0	0
2199999. Total General Account - Unauthorized Non-Affiliates							0	0	0	0	0	0	0
2299999. Total General Account Unauthorized							0	0	0	0	0	0	0
2599999. Total General Account - Certified U.S. Affiliates							0	0	0	0	0	0	0
2899999. Total General Account - Certified Non-U.S. Affiliates							0	0	0	0	0	0	0
2999999. Total General Account - Certified Affiliates							0	0	0	0	0	0	0
3299999. Total General Account - Certified Non-Affiliates							0	0	0	0	0	0	0
3399999. Total General Account Certified							0	0	0	0	0	0	0
3699999. Total General Account - Reciprocal Jurisdiction U.S. Affiliates							0	0	0	0	0	0	0
3999999. Total General Account - Reciprocal Jurisdiction Non-U.S. Affiliates							0	0	0	0	0	0	0
4099999. Total General Account - Reciprocal Jurisdiction Affiliates							0	0	0	0	0	0	0
4399999. Total General Account - Reciprocal Jurisdiction Non-Affiliates							0	0	0	0	0	0	0
4499999. Total General Account Reciprocal Jurisdiction							0	0	0	0	0	0	0
4599999. Total General Account Authorized, Unauthorized, Reciprocal Jurisdiction and Certified							2,798,520	118,501	9,140,255	0	0	0	0
4899999. Total Separate Accounts - Authorized U.S. Affiliates							0	0	0	0	0	0	0
5199999. Total Separate Accounts - Authorized Non-U.S. Affiliates							0	0	0	0	0	0	0
5299999. Total Separate Accounts - Authorized Affiliates							0	0	0	0	0	0	0
5599999. Total Separate Accounts - Authorized Non-Affiliates							0	0	0	0	0	0	0
5699999. Total Separate Accounts Authorized							0	0	0	0	0	0	0
5999999. Total Separate Accounts - Unauthorized U.S. Affiliates							0	0	0	0	0	0	0
6299999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates							0	0	0	0	0	0	0
6399999. Total Separate Accounts - Unauthorized Affiliates							0	0	0	0	0	0	0
6699999. Total Separate Accounts - Unauthorized Non-Affiliates							0	0	0	0	0	0	0
6799999. Total Separate Accounts Unauthorized							0	0	0	0	0	0	0
7099999. Total Separate Accounts - Certified U.S. Affiliates							0	0	0	0	0	0	0
7399999. Total Separate Accounts - Certified Non-U.S. Affiliates							0	0	0	0	0	0	0
7499999. Total Separate Accounts - Certified Affiliates							0	0	0	0	0	0	0
7799999. Total Separate Accounts - Certified Non-Affiliates							0	0	0	0	0	0	0
7899999. Total Separate Accounts Certified							0	0	0	0	0	0	0
8199999. Total Separate Accounts - Reciprocal Jurisdiction U.S. Affiliates							0	0	0	0	0	0	0
8499999. Total Separate Accounts - Reciprocal Jurisdiction Non-U.S. Affiliates							0	0	0	0	0	0	0
8599999. Total Separate Accounts - Reciprocal Jurisdiction Affiliates							0	0	0	0	0	0	0
8899999. Total Separate Accounts - Reciprocal Jurisdiction Non-Affiliates							0	0	0	0	0	0	0
8999999. Total Separate Accounts Reciprocal Jurisdiction							0	0	0	0	0	0	0
9099999. Total Separate Accounts Authorized, Unauthorized, Reciprocal Jurisdiction and Certified							0	0	0	0	0	0	0
9199999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3699999, 4199999, 4899999, 5399999, 5999999, 6499999, 7099999, 7599999, 8199999 and 8699999)							2,798,520	118,501	9,140,255	0	0	0	0
9299999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 3999999, 4299999, 5199999, 5499999, 6299999, 6599999, 7399999, 7699999, 8499999 and 8799999)							0	0	0	0	0	0	0
9999999 - Totals							2,798,520	118,501	9,140,255	0	0	0	0

