



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

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2023
OF THE CONDITION AND AFFAIRS OF THE

Family Heritage Life Insurance Company of America

NAIC Group Code02900290NAIC Company Code77968Employer's ID Number34-1626521
(Current)(Prior)

Organized under the Laws ofOHIO, State of Domicile or Port of EntryOH

Country of DomicileUnited States of America

Licensed as business type:Life, Accident and Health [X] Fraternal Benefit Societies []

Incorporated/Organized08/22/1989Commenced Business11/17/1989

Statutory Home Office6001 East Royalton Road, Suite 200Cleveland, OH, US 44147-3529
(Street and Number)(City or Town, State, Country and Zip Code)

Main Administrative Office6001 East Royalton Road, Suite 200Cleveland, OH, US 44147-3529440-922-5200
(Street and Number)(City or Town, State, Country and Zip Code)(Area Code) (Telephone Number)

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

Primary Location of Books and Records3700 South Stonebridge DriveMcKinney, TX, US 75070-8080469-617-4407
(Street and Number)(City or Town, State, Country and Zip Code)(Area Code) (Telephone Number)

Internet Website Addresshttps://home.globelifeinsurance.com/familyheritage

Statutory Statement ContactBrett Turner469-617-4407
(Name)(Area Code) (Telephone Number)
bxturner@globe.life972-569-3734
(E-mail Address)(FAX Number)

OFFICERS

PresidentThomas Peter KalmbachSecretaryJoel Patrick Scarborough

TreasurerMichael Shane HenrieAppointed ActuaryHongwei "David" Zhao

OTHER

Seamus Fitzpatrick, Division Senior Vice PresidentRobert Edward Hensley, Divisional Senior Vice PresidentTony Michael Martella, Division Senior Vice President

Jeffrey Scott Morris, Divisional Senior Vice President

DIRECTORS OR TRUSTEES

Thomas Peter KalmbachJoel Patrick ScarboroughJeffrey Scott Morris

Maria Rose BurnettJon Andrew AdamsRebecca Evans Zorn

State ofTexasSS

County ofCollin

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 KalmbachMichael Shane HenrieJoel Patrick Scarborough
PresidentTreasurerSecretary

Subscribed and sworn to before me thisa. Is this an original filing? Yes [X] No []
23rdb. If no,
day ofFebruary, 20241. State the amendment number.....
2. Date filed
3. Number of pages attached.....

Michelle Batiste
Notary Public
January 12, 2028



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Alabama DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole .....56,128							0			585		585
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other .....(f)							0					0
11. Total Individual Life	56,128	0	0	0	0	0	0	0	0	585	0	585
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other .....(f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other .....(f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other .....(f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual .....(d)							0	XXX	XXX	XXX		0
35. Comprehensive group .....(d)							0	XXX	XXX	XXX		0
36. Medicare Supplement .....(d)							0	XXX	XXX	XXX		0
37. Vision only .....(d)							0	XXX	XXX	XXX		0
38. Dental only .....(d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan .....(d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare .....(d)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid .....(d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income .....(d)							0	XXX	XXX	XXX		0
44. Long-term care .....(d)							0	XXX	XXX	XXX		0
45. Other health .....(d)	3,713,545						0	XXX	XXX	XXX	1,781,880	1,781,880
46. Total Accident and Health	3,713,545	0	0	0	0	0	0	XXX	XXX	XXX	1,781,880	1,781,880
47. Total	3,769,673 (c)	0	0	0	0	0	0	0	0	585	1,781,880	1,782,465

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Alabama		DURING THE YEAR							2023		NAIC Company Code		77968	
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)				
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount			
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount										
Individual Life																				
1. Industrial									0	0										
2. Whole									0	0		12	270,000	(5)	(245,000)	210	5,580,000			
3. Term									0	0										
4. Indexed									0	0										
5. Universal									0	0										
6. Universal with secondary guarantees									0	0										
7. Variable									0	0										
8. Variable universal									0	0										
9. Credit									0	0										
10. Other		(f)							0	0										
11. Total Individual Life			0	0	0	0	0	0	0	0	0	12	270,000	(5)	(245,000)	210	5,580,000			
Group Life																				
12. Whole									0	0										
13. Term									0	0										
14. Universal									0	0										
15. Variable									0	0										
16. Variable universal									0	0										
17. Credit									0	0										
18. Other		(f)							0	0							(a)			
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Individual Annuities																				
20. Fixed									0	0										
21. Indexed									0	0										
22. Variable with guarantees									0	0										
23. Variable without guarantees									0	0										
24. Life contingent payout									0	0										
25. Other		(f)							0	0										
26. Total Individual Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Group Annuities																				
27. Fixed									0	0										
28. Indexed									0	0										
29. Variable with guarantees									0	0										
30. Variable without guarantees									0	0										
31. Life contingent payout									0	0										
32. Other		(f)							0	0										
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Accident and Health																				
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	895	549,962	(745)	(488,679)	5,381	3,798,833			
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	895	549,962	(745)	(488,679)	5,381	3,798,833			
47. TOTAL			0	0	0	0	0	0	0	0	0	907	819,962	(750)	(733,679)	5,591	9,378,833			

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Alaska DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other	(f)						0					0
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other	(f)						0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other	(f)						0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other	(f)						0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual	(d)						0	XXX	XXX	XXX		0
35. Comprehensive group	(d)						0	XXX	XXX	XXX		0
36. Medicare Supplement	(d)						0	XXX	XXX	XXX		0
37. Vision only	(d)						0	XXX	XXX	XXX		0
38. Dental only	(d)						0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan	(d)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare	(d)	(e)					0	XXX	XXX	XXX		0
41. Title XIX Medicaid	(d)						0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income	(d)						0	XXX	XXX	XXX		0
44. Long-term care	(d)						0	XXX	XXX	XXX		0
45. Other health	(d)						0	XXX	XXX	XXX	64,590	64,590
46. Total Accident and Health	78,842	0	0	0	0	0	0	XXX	XXX	XXX	64,590	64,590
47. Total	78,842 (c)	0	0	0	0	0	0	0	0	0	64,590	64,590

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Alaska		DURING THE YEAR		2023		NAIC Company Code		77968							
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Policy Exhibit		In Force December 31, Current Year (b)							
			Claims Settled During Current Year				Total Settled During Current Year					Issued During Year		Other Changes to In Force (Net)							
			Totals Paid		Reduction by Compromise		Amount Rejected		23			24		25		26		27		28	
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount				
Individual Life																					
1. Industrial									0	0											
2. Whole									0	0											
3. Term									0	0											
4. Indexed									0	0											
5. Universal									0	0											
6. Universal with secondary guarantees									0	0											
7. Variable									0	0											
8. Variable universal									0	0											
9. Credit									0	0											
10. Other		(f)							0	0											
11. Total Individual Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Life																					
12. Whole									0	0											
13. Term									0	0											
14. Universal									0	0											
15. Variable									0	0											
16. Variable universal									0	0											
17. Credit									0	0											
18. Other		(f)							0	0									(a)		
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Individual Annuities																					
20. Fixed									0	0											
21. Indexed									0	0											
22. Variable with guarantees									0	0											
23. Variable without guarantees									0	0											
24. Life contingent payout									0	0											
25. Other		(f)							0	0											
26. Total Individual Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Annuities																					
27. Fixed									0	0											
28. Indexed									0	0											
29. Variable with guarantees									0	0											
30. Variable without guarantees									0	0											
31. Life contingent payout									0	0											
32. Other		(f)							0	0											
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Accident and Health																					
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX										
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8	5,160	3	7,842	131	89,441				
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8	5,160	3	7,842	131	89,441				
47. TOTAL			0	0	0	0	0	0	0	0	0	8	5,160	3	7,842	131	89,441				

(a) 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 \$

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

(d) 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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:	Column 1) \$	Column 7) \$	Column 12) \$
2. Group Life - Other includes the following amounts related to Separate Account policies:	Column 1) \$	Column 7) \$	Column 12) \$
3. Individual Annuities - Other includes the following amounts related to Separate Account policies:	Column 1) \$	Column 7) \$	Column 12) \$
4. Group Annuities - Other includes the following amounts related to Separate Account policies:	Column 1) \$	Column 7) \$	Column 12) \$



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Arizona DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole	93,216						0	25,000		15,090		40,090
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other	(f)						0					0
11. Total Individual Life	93,216	0	0	0	0	0	0	25,000	0	15,090	0	40,090
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other	(f)						0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other	(f)						0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other	(f)						0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual	(d)						0	XXX	XXX	XXX		0
35. Comprehensive group	(d)						0	XXX	XXX	XXX		0
36. Medicare Supplement	(d)						0	XXX	XXX	XXX		0
37. Vision only	(d)						0	XXX	XXX	XXX		0
38. Dental only	(d)						0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan	(d)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare	(d) (e)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid	(d)						0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income	(d)						0	XXX	XXX	XXX		0
44. Long-term care	(d)						0	XXX	XXX	XXX		0
45. Other health	(d)						0	XXX	XXX	XXX		0
46. Total Accident and Health	6,468,799	0	0	0	0	0	0	XXX	XXX	XXX	1,434,104	1,434,104
47. Total	6,562,015 (c)	0	0	0	0	0	0	25,000	0	15,090	1,434,104	1,474,194