Schedule S - Part 4

**N O N E**

Schedule S - Part 4 - Bank Footnote

**N O N E**

Schedule S - Part 5

**N O N E**

Schedule S - Part 5 - Bank Footnote

**N O N E**

## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America

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

	1 2022	2 2021	3 2020	4 2019	5 2018
<b>A. OPERATIONS ITEMS</b>					
1. Premiums and annuity considerations for life and accident and health contracts .....	2,890	3,052	3,004	3,025	179,978
2. Commissions and reinsurance expense allowances .....	822	987	988	996	132,919
3. Contract claims .....	359	382	300	489	14,538
4. Surrender benefits and withdrawals for life contracts .....	0	0	0	0	0
5. Dividends to policyholders and refunds to members .....	0	0	0	0	0
6. Reserve adjustments on reinsurance ceded .....	0	0	0	0	38,914
7. Increase in aggregate reserve for life and accident and health contracts .....	1,322	1,429	1,387	1,341	1,121
<b>B. BALANCE SHEET ITEMS</b>					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected .....	71	77	79	77	77
9. Aggregate reserves for life and accident and health contracts .....	9,271	7,948	6,519	5,132	3,790
10. Liability for deposit-type contracts .....	0	0	0	0	0
11. Contract claims unpaid .....	365	365	459	478	536
12. Amounts recoverable on reinsurance .....	0	20	0	0	0
13. Experience rating refunds due or unpaid .....	0	0	0	0	0
14. Policyholders' dividends and refunds to members (not included in Line 10) .....	0	0	0	0	0
15. Commissions and reinsurance expense allowances due .....	0	0	0	0	0
16. Unauthorized reinsurance offset .....	0	0	0	0	0
17. Offset for reinsurance with Certified Reinsurers .....	0	0	0	0	0
<b>C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)</b>					
18. Funds deposited by and withheld from (F) .....	0	0	0	0	0
19. Letters of credit (L) .....	0	0	0	0	0
20. Trust agreements (T) .....	0	0	0	0	0
21. Other (O) .....	0	0	0	0	0
<b>D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)</b>					
22. Multiple Beneficiary Trust .....	0	0	0	0	0
23. Funds deposited by and withheld from (F) .....	0	0	0	0	0
24. Letters of credit (L) .....	0	0	0	0	0
25. Trust agreements (T) .....	0	0	0	0	0
26. Other (O) .....	0	0	0	0	0

**SCHEDULE S - PART 7**

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12) .....	1,665,808,547		1,665,808,547
2. Reinsurance (Line 16) .....	0	0	0
3. Premiums and considerations (Line 15) .....	12,562,957	71,480	12,634,437
4. Net credit for ceded reinsurance .....	XXX	9,564,334	9,564,334
5. All other admitted assets (balance) .....	40,664,780		40,664,780
6. Total assets excluding Separate Accounts (Line 26) .....	1,719,036,284	9,635,814	1,728,672,098
7. Separate Account assets (Line 27) .....	0		0
8. Total assets (Line 28)	1,719,036,284	9,635,814	1,728,672,098
<b>LIABILITIES, CAPITAL AND SURPLUS (Page 3)</b>			
9. Contract reserves (Lines 1 and 2) .....	1,512,112,962	9,270,566	1,521,383,528
10. Liability for deposit-type contracts (Line 3) .....			0
11. Claim reserves (Line 4) .....	28,286,556	365,248	28,651,804
12. Policyholder dividends/member refunds/reserves (Lines 5 through 7) .....	0		0
13. Premium & annuity considerations received in advance (Line 8) .....	0		0
14. Other contract liabilities (Line 9) .....	154,854		154,854
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount) .....	0	0	0
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount) .....	0		0
17. Reinsurance with Certified Reinsurers (Line 24.02 inset amount) .....	0		0
18. Funds held under reinsurance treaties with Certified Reinsurers (Line 24.03 inset amount) .....			0
19. All other liabilities (balance) .....	22,390,511		22,390,511
20. Total liabilities excluding Separate Accounts (Line 26) .....	1,562,944,883	9,635,814	1,572,580,697
21. Separate Account liabilities (Line 27) .....			0
22. Total liabilities (Line 28) .....	1,562,944,883	9,635,814	1,572,580,697
23. Capital & surplus (Line 38) .....	156,091,401	XXX	156,091,401
24. Total liabilities, capital & surplus (Line 39)	1,719,036,284	9,635,814	1,728,672,098
<b>NET CREDIT FOR CEDED REINSURANCE</b>			
25. Contract reserves .....	9,270,566		
26. Claim reserves .....	365,248		
27. Policyholder dividends/reserves .....	0		
28. Premium & annuity considerations received in advance .....	0		
29. Liability for deposit-type contracts .....	0		
30. Other contract liabilities .....	0		
31. Reinsurance ceded assets .....	0		
32. Other ceded reinsurance recoverables .....	0		
33. Total ceded reinsurance recoverables .....	9,635,814		
34. Premiums and considerations .....	71,480		
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 .....	71,480		
41. Total net credit for ceded reinsurance	9,564,334		

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

Allocated by States and Territories

States, Etc.		Direct Business Only					
		1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1. Alabama	AL	53,552	0			0	53,552
2. Alaska	AK	0	0			0	0
3. Arizona	AZ	102,224	0			0	102,224
4. Arkansas	AR	401,610	0			0	401,610
5. California	CA	71,739	0			0	71,739
6. Colorado	CO	73,702	0			0	73,702
7. Connecticut	CT	84	0			0	84
8. Delaware	DE	2,477	0			0	2,477
9. District of Columbia	DC	192	0			0	192
10. Florida	FL	109,028	0			0	109,028
11. Georgia	GA	203,948	0			0	203,948
12. Hawaii	HI	1,199	0			0	1,199
13. Idaho	ID	3,923	0			0	3,923
14. Illinois	IL	106,438	0			0	106,438
15. Indiana	IN	24,908	0			0	24,908
16. Iowa	IA	74,130	0			0	74,130
17. Kansas	KS	246,265	0			0	246,265
18. Kentucky	KY	262,032	0			0	262,032
19. Louisiana	LA	85,786	0			0	85,786
20. Maine	ME	10,286	0			0	10,286
21. Maryland	MD	37,644	0			0	37,644
22. Massachusetts	MA	1,250	0			0	1,250
23. Michigan	MI	16,676	0			0	16,676
24. Minnesota	MN	72,237	0			0	72,237
25. Mississippi	MS	26,139	0			0	26,139
26. Missouri	MO	150,779	0			0	150,779
27. Montana	MT	23,243	0			0	23,243
28. Nebraska	NE	39,627	0			0	39,627
29. Nevada	NV	15,966	0			0	15,966
30. New Hampshire	NH	8,662	0			0	8,662
31. New Jersey	NJ	1,530	0			0	1,530
32. New Mexico	NM	31,531	0			0	31,531
33. New York	NY	0	0			0	0
34. North Carolina	NC	162,431	0			0	162,431
35. North Dakota	ND	11,637	0			0	11,637
36. Ohio	OH	125,217	0			0	125,217
37. Oklahoma	OK	96,701	0			0	96,701
38. Oregon	OR	8,132	0			0	8,132
39. Pennsylvania	PA	34,105	0			0	34,105
40. Rhode Island	RI	0	0			0	0
41. South Carolina	SC	121,643	0			0	121,643
42. South Dakota	SD	16,369	0			0	16,369
43. Tennessee	TN	148,223	0			0	148,223
44. Texas	TX	2,346,019	0			0	2,346,019
45. Utah	UT	4,379	0			0	4,379
46. Vermont	VT	469	0			0	469
47. Virginia	VA	90,444	0			0	90,444
48. Washington	WA	102,859	0			0	102,859
49. West Virginia	WV	112,560	0			0	112,560
50. Wisconsin	WI	23,983	0			0	23,983
51. Wyoming	WY	18,817	0			0	18,817
52. American Samoa	AS	0	0			0	0
53. Guam	GU	0	0			0	0
54. Puerto Rico	PR	0	0			0	0
55. U.S. Virgin Islands	VI	0	0			0	0
56. Northern Mariana Islands	MP	0	0			0	0
57. Canada	CAN	0	0			0	0
58. Aggregate Other Alien	OT	0	0			0	0
59. Total		5,682,795	0	0	0	0	5,682,795

## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America

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

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domestic- ciliary Loca- tion	10 Rela- tionship to Report- ing Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Owner- ship Provide Percent- age	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Re- quired? (Yes/No)	16 *	
	Globe Life Inc.	00000	63-0780404		0000320335	NYSE	Globe Life Inc.	DE	UIP						NO	
		00000	20-5817522				TMK Buildings Corp.	TX	NIA	Globe Life Inc.	Ownership	100.000	Globe Life Inc.		NO	
		00000	20-5817632				TMK Properties LLP	TX	NIA	Globe Life Inc.	Ownership	.99.000	Globe Life Inc.		NO	
		00000	98-0230789				TMK Re Ltd	BMU	IA	Globe Life Inc.	Ownership	100.000	Globe Life Inc.		NO	
		00000	63-1235881				Torchmark Insurance Agency, Inc.	AL	NIA	Globe Life Inc.	Ownership	100.000	Globe Life Inc.		NO	
.0290	Globe Life Inc.	65331	63-0124600				Liberty National Life Insurance Company	NE	IA	Globe Life Inc.	Ownership	100.000	Globe Life Inc.		NO	
		00000	63-0031058				Brown-Service Funeral Homes Company Inc.	AL	NIA	Liberty National Life Insurance Company	Ownership	100.000	Globe Life Inc.		NO	
		00000	63-0909884				Liberty National Auto Club Inc.	AL	NIA	Liberty National Life Insurance Company	Ownership	100.000	Globe Life Inc.		NO	
.0290	Globe Life Inc.	91472	63-0782739	1610611			Globe Life And Accident Insurance Company	NE	UDP	Globe Life Inc.	Ownership	100.000	Globe Life Inc.		NO	
		00000	47-4172726				Globe Life Insurance Agency, Inc.	TX	NIA	Globe Life Inc.	Ownership	100.000	Globe Life Inc.		NO	
		00000	73-1458991				Globe Marketing Services, Inc.	OK	NIA	Globe Life And Accident Insurance Company	Ownership	100.000	Globe Life Inc.		NO	
		00000	73-1209844				Specialized Advertising Group, Inc.	TX	NIA	Globe Life Inc.	Ownership	100.000	Globe Life Inc.		NO	
		00000	20-8022184				Globe Marketing and Advertising Distributors, LLC	DE	NIA	Globe Life And Accident Insurance Company	Ownership	100.000	Globe Life Inc.		NO	
.0290	Globe Life Inc.	60577	74-1365936	1102198			American Income Life Insurance Company	IN	IA	Globe Life Inc.	Ownership	100.000	Globe Life Inc.		NO	
.0290	Globe Life Inc.	10093	22-3711800				National Income Life Insurance Company	NY	IA	American Income Life Insurance Company	Ownership	100.000	Globe Life Inc.		NO	
		00000	75-2852508				AILIC Receivables Corporation	IN	NIA	Globe Life Inc.	Ownership	100.000	Globe Life Inc.		NO	
		00000	75-2872627				American Income Marketing Services, Inc.	TX	NIA	American Income Life Insurance Company	Ownership	100.000	Globe Life Inc.		NO	
.0290	Globe Life Inc.	92916	73-1128555				United American Insurance Company	NE	IA	Globe Life Inc.	Ownership	100.000	Globe Life Inc.		NO	
.0290	Globe Life Inc.	74101	13-3156923				Globe Life Insurance Company of New York	NY	IA	United American Insurance Company	Ownership	100.000	Globe Life Inc.		NO	
							Family Heritage Life Insurance Company of America	OH	IA	Globe Life And Accident Insurance Company	Ownership	100.000	Globe Life Inc.		NO	
.0290	Globe Life Inc.	77968	34-1626521				American Life and Health Group, Inc.	TX	NIA	Globe Life Inc.	Ownership	100.000	Globe Life Inc.		NO	
		00000	59-2695248				AIL0 1, LLC	TX	NIA	American Income Life Insurance Company	Ownership	100.000	Globe Life Inc.		NO	
		00000	82-5431371				LND 01, LLC	TX	NIA	Liberty National Life Insurance Company	Ownership	100.000	Globe Life Inc.		NO	
		00000	84-3765985									100.000	Globe Life Inc.		NO	

Asterisk	Explanation

## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
....00000	63-0780404	Globe Life Inc.	368,173,953	38,868,047			72,664,880				479,706,880	
....77968	34-1626521	Family Heritage Life Insurance Company of America	(41,075,421)				(8,416,992)				(49,492,413)	
....65331	63-0124600	Liberty National Life Insurance Company ..	(102,768,000)				(85,688,699)	184,881,587			(3,575,112)	(1,006,011,882)
....91472	63-0782739	Globe Life And Accident Insurance Company	22,692,468	(38,868,047)			31,663,988	(62,845,983)			(47,357,574)	158,828,522
....92916	73-1128555	United American Insurance Company ..	(28,342,060)				(31,359,829)	63,203,294			3,501,405	614,827,677
....60577	74-1365936	American Income Life Insurance Company ..	(163,498,932)				(50,357,924)	(227,189,657)			(441,046,513)	372,311,454
....74101	13-3156923	Globe Life Insurance Company of New York ..	(3,659,940)				(3,541,703)				(7,201,643)	
....10093	22-3711800	National Income Life Insurance Company ..	(12,503,068)				(10,034,694)				(22,537,762)	
....00000	98-0230789	TMK Re. , LTD .....	(31,000,000)					41,950,759			10,950,759	(139,955,771)
....00000	20-5817632	TMK Properties. LP .....	(8,100,000)				7,267,712				(832,288)	
....00000	20-5817522	TMK Buildings Corp .....	81,000								81,000	
....00000	73-1458991	Globe Marketing Services, Inc .....									0	
....00000	20-8022184	Globe Marketing and Advertising Distributors, LLC .....					78,041,803				78,041,803	
....00000	82-5431371	AIL01, LLC .....					(238,542)				(238,542)	
		9999999 Control Totals	0	0	0	0	0	0	0	XXX	0	0
												0

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America

## SCHEDULE Y

**PART 3 - ULTIMATE CONTROLLING PARTY AND LISTING OF OTHER U.S. INSURANCE GROUPS OR ENTITIES UNDER THAT ULTIMATE CONTROLLING PARTY'S CONTROL**