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Arizona		DURING THE YEAR							2023		NAIC Company Code		77968		
Line of Business				Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										22		Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
				13		Claims Settled During Current Year						23	24			25	26	27	28		
				Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount			
				14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount										
Individual Life				Incurred During Current Year																	
1. Industrial										0	0										
2. Whole				25,000	1	25,000				1	25,000		10	320,000	(9)	(535,000)	226	6,730,000			
3. Term									0	0											
4. Indexed									0	0											
5. Universal									0	0											
6. Universal with secondary guarantees									0	0											
7. Variable									0	0											
8. Variable universal									0	0											
9. Credit									0	0											
10. Other				(f)					0	0											
11. Total Individual Life				25,000	1	25,000	0	0	0	0	1	25,000	0	10	320,000	(9)	(535,000)	226	6,730,000		
Group Life																					
12. Whole									0	0											
13. Term									0	0											
14. Universal									0	0											
15. Variable									0	0											
16. Variable universal									0	0											
17. Credit									0	0											
18. Other				(f)					0	0								(a)			
19. Total Group Life				0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Individual Annuities																					
20. Fixed									0	0											
21. Indexed									0	0											
22. Variable with guarantees									0	0											
23. Variable without guarantees									0	0											
24. Life contingent payout									0	0											
25. Other				(f)					0	0											
26. Total Individual Annuities				0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Group Annuities																					
27. Fixed									0	0											
28. Indexed									0	0											
29. Variable with guarantees									0	0											
30. Variable without guarantees									0	0											
31. Life contingent payout									0	0											
32. Other				(f)					0	0											
33. Total Group Annuities				0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Accident and Health																					
34. Comprehensive individual				(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
35. Comprehensive group				(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
36. Medicare Supplement				(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
37. Vision only				(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
38. Dental only				(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
39. Federal Employees Health Benefits Plan				(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
40. Title XVIII Medicare				(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
41. Title XIX Medicaid				(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
42. Credit A&H					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
43. Disability income				(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
44. Long-term care				(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
45. Other health				(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,640	1,769,738	(1,550)	(1,079,792)	9,872	6,889,259			
46. Total Accident and Health					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,640	1,769,738	(1,550)	(1,079,792)	9,872	6,889,259			
47. TOTAL					25,000	1	25,000	0	0	0	0	1	25,000	0	2,650	2,089,738	(1,559)	(1,614,792)	10,098	13,619,259	

(a) 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 \$ _____.

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____.

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0.

(d) 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 _____.

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____.

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Arkansas DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole	444,384						0	45,000		38,732		83,732
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other	(f)						0					0
11. Total Individual Life	444,384	0	0	0	0	0	0	45,000	0	38,732	0	83,732
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other	(f)						0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other	(f)						0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other	(f)						0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual	(d)						0	XXX	XXX	XXX		0
35. Comprehensive group	(d)						0	XXX	XXX	XXX		0
36. Medicare Supplement	(d)						0	XXX	XXX	XXX		0
37. Vision only	(d)						0	XXX	XXX	XXX		0
38. Dental only	(d)						0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan	(d)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare	(d) (e)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid	(d)						0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income	(d)						0	XXX	XXX	XXX		0
44. Long-term care	(d)						0	XXX	XXX	XXX		0
45. Other health	(d)						0	XXX	XXX	XXX		0
46. Total Accident and Health	10,347,621	0	0	0	0	0	0	XXX	XXX	XXX	3,157,688	3,157,688
47. Total	10,792,005 (c)	0	0	0	0	0	0	45,000	0	38,732	3,157,688	3,241,420

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Arkansas		DURING THE YEAR				2023		NAIC Company Code		77968			
Line of Business		Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										22		Policy Exhibit					
		13		Claims Settled During Current Year										Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
				Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28		
				14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																			
1. Industrial																			
2. Whole		45,000	2	45,000					0	45,000		506	13,035,000	(392)	(10,415,000)	1,681	39,210,000		
3. Term									0	0									
4. Indexed									0	0									
5. Universal									0	0									
6. Universal with secondary guarantees									0	0									
7. Variable									0	0									
8. Variable universal									0	0									
9. Credit									0	0									
10. Other		(f)							0	0									
11. Total Individual Life		45,000	2	45,000	0	0	0	0	2	45,000	0	506	13,035,000	(392)	(10,415,000)	1,681	39,210,000		
Group Life																			
12. Whole									0	0									
13. Term									0	0									
14. Universal									0	0									
15. Variable									0	0									
16. Variable universal									0	0									
17. Credit									0	0									
18. Other		(f)							0	0							(a)		
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Individual Annuities																			
20. Fixed									0	0									
21. Indexed									0	0									
22. Variable with guarantees									0	0									
23. Variable without guarantees									0	0									
24. Life contingent payout									0	0									
25. Other		(f)							0	0									
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Annuities																			
27. Fixed									0	0									
28. Indexed									0	0									
29. Variable with guarantees									0	0									
30. Variable without guarantees									0	0									
31. Life contingent payout									0	0									
32. Other		(f)							0	0									
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Accident and Health																			
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,985	1,699,585	(2,026)	(1,186,685)	15,518	10,660,037		
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,985	1,699,585	(2,026)	(1,186,685)	15,518	10,660,037		
47. TOTAL			45,000	2	45,000	0	0	0	0	2	45,000	0	3,491	14,734,585	(2,418)	(11,601,685)	17,199	49,870,037	

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF California DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole .....75,763							0			865		865
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other .....(f)							0					0
11. Total Individual Life	75,763	0	0	0	0	0	0	0	0	865	0	865
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other .....(f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other .....(f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other .....(f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual .....(d)							0	XXX	XXX	XXX		0
35. Comprehensive group .....(d)							0	XXX	XXX	XXX		0
36. Medicare Supplement .....(d)							0	XXX	XXX	XXX		0
37. Vision only .....(d)							0	XXX	XXX	XXX		0
38. Dental only .....(d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan .....(d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare .....(d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid .....(d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income .....(d)							0	XXX	XXX	XXX		0
44. Long-term care .....(d)							0	XXX	XXX	XXX		0
45. Other health .....(d)	8,049,858						0	XXX	XXX	XXX	1,207,091	1,207,091
46. Total Accident and Health	8,049,858	0	0	0	0	0	0	XXX	XXX	XXX	1,207,091	1,207,091
47. Total	8,125,621 (c)	0	0	0	0	0	0	0	0	865	1,207,091	1,207,956

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		California		DURING THE YEAR		2023		NAIC Company Code		77968					
Line of Business		Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										22		Policy Exhibit					
		13		Claims Settled During Current Year										Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
				Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28		
				14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																			
1. Industrial									0	0									
2. Whole									0	0		34	1,395,000	(20)	(560,000)	195	6,850,000		
3. Term									0	0									
4. Indexed									0	0									
5. Universal									0	0									
6. Universal with secondary guarantees									0	0									
7. Variable									0	0									
8. Variable universal									0	0									
9. Credit									0	0									
10. Other (f)									0	0									
11. Total Individual Life		0	0	0	0	0	0	0	0	0	0	34	1,395,000	(20)	(560,000)	195	6,850,000		
Group Life																			
12. Whole									0	0									
13. Term									0	0									
14. Universal									0	0									
15. Variable									0	0									
16. Variable universal									0	0									
17. Credit									0	0									
18. Other (f)									0	0						(a)			
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Individual Annuities																			
20. Fixed									0	0									
21. Indexed									0	0									
22. Variable with guarantees									0	0									
23. Variable without guarantees									0	0									
24. Life contingent payout									0	0									
25. Other (f)									0	0									
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Annuities																			
27. Fixed									0	0									
28. Indexed									0	0									
29. Variable with guarantees									0	0									
30. Variable without guarantees									0	0									
31. Life contingent payout									0	0									
32. Other (f)									0	0									
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Accident and Health																			
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
36. Medicare Supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
39. Federal Employees Health Benefits Plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,803	1,126,216	(1,216)	(828,162)	11,871	8,369,993		
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,803	1,126,216	(1,216)	(828,162)	11,871	8,369,993		
47. TOTAL		0	0	0	0	0	0	0	0	0	0	1,837	2,521,216	(1,236)	(1,388,162)	12,066	15,219,993		

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Colorado DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole .....72,197							0			183		183
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other .....(f)							0					0
11. Total Individual Life	72,197	0	0	0	0	0	0	0	0	183	0	183
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other .....(f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other .....(f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other .....(f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual .....(d)							0	XXX	XXX	XXX		0
35. Comprehensive group .....(d)							0	XXX	XXX	XXX		0
36. Medicare Supplement .....(d)							0	XXX	XXX	XXX		0
37. Vision only .....(d)							0	XXX	XXX	XXX		0
38. Dental only .....(d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan .....(d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare .....(d)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid .....(d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income .....(d)							0	XXX	XXX	XXX		0
44. Long-term care .....(d)							0	XXX	XXX	XXX		0
45. Other health .....(d)	11,579,870						0	XXX	XXX	XXX	2,231,711	2,231,711
46. Total Accident and Health	11,579,870	0	0	0	0	0	0	XXX	XXX	XXX	2,231,711	2,231,711
47. Total	11,652,067 (c)	0	0	0	0	0	0	0	0	183	2,231,711	2,231,894

24.CO

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Colorado		DURING THE YEAR		2023		NAIC Company Code		77968			
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount							
Individual Life																	
1. Industrial									0	0							
2. Whole									0	0		30	630,000	(15)	(630,000)	237	6,780,000
3. Term									0	0							
4. Indexed									0	0							
5. Universal									0	0							
6. Universal with secondary guarantees									0	0							
7. Variable									0	0							
8. Variable universal									0	0							
9. Credit									0	0							
10. Other		(f)							0	0							
11. Total Individual Life			0	0	0	0	0	0	0	0	0	30	630,000	(15)	(630,000)	237	6,780,000
Group Life																	
12. Whole									0	0							
13. Term									0	0							
14. Universal									0	0							
15. Variable									0	0							
16. Variable universal									0	0							
17. Credit									0	0							
18. Other		(f)							0	0							(a)
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																	
20. Fixed									0	0							
21. Indexed									0	0							
22. Variable with guarantees									0	0							
23. Variable without guarantees									0	0							
24. Life contingent payout									0	0							
25. Other		(f)							0	0							
26. Total Individual Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities																	
27. Fixed									0	0							
28. Indexed									0	0							
29. Variable with guarantees									0	0							
30. Variable without guarantees									0	0							
31. Life contingent payout									0	0							
32. Other		(f)							0	0							
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health																	
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,529	2,753,336	(3,250)	(1,666,866)	21,933	12,182,679
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,529	2,753,336	(3,250)	(1,666,866)	21,933	12,182,679
47. TOTAL			0	0	0	0	0	0	0	0	0	5,559	3,383,336	(3,265)	(2,296,866)	22,170	18,962,679

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Connecticut DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole .....710							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other .....(f)							0					0
11. Total Individual Life	710	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other .....(f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other .....(f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other .....(f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual .....(d)							0	XXX	XXX	XXX		0
35. Comprehensive group .....(d)							0	XXX	XXX	XXX		0
36. Medicare Supplement .....(d)							0	XXX	XXX	XXX		0
37. Vision only .....(d)							0	XXX	XXX	XXX		0
38. Dental only .....(d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan .....(d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare .....(d)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid .....(d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income .....(d)							0	XXX	XXX	XXX		0
44. Long-term care .....(d)							0	XXX	XXX	XXX		0
45. Other health .....(d)	27,543						0	XXX	XXX	XXX	11,805	11,805
46. Total Accident and Health	27,543	0	0	0	0	0	0	XXX	XXX	XXX	11,805	11,805
47. Total	28,253 (c)	0	0	0	0	0	0	0	0	0	11,805	11,805

24.CT

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Connecticut		DURING THE YEAR						2023		NAIC Company Code		77968	
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)			
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount		
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount									
Individual Life																			
1. Industrial									0	0									
2. Whole									0	0				1	50,000	2	70,000		
3. Term									0	0									
4. Indexed									0	0									
5. Universal									0	0									
6. Universal with secondary guarantees									0	0									
7. Variable									0	0									
8. Variable universal									0	0									
9. Credit									0	0									
10. Other (f)									0	0									
11. Total Individual Life		0	0	0	0	0	0	0	0	0	0	0	1	50,000	2	70,000			
Group Life																			
12. Whole									0	0									
13. Term									0	0									
14. Universal									0	0									
15. Variable									0	0									
16. Variable universal									0	0									
17. Credit									0	0									
18. Other (f)									0	0							(a)		
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Individual Annuities																			
20. Fixed									0	0									
21. Indexed									0	0									
22. Variable with guarantees									0	0									
23. Variable without guarantees									0	0									
24. Life contingent payout									0	0									
25. Other (f)									0	0									
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Annuities																			
27. Fixed									0	0									
28. Indexed									0	0									
29. Variable with guarantees									0	0									
30. Variable without guarantees									0	0									
31. Life contingent payout									0	0									
32. Other (f)									0	0									
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Accident and Health																			
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
36. Medicare Supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
39. Federal Employees Health Benefits Plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			10	4,542	54	31,330		
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	10	4,542	54	31,330		
47. TOTAL		0	0	0	0	0	0	0	0	0	0	0	0	11	54,542	56	101,330		

(a) 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 \$

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

(d) 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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
2. Group Life - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
3. Individual Annuities - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
4. Group Annuities - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Delaware		DURING THE YEAR		2023		NAIC Company Code		77968					
Line of Business		Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										22		Policy Exhibit					
		13		Claims Settled During Current Year										Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
				Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28		
				14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																			
1. Industrial								0	0										
2. Whole								0	0		1	30,000	(2)	(40,000)	8	175,000			
3. Term								0	0										
4. Indexed								0	0										
5. Universal								0	0										
6. Universal with secondary guarantees								0	0										
7. Variable								0	0										
8. Variable universal								0	0										
9. Credit								0	0										
10. Other		(f)						0	0										
11. Total Individual Life			0	0	0	0	0	0	0	0	1	30,000	(2)	(40,000)	8	175,000			
Group Life																			
12. Whole								0	0										
13. Term								0	0										
14. Universal								0	0										
15. Variable								0	0										
16. Variable universal								0	0										
17. Credit								0	0										
18. Other		(f)						0	0							(a)			
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Individual Annuities																			
20. Fixed								0	0										
21. Indexed								0	0										
22. Variable with guarantees								0	0										
23. Variable without guarantees								0	0										
24. Life contingent payout								0	0										
25. Other		(f)						0	0										
26. Total Individual Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Group Annuities																			
27. Fixed								0	0										
28. Indexed								0	0										
29. Variable with guarantees								0	0										
30. Variable without guarantees								0	0										
31. Life contingent payout								0	0										
32. Other		(f)						0	0										
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Accident and Health																			
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	51	38,826	(71)	(64,207)	677	484,825			
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	51	38,826	(71)	(64,207)	677	484,825			
47. TOTAL			0	0	0	0	0	0	0	0	52	68,826	(73)	(104,207)	685	659,825			

(a) 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 \$

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

(d) 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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
2. Group Life - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
3. Individual Annuities - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
4. Group Annuities - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF District of Columbia DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole	409						0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other	(f)						0					0
11. Total Individual Life	409	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other	(f)						0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other	(f)						0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other	(f)						0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual	(d)						0	XXX	XXX	XXX		0
35. Comprehensive group	(d)						0	XXX	XXX	XXX		0
36. Medicare Supplement	(d)						0	XXX	XXX	XXX		0
37. Vision only	(d)						0	XXX	XXX	XXX		0
38. Dental only	(d)						0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan	(d)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare	(d)	(e)					0	XXX	XXX	XXX		0
41. Title XIX Medicaid	(d)						0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income	(d)						0	XXX	XXX	XXX		0
44. Long-term care	(d)						0	XXX	XXX	XXX		0
45. Other health	(d)						0	XXX	XXX	XXX		0
46. Total Accident and Health	26,377	0	0	0	0	0	0	XXX	XXX	XXX	520	520
47. Total	26,786 (c)	0	0	0	0	0	0	0	0	0	520	520

24.DC

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		District of Columbia		DURING THE YEAR		2023		NAIC Company Code		77968			
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount							
Individual Life																	
1. Industrial									0	0							
2. Whole									0	0		4	100,000	(6)	(345,000)	5	120,000
3. Term									0	0							
4. Indexed									0	0							
5. Universal									0	0							
6. Universal with secondary guarantees									0	0							
7. Variable									0	0							
8. Variable universal									0	0							
9. Credit									0	0							
10. Other		(f)							0	0							
11. Total Individual Life		0	0	0	0	0	0	0	0	0	0	4	100,000	(6)	(345,000)	5	120,000
Group Life																	
12. Whole									0	0							
13. Term									0	0							
14. Universal									0	0							
15. Variable									0	0							
16. Variable universal									0	0							
17. Credit									0	0							
18. Other		(f)							0	0						(a)	
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Individual Annuities																	
20. Fixed									0	0							
21. Indexed									0	0							
22. Variable with guarantees									0	0							
23. Variable without guarantees									0	0							
24. Life contingent payout									0	0							
25. Other		(f)							0	0							
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Group Annuities																	
27. Fixed									0	0							
28. Indexed									0	0							
29. Variable with guarantees									0	0							
30. Variable without guarantees									0	0							
31. Life contingent payout									0	0							
32. Other		(f)							0	0							
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Accident and Health																	
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	504	1	1,252	52	29,623
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	504	1	1,252	52	29,623
47. TOTAL		0	0	0	0	0	0	0	0	0	0	5	100,504	(5)	(343,748)	57	149,623