**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES****REQUIRED FILINGS**

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

		Responses
<b>MARCH FILING</b>		
1.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
3.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	YES
4.	Will an actuarial opinion be filed by March 1?	YES
<b>APRIL FILING</b>		
5.	Will Management's Discussion and Analysis be filed by April 1?	YES
6.	Will the Life, Health & Annuity Guaranty Association 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
<b>JUNE FILING</b>		
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
<b>SUPPLEMENTAL FILINGS</b>		
The following supplemental reports are required to be filed as part of your annual statement filing <u>if your company is engaged in the type of business covered by the supplement. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below.</u> If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.		
<b>MARCH FILING</b>		
10.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? (Not applicable to fraternal benefit societies) ..	YES
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?	NO
15.	Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?	NO
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?	NO
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?	NO
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 2022 OF THE Family Heritage Life Insurance Company of America  
**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?	.....	NO
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?	.....	YES
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?	.....	NO
44. Will the Variable Annuities Supplement be filed with the state of domicile and the NAIC by April 1?	.....	NO
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?	.....	NO

**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:		

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Bar Codes:

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]

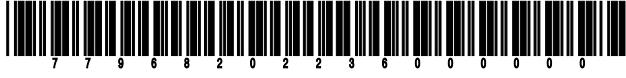
14. Non-Guaranteed Opinion for Exhibit 5 [Document Identifier 370]

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

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

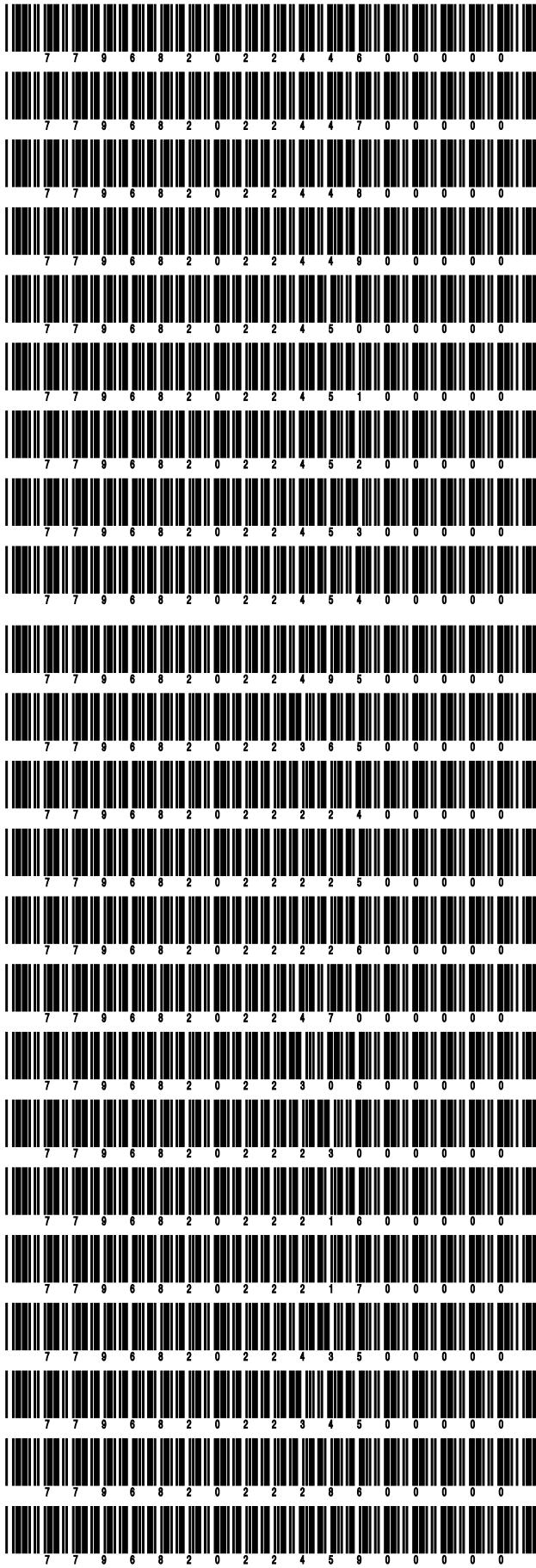
17. Actuarial Opinion on Synthetic Guaranteed Investment Contracts [Document Identifier 444]

18. Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 445]



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America  
**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

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]
22. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) [Document Identifier 449]
23. C-3 RBC Certifications Required Under C-3 Phase I [Document Identifier 450]
24. C-3 RBC Certifications Required Under C-3 Phase II [Document Identifier 451]
25. Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities [Document Identifier 452]
26. Modified Guaranteed Annuity Model Regulation [Document Identifier 453]
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]
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]
43. Supplemental Term and Universal Life Insurance Reinsurance Exhibit [Document Identifier 345]
44. Variable Annuities Supplement [Document Identifier 286]
47. Variable Annuities Summary of the PBR Actuarial Report [Document Identifier 459]



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America  
**OVERFLOW PAGE FOR WRITE-INS**

Additional Write-ins for Assets Line 25

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
2504. Other Assets Nonadmitted .....	40,497	40,497	0	
2597. Summary of remaining write-ins for Line 25 from overflow page	40,497	40,497	0	0

Additional Write-ins for Exhibit 2 Line 9.3

	Insurance			5 Investment	6 Fraternal	7 Total			
	1 Life	Accident and Health							
		2 Cost Containment	3 All Other						
09.304. Consultant Fees .....		385,628				385,628			
09.305. Donations .....		95,126				95,126			
09.306. Office Services .....		32,852				32,852			
09.307. Seminars .....		8,732				8,732			
09.397. Summary of remaining write-ins for Line 9.3 from overflow page	0	0	522,338	0	0	522,338			

Additional Write-ins for Exhibit of Nonadmitted Assets Line 25

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
2504. Other Assets Nonadmitted .....	40,497	40,497	0
2597. Summary of remaining write-ins for Line 25 from overflow page	40,497	40,497	0



SUPPLEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America

**VM-20 RESERVES SUPPLEMENT – PART 1A**

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

For The Year Ended December 31, 2022

(To Be Filed by March 1)

NAIC Group Code	0290	NAIC Company Code 77968		
		Prior Year	Current Year	
	1	2	3	
	Reported Reserve	Reported Reserve	Due and Deferred Premium Asset	
1.	Post-Reinsurance-Ceded Reserve			
1.1.	Term Life Insurance.....	184	238	113
1.2.	Universal Life With Secondary Guarantee .....			
1.3.	Non-Participating Whole Life .....	819,153	1,965,623	36,675
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)	819,337	1,965,861	XXX
3.	Pre-Reinsurance-Ceded Reserve			
3.1.	Term Life Insurance.....	184	238	113
3.2.	Universal Life With Secondary Guarantee .....			
3.3.	Non-Participating Whole Life .....	819,153	1,965,623	36,675
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)	819,337	1,965,861	XXX
5.	Total Reserves Ceded (Line 4 minus Line 2)	0	0	XXX
<b>DETAILS OF WRITE-INS</b>				
1.901.	.....			
1.902.	.....			
1.903.	.....			
1.998.	Summary of remaining write-ins for Line 1.9 from overflow page .....	0	0	0
1.999.	Totals (Lines 1.901 thru 1.903 plus 1.998) (Line 1.9 above)	0	0	0
3.901.	.....			
3.902.	.....			
3.903.	.....			
3.998.	Summary of remaining write-ins for Line 3.9 from overflow page .....	0	0	0
3.999.	Totals (Lines 3.901 thru 3.903 plus 3.998) (Line 3.9 above)	0	0	0

## SUPPLEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America

## VM-20 RESERVES SUPPLEMENT – PART 1B

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

For The Year Ended December 31, 2022

(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 .....	238	(82,124)		XXX	XXX			XXX	XXX	XXX	XXX	XXX
1.2. Universal Life With Secondary Guarantee .....				XXX	XXX			XXX	XXX	XXX	XXX	XXX
1.3. Non-Participating Whole Life .....	1,965,623	(3,853,532)		XXX	XXX			XXX	XXX	XXX	XXX	XXX
1.4. Participating Whole Life .....				XXX	XXX			XXX	XXX	XXX	XXX	XXX
1.5. Universal Life Without Secondary Guarantee .....				XXX	XXX			XXX	XXX	XXX	XXX	XXX
1.6. Variable Universal Life Without Secondary Guarantee .....				XXX	XXX			XXX	XXX	XXX	XXX	XXX
1.7. Variable Life Without Secondary Guarantee .....				XXX	XXX			XXX	XXX	XXX	XXX	XXX
1.8. Indexed Life Without Secondary Guarantee .....				XXX	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 .....	238	(82,124)				7,550					XXX	
3.2. Universal Life With Secondary Guarantee .....												
3.3. Non-Participating Whole Life .....	1,965,623	(3,853,532)		9,252	253,109							
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
<b>DETAILS OF WRITE-INS</b>												
1.901.				XXX	XXX			XXX	XXX		XXX	XXX
1.902.				XXX	XXX			XXX	XXX		XXX	XXX
1.903.				XXX	XXX			XXX	XXX		XXX	XXX
1.998. Summary of remaining write-ins for Line 1.9 from 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

SUPPLEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America

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

Life PBR Exemption

For The Year Ended December 31, 2022

(To Be Filed by March 1)