(a) 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 \$

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

(d) 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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
2. Group Life - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
3. Individual Annuities - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
4. Group Annuities - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Florida DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole 127,517							0			3,271		3,271
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other (f)							0					0
11. Total Individual Life	127,517	0	0	0	0	0	0	0	0	3,271	0	3,271
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other (f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other (f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other (f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)							0	XXX	XXX	XXX		0
35. Comprehensive group (d)							0	XXX	XXX	XXX		0
36. Medicare Supplement (d)							0	XXX	XXX	XXX		0
37. Vision only (d)							0	XXX	XXX	XXX		0
38. Dental only (d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan (d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income (d)							0	XXX	XXX	XXX		0
44. Long-term care (d)							0	XXX	XXX	XXX		0
45. Other health (d)	13,092,455						0	XXX	XXX	XXX	2,596,507	2,596,507
46. Total Accident and Health	13,092,455	0	0	0	0	0	0	XXX	XXX	XXX	2,596,507	2,596,778
47. Total	13,219,972 (c)	0	0	0	0	0	0	0	0	3,271	2,596,507	2,599,778

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Florida		DURING THE YEAR		2023		NAIC Company Code		77968			
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount							
Individual Life																	
1. Industrial									0	0							
2. Whole									0	0		99	3,305,000	(52)	(1,065,000)	433	12,020,699
3. Term									0	0							
4. Indexed									0	0							
5. Universal									0	0							
6. Universal with secondary guarantees									0	0							
7. Variable									0	0							
8. Variable universal									0	0							
9. Credit									0	0							
10. Other (f)									0	0							
11. Total Individual Life		0	0	0	0	0	0	0	0	0	0	99	3,305,000	(52)	(1,065,000)	433	12,020,699
Group Life																	
12. Whole									0	0							
13. Term									0	0							
14. Universal									0	0							
15. Variable									0	0							
16. Variable universal									0	0							
17. Credit									0	0							
18. Other (f)									0	0						(a)	
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																	
20. Fixed									0	0							
21. Indexed									0	0							
22. Variable with guarantees									0	0							
23. Variable without guarantees									0	0							
24. Life contingent payout									0	0							
25. Other (f)									0	0							
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities																	
27. Fixed									0	0							
28. Indexed									0	0							
29. Variable with guarantees									0	0							
30. Variable without guarantees									0	0							
31. Life contingent payout									0	0							
32. Other (f)									0	0							
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health																	
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal Employees Health Benefits Plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,717	4,174,746	(10,050)	(4,849,746)	26,342	13,218,580
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,717	4,174,746	(10,050)	(4,849,746)	26,342	13,218,580
47. TOTAL		0	0	0	0	0	0	0	0	0	0	8,816	7,479,746	(10,102)	(5,914,746)	26,775	25,239,279

(a) 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 \$

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

(d) 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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
2. Group Life - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
3. Individual Annuities - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
4. Group Annuities - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Georgia DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole .....253,697							0			16,466		16,466
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other .....(f)							0					0
11. Total Individual Life	253,697	0	0	0	0	0	0	0	0	16,466	0	16,466
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other .....(f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other .....(f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other .....(f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual .....(d)							0	XXX	XXX	XXX		0
35. Comprehensive group .....(d)							0	XXX	XXX	XXX		0
36. Medicare Supplement .....(d)							0	XXX	XXX	XXX		0
37. Vision only .....(d)							0	XXX	XXX	XXX		0
38. Dental only .....(d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan .....(d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare .....(d)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid .....(d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income .....(d)							0	XXX	XXX	XXX		0
44. Long-term care .....(d)							0	XXX	XXX	XXX		0
45. Other health .....(d)	14,351,533						0	XXX	XXX	XXX	3,958,802	3,958,802
46. Total Accident and Health	14,351,533	0	0	0	0	0	0	XXX	XXX	XXX	3,958,802	3,958,802
47. Total	14,605,230 (c)	0	0	0	0	0	0	0	0	16,466	3,958,802	3,975,268

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Georgia		DURING THE YEAR				2023		NAIC Company Code		77968	
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount							
Individual Life																	
1. Industrial									0	0							
2. Whole									0	0		196	5,905,000	(111)	(2,989,762)	892	23,700,974
3. Term									0	0							
4. Indexed									0	0							
5. Universal									0	0							
6. Universal with secondary guarantees									0	0							
7. Variable									0	0							
8. Variable universal									0	0							
9. Credit									0	0							
10. Other (f)									0	0							
11. Total Individual Life		0	0	0	0	0	0	0	0	0	0	196	5,905,000	(111)	(2,989,762)	892	23,700,974
Group Life																	
12. Whole									0	0							
13. Term									0	0							
14. Universal									0	0							
15. Variable									0	0							
16. Variable universal									0	0							
17. Credit									0	0							
18. Other (f)									0	0							(a)
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																	
20. Fixed									0	0							
21. Indexed									0	0							
22. Variable with guarantees									0	0							
23. Variable without guarantees									0	0							
24. Life contingent payout									0	0							
25. Other (f)									0	0							
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities																	
27. Fixed									0	0							
28. Indexed									0	0							
29. Variable with guarantees									0	0							
30. Variable without guarantees									0	0							
31. Life contingent payout									0	0							
32. Other (f)									0	0							
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health																	
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal Employees Health Benefits Plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,968	4,151,861	(3,392)	(2,823,499)	19,646	15,156,945
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,968	4,151,861	(3,392)	(2,823,499)	19,646	15,156,945
47. TOTAL		0	0	0	0	0	0	0	0	0	0	5,164	10,056,861	(3,503)	(5,813,261)	20,538	38,857,919

(a) 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 \$

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

(d) 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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ Column 7) \$ Column 12) \$

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ Column 7) \$ Column 12) \$

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ Column 7) \$ Column 12) \$

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ Column 7) \$ Column 12) \$



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Hawaii DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole .....710							0			436		436
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other .....(f)							0					0
11. Total Individual Life	710	0	0	0	0	0	0	0	0	436	0	436
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other .....(f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other .....(f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other .....(f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual .....(d)							0	XXX	XXX	XXX		0
35. Comprehensive group .....(d)							0	XXX	XXX	XXX		0
36. Medicare Supplement .....(d)							0	XXX	XXX	XXX		0
37. Vision only .....(d)							0	XXX	XXX	XXX		0
38. Dental only .....(d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan .....(d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare .....(d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid .....(d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income .....(d)							0	XXX	XXX	XXX		0
44. Long-term care .....(d)							0	XXX	XXX	XXX		0
45. Other health .....(d)							0	XXX	XXX	XXX	13,890	13,890
46. Total Accident and Health	116,081	0	0	0	0	0	0	XXX	XXX	XXX	13,890	13,890
47. Total	116,791 (c)	0	0	0	0	0	0	0	0	436	13,890	14,326

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Hawaii		DURING THE YEAR				2023		NAIC Company Code		77968	
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount							
Individual Life																	
1. Industrial									0	0							
2. Whole									0	0				(1)	(100,000)	4	40,000
3. Term									0	0							
4. Indexed									0	0							
5. Universal									0	0							
6. Universal with secondary guarantees									0	0							
7. Variable									0	0							
8. Variable universal									0	0							
9. Credit									0	0							
10. Other		(f)							0	0							
11. Total Individual Life		0	0	0	0	0	0	0	0	0	0	0	0	(1)	(100,000)	4	40,000
Group Life																	
12. Whole									0	0							
13. Term									0	0							
14. Universal									0	0							
15. Variable									0	0							
16. Variable universal									0	0							
17. Credit									0	0							
18. Other		(f)							0	0							(a)
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																	
20. Fixed									0	0							
21. Indexed									0	0							
22. Variable with guarantees									0	0							
23. Variable without guarantees									0	0							
24. Life contingent payout									0	0							
25. Other		(f)							0	0							
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities																	
27. Fixed									0	0							
28. Indexed									0	0							
29. Variable with guarantees									0	0							
30. Variable without guarantees									0	0							
31. Life contingent payout									0	0							
32. Other		(f)							0	0							
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health																	
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	42	32,370	(5)	921	187	140,659
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	42	32,370	(5)	921	187	140,659
47. TOTAL		0	0	0	0	0	0	0	0	0	0	42	32,370	(6)	(99,079)	191	180,659

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Idaho DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole 3,923							0			7,371		7,371
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other (f)							0					0
11. Total Individual Life	3,923	0	0	0	0	0	0	0	0	7,371	0	7,371
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other (f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other (f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other (f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)							0	XXX	XXX	XXX		0
35. Comprehensive group (d)							0	XXX	XXX	XXX		0
36. Medicare Supplement (d)							0	XXX	XXX	XXX		0
37. Vision only (d)							0	XXX	XXX	XXX		0
38. Dental only (d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan (d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income (d)							0	XXX	XXX	XXX		0
44. Long-term care (d)							0	XXX	XXX	XXX		0
45. Other health (d)	2,889,553						0	XXX	XXX	XXX	551,007	551,007
46. Total Accident and Health	2,889,553	0	0	0	0	0	0	XXX	XXX	XXX	551,007	551,007
47. Total	2,893,476 (c)	0	0	0	0	0	0	0	0	7,371	551,007	558,378

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Idaho		DURING THE YEAR				2023		NAIC Company Code		77968	
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount							
Individual Life																	
1. Industrial									0	0							
2. Whole									0	0						16	
3. Term									0	0						435,000	
4. Indexed									0	0							
5. Universal									0	0							
6. Universal with secondary guarantees									0	0							
7. Variable									0	0							
8. Variable universal									0	0							
9. Credit									0	0							
10. Other (f)									0	0							
11. Total Individual Life		0	0	0	0	0	0	0	0	0	0	0	0	0	16	435,000	
Group Life																	
12. Whole									0	0							
13. Term									0	0							
14. Universal									0	0							
15. Variable									0	0							
16. Variable universal									0	0							
17. Credit									0	0							
18. Other (f)									0	0						(a)	
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Individual Annuities																	
20. Fixed									0	0							
21. Indexed									0	0							
22. Variable with guarantees									0	0							
23. Variable without guarantees									0	0							
24. Life contingent payout									0	0							
25. Other (f)									0	0							
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Group Annuities																	
27. Fixed									0	0							
28. Indexed									0	0							
29. Variable with guarantees									0	0							
30. Variable without guarantees									0	0							
31. Life contingent payout									0	0							
32. Other (f)									0	0							
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Accident and Health																	
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal Employees Health Benefits Plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,712	1,159,127	(771)	(557,556)	4,323	
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,712	1,159,127	(771)	(557,556)	4,323	
47. TOTAL		0	0	0	0	0	0	0	0	0	0	1,712	1,159,127	(771)	(557,556)	4,399	

(a) 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 \$

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

(d) 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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ Column 7) \$ Column 12) \$

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ Column 7) \$ Column 12) \$

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ Column 7) \$ Column 12) \$

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ Column 7) \$ Column 12) \$



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Illinois DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole 114,480							0	55,000		6,771		61,771
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other (f)							0					0
11. Total Individual Life	114,480	0	0	0	0	0	0	55,000	0	6,771	0	61,771
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other (f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other (f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other (f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)							0	XXX	XXX	XXX		0
35. Comprehensive group (d)							0	XXX	XXX	XXX		0
36. Medicare Supplement (d)							0	XXX	XXX	XXX		0
37. Vision only (d)							0	XXX	XXX	XXX		0
38. Dental only (d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan (d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income (d)							0	XXX	XXX	XXX		0
44. Long-term care (d)							0	XXX	XXX	XXX		0
45. Other health (d)	13,807,701						0	XXX	XXX	XXX	6,085,099	6,085,099
46. Total Accident and Health	13,807,701	0	0	0	0	0	0	XXX	XXX	XXX	6,085,099	6,085,099
47. Total	13,922,181 (c)	0	0	0	0	0	0	55,000	0	6,771	6,085,099	6,146,870

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Illinois		DURING THE YEAR				2023		NAIC Company Code		77968			
Line of Business		Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										22		Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		13		Claims Settled During Current Year										23	24	25	26	27	28
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount			
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount										
Individual Life																			
1. Industrial																			
2. Whole		55,000	2	55,000					2	55,000		37	1,900,000	(36)	(1,565,000)	338	10,660,000		
3. Term									0	0									
4. Indexed									0	0									
5. Universal									0	0									
6. Universal with secondary guarantees									0	0									
7. Variable									0	0									
8. Variable universal									0	0									
9. Credit									0	0									
10. Other		(f)							0	0									
11. Total Individual Life		55,000	2	55,000	0	0	0	0	2	55,000	0	37	1,900,000	(36)	(1,565,000)	338	10,660,000		
Group Life																			
12. Whole									0	0									
13. Term									0	0									
14. Universal									0	0									
15. Variable									0	0									
16. Variable universal									0	0									
17. Credit									0	0									
18. Other		(f)							0	0							(a)		
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Individual Annuities																			
20. Fixed									0	0									
21. Indexed									0	0									
22. Variable with guarantees									0	0									
23. Variable without guarantees									0	0									
24. Life contingent payout									0	0									
25. Other		(f)							0	0									
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Annuities																			
27. Fixed									0	0									
28. Indexed									0	0									
29. Variable with guarantees									0	0									
30. Variable without guarantees									0	0									
31. Life contingent payout									0	0									
32. Other		(f)							0	0									
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Accident and Health																			
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,974	2,551,298	(2,613)	(1,866,681)	19,592	14,186,717		
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,974	2,551,298	(2,613)	(1,866,681)	19,592	14,186,717		
47. TOTAL			55,000	2	55,000	0	0	0	2	55,000	0	4,011	4,451,298	(2,649)	(3,431,681)	19,930	24,846,717		

(a) 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 \$ _____.

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____.

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0.

(d) 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 _____.

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____.

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Indiana DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole .....37,510							0			3,018		3,018
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other .....(f)							0					0
11. Total Individual Life	37,510	0	0	0	0	0	0	0	0	3,018	0	3,018
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other .....(f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other .....(f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other .....(f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual .....(d)							0	XXX	XXX	XXX		0
35. Comprehensive group .....(d)							0	XXX	XXX	XXX		0
36. Medicare Supplement .....(d)							0	XXX	XXX	XXX		0
37. Vision only .....(d)							0	XXX	XXX	XXX		0
38. Dental only .....(d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan .....(d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare .....(d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid .....(d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income .....(d)							0	XXX	XXX	XXX		0
44. Long-term care .....(d)							0	XXX	XXX	XXX		0
45. Other health .....(d)							0	XXX	XXX	XXX		0
46. Total Accident and Health	11,608,573	0	0	0	0	0	0	XXX	XXX	XXX	4,557,150	4,557,150
47. Total	11,646,083 (c)	0	0	0	0	0	0	0	0	3,018	4,557,150	4,560,168

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Indiana		DURING THE YEAR		2023		NAIC Company Code		77968			
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount							
Individual Life																	
1. Industrial									0	0							
2. Whole									0	0		22	875,000	(7)	(500,000)	117	3,295,000
3. Term									0	0							
4. Indexed									0	0							
5. Universal									0	0							
6. Universal with secondary guarantees									0	0							
7. Variable									0	0							
8. Variable universal									0	0							
9. Credit									0	0							
10. Other (f)									0	0							
11. Total Individual Life		0	0	0	0	0	0	0	0	0	0	22	875,000	(7)	(500,000)	117	3,295,000
Group Life																	
12. Whole									0	0							
13. Term									0	0							
14. Universal									0	0							
15. Variable									0	0							
16. Variable universal									0	0							
17. Credit									0	0							
18. Other (f)									0	0						(a)	
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																	
20. Fixed									0	0							
21. Indexed									0	0							
22. Variable with guarantees									0	0							
23. Variable without guarantees									0	0							
24. Life contingent payout									0	0							
25. Other (f)									0	0							
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities																	
27. Fixed									0	0							
28. Indexed									0	0							
29. Variable with guarantees									0	0							
30. Variable without guarantees									0	0							
31. Life contingent payout									0	0							
32. Other (f)									0	0							
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health																	
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal Employees Health Benefits Plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,046	2,605,542	(2,222)	(1,402,308)	18,482	12,381,777
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,046	2,605,542	(2,222)	(1,402,308)	18,482	12,381,777
47. TOTAL		0	0	0	0	0	0	0	0	0	0	4,068	3,480,542	(2,229)	(1,902,308)	18,599	15,676,777

(a) 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 \$

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

(d) 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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ Column 7) \$ Column 12) \$

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ Column 7) \$ Column 12) \$

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ Column 7) \$ Column 12) \$

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ Column 7) \$ Column 12) \$



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Iowa DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole .....94,020							0			2,218		2,218
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other .....(f)							0					0
11. Total Individual Life	94,020	0	0	0	0	0	0	0	0	2,218	0	2,218
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other .....(f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other .....(f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other .....(f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual .....(d)							0	XXX	XXX	XXX		0
35. Comprehensive group .....(d)							0	XXX	XXX	XXX		0
36. Medicare Supplement .....(d)							0	XXX	XXX	XXX		0
37. Vision only .....(d)							0	XXX	XXX	XXX		0
38. Dental only .....(d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan .....(d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare .....(d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid .....(d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income .....(d)							0	XXX	XXX	XXX		0
44. Long-term care .....(d)							0	XXX	XXX	XXX		0
45. Other health .....(d)	12,522,927						0	XXX	XXX	XXX	1,650,424	1,650,424
46. Total Accident and Health	12,522,927	0	0	0	0	0	0	XXX	XXX	XXX	1,650,424	1,652,642
47. Total	12,616,947 (c)	0	0	0	0	0	0	0	0	2,218	1,650,424	1,652,642