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

1. Has the company been allowed a Life PBR Exemption from the reserve requirements of VM-20 of the Valuation Manual by their state of domicile? ..... Yes [ ] No [ X ]
2. If the response to Question 1 is "Yes", then check the source of the "Life PBR Exemption" definition? (Check either 2.1, 2.2 or 2.3)
  - 2.1 NAIC Adopted VM [ ]
  - 2.2 State Statute (SVL) [ ] Complete items "a" and "b" as appropriate.
    - a. Is the criteria in the State Statute (SVL) different from the NAIC adopted VM? ..... Yes [ ] No [ ]
    - b. If the answer to "a" above is "Yes", provide the criteria the state has used to allow the Life PBR Exemption (e.g., Group/Legal Entity criteria) and the minimum reserve requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS NAIC VM):  
.....
- 2.3 State Regulation [ ] Complete items "a" and "b" as appropriate.
  - a. Is the criteria in the State Regulation different from the NAIC adopted VM? ..... Yes [ ] No [ ]
  - b. If the answer to "a" above is "Yes", provide the criteria of the state's Life PBR Exemption that the company has met 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):  
.....
3. If the criteria for the "Life PBR Exemption" is the same as or substantially similar to the NAIC adopted VM (i.e., Question 2.1 is checked or Question 2.2.a is "No" or Question 2.3.a is "No"), then provide the most recent year that the company filed a statement of exemption that was allowed. If such calendar year is not the current calendar year for this statement, also provide confirmation that the company meets the criteria for utilizing an ongoing statement of exemption, meaning that none of the following apply:
  - 1) the company fails to meet either of the conditions in VM Section II, Subsection 1.G.2,
  - 2) the policies exempted contain those in VM Section II, Subsection 1.G.3, or
  - 3) the domiciliary commissioner contacted the company prior to Sept. 1 and notified them that the statement of exemption was not allowed:  
.....

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

Other Exclusions from Life PBR

For The Year Ended December 31, 2022

(To Be Filed by March 1)

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



SUPPLEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America

## SCHEDULE O SUPPLEMENT

For The Year Ended December 31, 2022  
(To Be Filed by March 1)

Of The Family Heritage Life Insurance Company of America .....

ADDRESS (City, State and Zip Code) Cleveland, OH 44147-3529 .....

NAIC Group Code 0290 .....

NAIC Company Code 77968 .....

Employer's Identification Number (FEIN) 34-1626521 .....

### SUPPLEMENTAL SCHEDULE O - PART 1

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

#### Section A - Group Accident and Health

Years in Which Losses Were Incurred	Cumulative Net Amounts Paid Policyholders				
	1 2018	2 2019	3 2020	4 2021	5 2022(a)
1. Prior .....	373	62	32	11	16
2. 2018 .....	804	373	31	4	13
3. 2019 .....	XXX	1,117	526	35	12
4. 2020 .....	XXX	XXX	919	520	39
5. 2021 .....	XXX	XXX	XXX	1,272	442
6. 2022 .....	XXX	XXX	XXX	XXX	1,254

#### Section B - Other Accident and Health

1. Prior .....	16,209	2,631	1,276	639	467
2. 2018 .....	63,101	16,984	1,350	359	227
3. 2019 .....	XXX	78,990	16,339	1,272	652
4. 2020 .....	XXX	XXX	82,283	14,911	1,283
5. 2021 .....	XXX	XXX	XXX	87,322	17,199
6. 2022 .....	XXX	XXX	XXX	XXX	94,736

#### Section C - Credit Accident and Health

1. Prior .....					
2. 2018 .....					
3. 2019 .....	XXX				
4. 2020 .....	XX	X			
5. 2021 .....	XX	XX	XXX		
6. 2022 .....	XXX	XX		XXX	

#### Section D -

1. Prior .....					
2. 2018 .....					
3. 2019 .....	XXX				
4. 2020 .....	XX	X			
5. 2021 .....	XX	XX	XXX		
6. 2022 .....	XXX	XX		XXX	

#### Section E -

1. Prior .....					
2. 2018 .....					
3. 2019 .....	XXX				
4. 2020 .....	XX	X			
5. 2021 .....	XX	XX	XXX		
6. 2022 .....	XXX	XX		XXX	

#### Section F -

1. Prior .....					
2. 2018 .....					
3. 2019 .....	XXX				
4. 2020 .....	XX	X			
5. 2021 .....	XX	XX	XXX		
6. 2022 .....	XXX	XX		XXX	

#### Section G -

1. Prior .....					
2. 2018 .....					
3. 2019 .....	XXX				
4. 2020 .....	XX	X			
5. 2021 .....	XX	XX	XXX		
6. 2022 .....	XXX	XX		XXX	

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

Supplement Schedule O - Part 2 Section A

**N O N E**

Supplement Schedule O - Part 2 Section B

**N O N E**

Supplement Schedule O - Part 2 Section C

**N O N E**

Supplement Schedule O - Part 2 Section D

**N O N E**

Supplement Schedule O - Part 2 Section E

**N O N E**

Supplement Schedule O - Part 2 Section F

**N O N E**

Supplement Schedule O - Part 2 Section G

**N O N E**

SUPPLEMENT FOR THE YEAR 2022 OF THE Family Heritage Life Insurance Company of America  
**SCHEDULE O SUPPLEMENT**