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Iowa		DURING THE YEAR				2023		NAIC Company Code		77968	
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount							
Individual Life																	
1. Industrial									0	0							
2. Whole									0	0		97	2,670,000	(34)	(855,000)	368	9,810,000
3. Term									0	0							
4. Indexed									0	0							
5. Universal									0	0							
6. Universal with secondary guarantees									0	0							
7. Variable									0	0							
8. Variable universal									0	0							
9. Credit									0	0							
10. Other (f)									0	0							
11. Total Individual Life		0	0	0	0	0	0	0	0	0	0	97	2,670,000	(34)	(855,000)	368	9,810,000
Group Life																	
12. Whole									0	0							
13. Term									0	0							
14. Universal									0	0							
15. Variable									0	0							
16. Variable universal									0	0							
17. Credit									0	0							
18. Other (f)									0	0						(a)	
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																	
20. Fixed									0	0							
21. Indexed									0	0							
22. Variable with guarantees									0	0							
23. Variable without guarantees									0	0							
24. Life contingent payout									0	0							
25. Other (f)									0	0							
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities																	
27. Fixed									0	0							
28. Indexed									0	0							
29. Variable with guarantees									0	0							
30. Variable without guarantees									0	0							
31. Life contingent payout									0	0							
32. Other (f)									0	0							
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health																	
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal Employees Health Benefits Plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,430	3,415,269	(3,059)	(1,861,442)	20,088	13,364,537
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,430	3,415,269	(3,059)	(1,861,442)	20,088	13,364,537
47. TOTAL		0	0	0	0	0	0	0	0	0	0	5,527	6,085,269	(3,093)	(2,716,442)	20,456	23,174,537

(a) 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 \$

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

(d) 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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ Column 7) \$ Column 12) \$

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ Column 7) \$ Column 12) \$

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ Column 7) \$ Column 12) \$

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ Column 7) \$ Column 12) \$



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Kansas DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole 268,987							0	20,000		4,353		24,353
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other (f)							0					0
11. Total Individual Life	268,987	0	0	0	0	0	0	20,000	0	4,353	0	24,353
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other (f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other (f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other (f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)							0	XXX	XXX	XXX		0
35. Comprehensive group (d)							0	XXX	XXX	XXX		0
36. Medicare Supplement (d)							0	XXX	XXX	XXX		0
37. Vision only (d)							0	XXX	XXX	XXX		0
38. Dental only (d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan (d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income (d)							0	XXX	XXX	XXX		0
44. Long-term care (d)							0	XXX	XXX	XXX		0
45. Other health (d)	12,459,179						0	XXX	XXX	XXX	3,365,160	3,365,160
46. Total Accident and Health	12,459,179	0	0	0	0	0	0	XXX	XXX	XXX	3,365,160	3,365,160
47. Total	12,728,166 (c)	0	0	0	0	0	0	20,000	0	4,353	3,365,160	3,389,513

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Kansas		DURING THE YEAR				2023		NAIC Company Code		77968																	
Line of Business		Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										22		23		24		25		26		27		28									
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		Issued During Year				Other Changes to In Force (Net)		In Force December 31, Current Year (b)																	
		14		15		16		17		18		19		20		21		22		23		24		25		26		27		28			
		Number of Pols/ Certs		Amount		Number of Pols/ Certs		Amount		Number of Pols/ Certs		Amount		Number of Pols/ Certs		Amount		Number of Pols/ Certs		Amount		Number of Pols/ Certs		Amount		Number of Pols/ Certs		Amount					
Individual Life																																	
1. Industrial		20,000		1		20,000																											
2. Whole																																	
3. Term																																	
4. Indexed																																	
5. Universal																																	
6. Universal with secondary guarantees																																	
7. Variable																																	
8. Variable universal																																	
9. Credit																																	
10. Other		(f)																															
11. Total Individual Life		20,000		1		20,000		0		0		0		0		1		20,000		0		120		2,930,000		(55)		(1,415,000)		892		23,840,000	
Group Life																																	
12. Whole																																	
13. Term																																	
14. Universal																																	
15. Variable																																	
16. Variable universal																																	
17. Credit																																	
18. Other		(f)																										(a)					
19. Total Group Life		0		0		0		0		0		0		0		0		0		0		0		0		0		0					
Individual Annuities																																	
20. Fixed																																	
21. Indexed																																	
22. Variable with guarantees																																	
23. Variable without guarantees																																	
24. Life contingent payout																																	
25. Other		(f)																															
26. Total Individual Annuities		0		0		0		0		0		0		0		0		0		0		0		0		0		0					
Group Annuities																																	
27. Fixed																																	
28. Indexed																																	
29. Variable with guarantees																																	
30. Variable without guarantees																																	
31. Life contingent payout																																	
32. Other		(f)																															
33. Total Group Annuities		0		0		0		0		0		0		0		0		0		0		0		0		0		0					
Accident and Health																																	
34. Comprehensive individual		(d)		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX					
35. Comprehensive group		(d)		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX					
36. Medicare Supplement		(d)		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX					
37. Vision only		(d)		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX					
38. Dental only		(d)		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX					
39. Federal Employees Health Benefits Plan		(d)		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX					
40. Title XVIII Medicare		(d)		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX					
41. Title XIX Medicaid		(d)		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX					
42. Credit A&H				XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX					
43. Disability income		(d)		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX					
44. Long-term care		(d)		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX					
45. Other health		(d)		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX					
46. Total Accident and Health				XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX					
47. TOTAL				20,000		1		20,000		0		0		0		1		20,000		0		2,695		4,403,451		(2,425)		(2,723,037)		21,346		36,495,068	

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Kentucky DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole	292,978						0			16,405		16,405
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other	(f)						0					0
11. Total Individual Life	292,978	0	0	0	0	0	0	0	0	16,405	0	16,405
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other	(f)						0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other	(f)						0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other	(f)						0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual	(d)						0	XXX	XXX	XXX		0
35. Comprehensive group	(d)						0	XXX	XXX	XXX		0
36. Medicare Supplement	(d)						0	XXX	XXX	XXX		0
37. Vision only	(d)						0	XXX	XXX	XXX		0
38. Dental only	(d)						0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan	(d)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare	(d) (e)						0	XXX	XXX	XXX		0
41. Title XIX Medicaid	(d)						0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income	(d)						0	XXX	XXX	XXX		0
44. Long-term care	(d)						0	XXX	XXX	XXX		0
45. Other health	(d)						0	XXX	XXX	XXX	2,613,320	2,613,320
46. Total Accident and Health	9,453,156	0	0	0	0	0	0	XXX	XXX	XXX	2,613,320	2,613,320
47. Total	9,746,134 (c)	0	0	0	0	0	0	0	0	16,405	2,613,320	2,629,725

24.KY

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Kentucky		DURING THE YEAR		2023		NAIC Company Code		77968			
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Policy Exhibit					
			Claims Settled During Current Year				Total Settled During Current Year					Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected					23	24	25	26	27	28
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																	
1. Industrial									0	0							
2. Whole									0	0		213	5,515,000	(109)	(3,885,000)	1,099	26,392,287
3. Term									0	0							
4. Indexed									0	0							
5. Universal									0	0							
6. Universal with secondary guarantees									0	0							
7. Variable									0	0							
8. Variable universal									0	0							
9. Credit									0	0							
10. Other		(f)							0	0							
11. Total Individual Life			0	0	0	0	0	0	0	0	0	213	5,515,000	(109)	(3,885,000)	1,099	26,392,287
Group Life																	
12. Whole									0	0							
13. Term									0	0							
14. Universal									0	0							
15. Variable									0	0							
16. Variable universal									0	0							
17. Credit									0	0							
18. Other		(f)							0	0						(a)	
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																	
20. Fixed									0	0							
21. Indexed									0	0							
22. Variable with guarantees									0	0							
23. Variable without guarantees									0	0							
24. Life contingent payout									0	0							
25. Other		(f)							0	0							
26. Total Individual Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities																	
27. Fixed									0	0							
28. Indexed									0	0							
29. Variable with guarantees									0	0							
30. Variable without guarantees									0	0							
31. Life contingent payout									0	0							
32. Other		(f)							0	0							
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health																	
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,886	1,663,375	(2,181)	(1,291,068)	16,818	9,826,629
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,886	1,663,375	(2,181)	(1,291,068)	16,818	9,826,629
47. TOTAL			0	0	0	0	0	0	0	0	0	3,099	7,178,375	(2,290)	(5,176,068)	17,917	36,218,916

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Louisiana DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole 129,874							0			215		215
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other (f)							0					0
11. Total Individual Life 129,874		0	0	0	0	0	0	0	0	215	0	215
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other (f)							0					0
19. Total Group Life 0		0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other (f)							0					0
26. Total Individual Annuities 0		0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other (f)							0					0
33. Total Group Annuities 0		0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)							0	XXX	XXX	XXX		0
35. Comprehensive group (d)							0	XXX	XXX	XXX		0
36. Medicare Supplement (d)							0	XXX	XXX	XXX		0
37. Vision only (d)							0	XXX	XXX	XXX		0
38. Dental only (d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan (d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income (d)							0	XXX	XXX	XXX		0
44. Long-term care (d)							0	XXX	XXX	XXX		0
45. Other health (d)							0	XXX	XXX	XXX		0
46. Total Accident and Health 10,080,543		0	0	0	0	0	0	XXX	XXX	XXX	2,427,372	2,427,372
47. Total 10,210,417 (c)		0	0	0	0	0	0	0	0	215	2,427,372	2,427,587

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Louisiana		DURING THE YEAR		2023		NAIC Company Code		77968					
Line of Business		Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										22		Policy Exhibit					
		13		Claims Settled During Current Year										Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
				Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28		
				14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																			
1. Industrial									0	0									
2. Whole									0	0		231	5,815,000	(112)	(2,995,000)	474	12,450,000		
3. Term									0	0									
4. Indexed									0	0									
5. Universal									0	0									
6. Universal with secondary guarantees									0	0									
7. Variable									0	0									
8. Variable universal									0	0									
9. Credit									0	0									
10. Other		(f)							0	0									
11. Total Individual Life			0	0	0	0	0	0	0	0	0	231	5,815,000	(112)	(2,995,000)	474	12,450,000		
Group Life																			
12. Whole									0	0									
13. Term									0	0									
14. Universal									0	0									
15. Variable									0	0									
16. Variable universal									0	0									
17. Credit									0	0									
18. Other		(f)							0	0						(a)			
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Individual Annuities																			
20. Fixed									0	0									
21. Indexed									0	0									
22. Variable with guarantees									0	0									
23. Variable without guarantees									0	0									
24. Life contingent payout									0	0									
25. Other		(f)							0	0									
26. Total Individual Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Annuities																			
27. Fixed									0	0									
28. Indexed									0	0									
29. Variable with guarantees									0	0									
30. Variable without guarantees									0	0									
31. Life contingent payout									0	0									
32. Other		(f)							0	0									
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Accident and Health																			
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,647	2,526,788	(3,154)	(1,643,812)	17,428	10,641,837		
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,647	2,526,788	(3,154)	(1,643,812)	17,428	10,641,837		
47. TOTAL			0	0	0	0	0	0	0	0	0	4,878	8,341,788	(3,266)	(4,638,812)	17,902	23,091,837		

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Maine		DURING THE YEAR							2023		NAIC Company Code		77968	
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)				
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount			
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount										
Individual Life																				
1. Industrial									0	0										
2. Whole									0	0					(25,000)	8	380,000			
3. Term									0	0										
4. Indexed									0	0										
5. Universal									0	0										
6. Universal with secondary guarantees									0	0										
7. Variable									0	0										
8. Variable universal									0	0										
9. Credit									0	0										
10. Other (f)									0	0										
11. Total Individual Life		0	0	0	0	0	0	0	0	0	0	0	0	0	(25,000)	8	380,000			
Group Life																				
12. Whole									0	0										
13. Term									0	0										
14. Universal									0	0										
15. Variable									0	0										
16. Variable universal									0	0										
17. Credit									0	0										
18. Other (f)									0	0							(a)			
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Individual Annuities																				
20. Fixed									0	0										
21. Indexed									0	0										
22. Variable with guarantees									0	0										
23. Variable without guarantees									0	0										
24. Life contingent payout									0	0										
25. Other (f)									0	0										
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Group Annuities																				
27. Fixed									0	0										
28. Indexed									0	0										
29. Variable with guarantees									0	0										
30. Variable without guarantees									0	0										
31. Life contingent payout									0	0										
32. Other (f)									0	0										
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Accident and Health																				
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
36. Medicare Supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
39. Federal Employees Health Benefits Plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
42. Credit A&H (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	62	40,112	(128)	(89,626)	760	574,467			
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	62	40,112	(128)	(89,626)	760	574,467			
47. TOTAL		0	0	0	0	0	0	0	0	0	0	62	40,112	(128)	(114,626)	768	954,467			

(a) 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 \$

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

(d) 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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
2. Group Life - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
3. Individual Annuities - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
4. Group Annuities - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Maryland DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole .....46,347							0			37		37
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other .....(f)							0					0
11. Total Individual Life	46,347	0	0	0	0	0	0	0	0	37	0	37
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other .....(f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other .....(f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other .....(f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual .....(d)							0	XXX	XXX	XXX		0
35. Comprehensive group .....(d)							0	XXX	XXX	XXX		0
36. Medicare Supplement .....(d)							0	XXX	XXX	XXX		0
37. Vision only .....(d)							0	XXX	XXX	XXX		0
38. Dental only .....(d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan .....(d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare .....(d)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid .....(d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income .....(d)							0	XXX	XXX	XXX		0
44. Long-term care .....(d)							0	XXX	XXX	XXX		0
45. Other health .....(d)	1,845,771						0	XXX	XXX	XXX	338,595	338,595
46. Total Accident and Health	1,845,771	0	0	0	0	0	0	XXX	XXX	XXX	338,595	338,595
47. Total	1,892,118 (c)	0	0	0	0	0	0	0	0	37	338,595	338,632

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Maryland		DURING THE YEAR				2023		NAIC Company Code		77968	
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount							
Individual Life																	
1. Industrial									0	0							
2. Whole									0	0		7	170,000	(16)	(525,000)	105	3,761,737
3. Term									0	0							
4. Indexed									0	0							
5. Universal									0	0							
6. Universal with secondary guarantees									0	0							
7. Variable									0	0							
8. Variable universal									0	0							
9. Credit									0	0							
10. Other		(f)							0	0							
11. Total Individual Life			0	0	0	0	0	0	0	0	0	7	170,000	(16)	(525,000)	105	3,761,737
Group Life																	
12. Whole									0	0							
13. Term									0	0							
14. Universal									0	0							
15. Variable									0	0							
16. Variable universal									0	0							
17. Credit									0	0							
18. Other		(f)							0	0						(a)	
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																	
20. Fixed									0	0							
21. Indexed									0	0							
22. Variable with guarantees									0	0							
23. Variable without guarantees									0	0							
24. Life contingent payout									0	0							
25. Other		(f)							0	0							
26. Total Individual Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities																	
27. Fixed									0	0							
28. Indexed									0	0							
29. Variable with guarantees									0	0							
30. Variable without guarantees									0	0							
31. Life contingent payout									0	0							
32. Other		(f)							0	0							
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health																	
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	399	328,910	(393)	(308,863)	2,620	1,870,965
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	399	328,910	(393)	(308,863)	2,620	1,870,965
47. TOTAL			0	0	0	0	0	0	0	0	0	406	498,910	(409)	(833,863)	2,725	5,632,702

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Massachusetts		DURING THE YEAR				2023		NAIC Company Code		77968	
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount							
Individual Life																	
1. Industrial									0	0							
2. Whole									0	0						270,000	
3. Term									0	0							
4. Indexed									0	0							
5. Universal									0	0							
6. Universal with secondary guarantees									0	0							
7. Variable									0	0							
8. Variable universal									0	0							
9. Credit									0	0							
10. Other (f)									0	0							
11. Total Individual Life		0	0	0	0	0	0	0	0	0	0	0	0	0	2	70,000	
Group Life																	
12. Whole									0	0							
13. Term									0	0							
14. Universal									0	0							
15. Variable									0	0							
16. Variable universal									0	0							
17. Credit									0	0							
18. Other (f)									0	0						(a)	
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Individual Annuities																	
20. Fixed									0	0							
21. Indexed									0	0							
22. Variable with guarantees									0	0							
23. Variable without guarantees									0	0							
24. Life contingent payout									0	0							
25. Other (f)									0	0							
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Group Annuities																	
27. Fixed									0	0							
28. Indexed									0	0							
29. Variable with guarantees									0	0							
30. Variable without guarantees									0	0							
31. Life contingent payout									0	0							
32. Other (f)									0	0							
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Accident and Health																	
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal Employees Health Benefits Plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			15	12,356	46,054	
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	15	12,356	77	
47. TOTAL		0	0	0	0	0	0	0	0	0	0	0	0	15	12,356	79	

(a) 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 \$

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

(d) 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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
2. Group Life - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
3. Individual Annuities - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
4. Group Annuities - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Michigan DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole .....28,141							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other .....(f)							0					0
11. Total Individual Life	28,141	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other .....(f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other .....(f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other .....(f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual .....(d)							0	XXX	XXX	XXX		0
35. Comprehensive group .....(d)							0	XXX	XXX	XXX		0
36. Medicare Supplement .....(d)							0	XXX	XXX	XXX		0
37. Vision only .....(d)							0	XXX	XXX	XXX		0
38. Dental only .....(d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan .....(d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare .....(d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid .....(d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income .....(d)							0	XXX	XXX	XXX		0
44. Long-term care .....(d)							0	XXX	XXX	XXX		0
45. Other health .....(d)	4,307,501						0	XXX	XXX	XXX	2,730,357	2,730,357
46. Total Accident and Health	4,307,501	0	0	0	0	0	0	XXX	XXX	XXX	2,730,357	2,730,357
47. Total	4,335,642 (c)	0	0	0	0	0	0	0	0	0	2,730,357	2,730,357