**SUPPLEMENTAL SCHEDULE O - PART 3**

Development of Incurred Losses

(\$000 Omitted)

**Section A - Group Accident and Health**

Years in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders and Claim Liability and Reserve Outstanding at End of Year				
	1 2018	2 2019	3 2020	4 2021	5 2022
1. 2018 .....	2,011	1,285	1,263	XXX.....	XXX.....
2. 2019 .....	XXX.....	2,202	1,785	1,727	XXX.....
3. 2020 .....	XXX.....	XXX.....	2,264	1,528	1,530
4. 2021 .....	XXX.....	XXX.....	XXX.....	2,339	1,834
5. 2022	XXX	XXX	XXX	XXX	2,606

**Section B - Other Accident and Health**

1. 2018 .....	85,373	82,893	82,711	XXX.....	XXX.....
2. 2019 .....	XXX.....	101,191	97,844	97,557	XXX.....
3. 2020 .....	XXX.....	XXX.....	105,559	99,268	99,679
4. 2021 .....	XXX.....	XXX.....	XXX.....	109,508	107,203
5. 2022	XXX	XXX	XXX	XXX	119,175

**Section C - Credit Accident and Health**

1. 2018 .....				XXX.....	XXX.....
2. 2019 .....	XXX.....				XXX.....
3. 2020 .....	XXX.....				
4. 2021 .....	XXX.....	XXX.....	XXX.....		
5. 2022	XXX	XXX	XXX	XXX	

**Section D -**

1. 2018 .....				XXX.....	XXX.....
2. 2019 .....	XXX.....				XXX.....
3. 2020 .....	XXX.....				
4. 2021 .....	XXX.....	XXX.....	XXX.....		
5. 2022	XXX	XXX	XXX	XXX	

**Section E -**

1. 2018 .....				XXX.....	XXX.....
2. 2019 .....	XXX.....				XXX.....
3. 2020 .....	XXX.....				
4. 2021 .....	XXX.....	XXX.....	XXX.....		
5. 2022	XXX	XXX	XXX	XXX	

**Section F -**

1. 2018 .....				XXX.....	XXX.....
2. 2019 .....	XXX.....				XXX.....
3. 2020 .....	XXX.....				
4. 2021 .....	XXX.....	XXX.....	XXX.....		
5. 2022	XXX	XXX	XXX	XXX	

**Section G -**

1. 2018 .....				XXX.....	XXX.....
2. 2019 .....	XXX.....				XXX.....
3. 2020 .....	XXX.....				
4. 2021 .....	XXX.....	XXX.....	XXX.....		
5. 2022	XXX	XXX	XXX	XXX	

**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 2018	2 2019	3 2020	4 2021	5 2022
1. 2018 .....					
2. 2019 .....	XXX				
3. 2020 .....	XXX	XX			
4. 2021 .....	XXX	XXX	XXX		
5. 2022 .....	XXX	XXX	XXX	XXX	

**Section B - Other Accident and Health**

1. 2018 .....					
2. 2019 .....	XXX				
3. 2020 .....	XXX				
4. 2021 .....	XX	XX	XX		
5. 2022 .....	XXX	XX	XXX	XXX	

**Section C - Credit Accident and Health**

1. 2018 .....					
2. 2019 .....	XXX				
3. 2020 .....	XXX				
4. 2021 .....	XX	XX	XX		
5. 2022 .....	XXX	XX	XXX	XXX	

**Section D -**

1. 2018 .....					
2. 2019 .....	XXX				
3. 2020 .....	XXX				
4. 2021 .....	XX	XX	XX		
5. 2022 .....	XXX	XX	XXX	XXX	

**Section E -**

1. 2018 .....					
2. 2019 .....	XXX				
3. 2020 .....	XXX				
4. 2021 .....	XX	XX	XX		
5. 2022 .....	XXX	XX	XXX	XXX	

**Section F -**

1. 2018 .....					
2. 2019 .....	XXX				
3. 2020 .....	XXX				
4. 2021 .....	XX	XX	XX		
5. 2022 .....	XXX	XX	XXX	XXX	

**Section G -**

1. 2018 .....					
2. 2019 .....	XXX				
3. 2020 .....	XXX				
4. 2021 .....	XX	XX	XX		
5. 2022 .....	XXX	XX	XXX	XXX	

**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 .....	Development	979
3. Individual Annuity .....		
4. Supplementary Contracts .....		
5. Credit Life .....		
6. Group Life .....		
7. Group Annuities .....		
8. Group Accident and Health .....	Development	1,572
9. Credit Accident and Health .....		
10. Other Accident and Health .....	Development	29,417
11. Total .....		31,968