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Michigan		DURING THE YEAR				2023		NAIC Company Code		77968	
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Claims Settled During Current Year		Total Settled During Current Year		23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount		27 Number of Pols/ Certs	28 Amount				
			Totals Paid		Reduction by Compromise									Amount Rejected			
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount								18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount
Individual Life																	
1. Industrial									0	0							
2. Whole									0	0		19	430,000		(40,000)	56	1,355,000
3. Term									0	0							
4. Indexed									0	0							
5. Universal									0	0							
6. Universal with secondary guarantees									0	0							
7. Variable									0	0							
8. Variable universal									0	0							
9. Credit									0	0							
10. Other		(f)							0	0							
11. Total Individual Life			0	0	0	0	0	0	0	0	0	19	430,000	0	(40,000)	56	1,355,000
Group Life																	
12. Whole									0	0							
13. Term									0	0							
14. Universal									0	0							
15. Variable									0	0							
16. Variable universal									0	0							
17. Credit									0	0							
18. Other		(f)							0	0							(a)
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																	
20. Fixed									0	0							
21. Indexed									0	0							
22. Variable with guarantees									0	0							
23. Variable without guarantees									0	0							
24. Life contingent payout									0	0							
25. Other		(f)							0	0							
26. Total Individual Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities																	
27. Fixed									0	0							
28. Indexed									0	0							
29. Variable with guarantees									0	0							
30. Variable without guarantees									0	0							
31. Life contingent payout									0	0							
32. Other		(f)							0	0							
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health																	
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,055	1,934,020	(1,489)	(898,879)	7,779	4,870,369
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,055	1,934,020	(1,489)	(898,879)	7,779	4,870,369
47. TOTAL			0	0	0	0	0	0	0	0	0	3,074	2,364,020	(1,489)	(938,879)	7,835	6,225,369

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Minnesota DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole .....80,902							0	20,000		6,024		26,024
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other .....(f)							0					0
11. Total Individual Life	80,902	0	0	0	0	0	0	20,000	0	6,024	0	26,024
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other .....(f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other .....(f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other .....(f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual .....(d)							0	XXX	XXX	XXX		0
35. Comprehensive group .....(d)							0	XXX	XXX	XXX		0
36. Medicare Supplement .....(d)							0	XXX	XXX	XXX		0
37. Vision only .....(d)							0	XXX	XXX	XXX		0
38. Dental only .....(d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan .....(d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare .....(d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid .....(d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income .....(d)							0	XXX	XXX	XXX		0
44. Long-term care .....(d)							0	XXX	XXX	XXX		0
45. Other health .....(d)	20,385,139						0	XXX	XXX	XXX	3,089,825	3,089,825
46. Total Accident and Health	20,385,139	0	0	0	0	0	0	XXX	XXX	XXX	3,089,825	3,089,825
47. Total	20,466,041 (c)	0	0	0	0	0	0	20,000	0	6,024	3,089,825	3,115,849

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Minnesota		DURING THE YEAR				2023		NAIC Company Code		77968			
Line of Business		Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										22		Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		13		Claims Settled During Current Year										23	24	25	26	27	28
		Incurred During Current Year		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
				14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount								
Individual Life																			
1. Industrial										0									
2. Whole		20,000	1	20,000					1	20,000		36	1,310,000	(19)	(390,000)	226	7,350,000		
3. Term									0	0									
4. Indexed									0	0									
5. Universal									0	0									
6. Universal with secondary guarantees									0	0									
7. Variable									0	0									
8. Variable universal									0	0									
9. Credit									0	0									
10. Other		(f)							0	0									
11. Total Individual Life		20,000	1	20,000	0	0	0	0	1	20,000	0	36	1,310,000	(19)	(390,000)	226	7,350,000		
Group Life																			
12. Whole									0	0									
13. Term									0	0									
14. Universal									0	0									
15. Variable									0	0									
16. Variable universal									0	0									
17. Credit									0	0									
18. Other		(f)							0	0							(a)		
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Individual Annuities																			
20. Fixed									0	0									
21. Indexed									0	0									
22. Variable with guarantees									0	0									
23. Variable without guarantees									0	0									
24. Life contingent payout									0	0									
25. Other		(f)							0	0									
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Annuities																			
27. Fixed									0	0									
28. Indexed									0	0									
29. Variable with guarantees									0	0									
30. Variable without guarantees									0	0									
31. Life contingent payout									0	0									
32. Other		(f)							0	0									
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Accident and Health																			
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,107	3,425,106	(4,549)	(2,066,718)	43,420	21,328,845		
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,107	3,425,106	(4,549)	(2,066,718)	43,420	21,328,845		
47. TOTAL			20,000	1	20,000	0	0	0	0	1	20,000	0	7,143	4,735,106	(4,568)	(2,456,718)	43,646	28,678,845	

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Mississippi DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole .....30,084							0			1,661		1,661
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other .....(f)							0					0
11. Total Individual Life	30,084	0	0	0	0	0	0	0	0	1,661	0	1,661
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other .....(f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other .....(f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other .....(f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual .....(d)							0	XXX	XXX	XXX		0
35. Comprehensive group .....(d)							0	XXX	XXX	XXX		0
36. Medicare Supplement .....(d)							0	XXX	XXX	XXX		0
37. Vision only .....(d)							0	XXX	XXX	XXX		0
38. Dental only .....(d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan .....(d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare .....(d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid .....(d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income .....(d)							0	XXX	XXX	XXX		0
44. Long-term care .....(d)							0	XXX	XXX	XXX		0
45. Other health .....(d)	1,717,472						0	XXX	XXX	XXX	1,245,473	1,245,473
46. Total Accident and Health	1,717,472	0	0	0	0	0	0	XXX	XXX	XXX	1,245,473	1,245,473
47. Total	1,747,556 (c)	0	0	0	0	0	0	0	0	1,661	1,245,473	1,247,134

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Mississippi		DURING THE YEAR		2023		NAIC Company Code		77968					
Line of Business		Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										22		Policy Exhibit					
		13		Claims Settled During Current Year										Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
				Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28		
				14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																			
1. Industrial								0	0										
2. Whole								0	0		24	920,000	(9)	(450,000)	103	2,820,000			
3. Term								0	0										
4. Indexed								0	0										
5. Universal								0	0										
6. Universal with secondary guarantees								0	0										
7. Variable								0	0										
8. Variable universal								0	0										
9. Credit								0	0										
10. Other		(f)						0	0										
11. Total Individual Life		0	0	0	0	0	0	0	0	0	24	920,000	(9)	(450,000)	103	2,820,000			
Group Life																			
12. Whole								0	0										
13. Term								0	0										
14. Universal								0	0										
15. Variable								0	0										
16. Variable universal								0	0										
17. Credit								0	0										
18. Other		(f)						0	0							(a)			
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Individual Annuities																			
20. Fixed								0	0										
21. Indexed								0	0										
22. Variable with guarantees								0	0										
23. Variable without guarantees								0	0										
24. Life contingent payout								0	0										
25. Other		(f)						0	0										
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Group Annuities																			
27. Fixed								0	0										
28. Indexed								0	0										
29. Variable with guarantees								0	0										
30. Variable without guarantees								0	0										
31. Life contingent payout								0	0										
32. Other		(f)						0	0										
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Accident and Health																			
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,312	774,949	(687)	(406,434)	3,114	1,933,303		
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,312	774,949	(687)	(406,434)	3,114	1,933,303		
47. TOTAL		0	0	0	0	0	0	0	0	0	0	1,336	1,694,949	(696)	(856,434)	3,217	4,753,303		

(a) 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 \$ _____.

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____.

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0.

(d) 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 _____.

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____.

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Missouri DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole 164,279							0			20,463		20,463
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other (f)							0					0
11. Total Individual Life 164,279		0	0	0	0	0	0	0	0	20,463	0	20,463
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other (f)							0					0
19. Total Group Life 0		0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other (f)							0					0
26. Total Individual Annuities 0		0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other (f)							0					0
33. Total Group Annuities 0		0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)							0	XXX	XXX	XXX		0
35. Comprehensive group (d)							0	XXX	XXX	XXX		0
36. Medicare Supplement (d)							0	XXX	XXX	XXX		0
37. Vision only (d)							0	XXX	XXX	XXX		0
38. Dental only (d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan (d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income (d)							0	XXX	XXX	XXX		0
44. Long-term care (d)							0	XXX	XXX	XXX		0
45. Other health (d)							0	XXX	XXX	XXX		0
46. Total Accident and Health 12,127,689		0	0	0	0	0	0	XXX	XXX	XXX	3,044,269	3,044,269
47. Total 12,291,968 (c)		0	0	0	0	0	0	0	0	20,463	3,044,269	3,064,732

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Missouri		DURING THE YEAR		2023		NAIC Company Code		77968			
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount							
Individual Life																	
1. Industrial									0	0							
2. Whole									0	0		105	2,800,000	(80)	(2,620,000)	521	15,035,000
3. Term									0	0							
4. Indexed									0	0							
5. Universal									0	0							
6. Universal with secondary guarantees									0	0							
7. Variable									0	0							
8. Variable universal									0	0							
9. Credit									0	0							
10. Other (f)									0	0							
11. Total Individual Life		0	0	0	0	0	0	0	0	0	0	105	2,800,000	(80)	(2,620,000)	521	15,035,000
Group Life																	
12. Whole									0	0							
13. Term									0	0							
14. Universal									0	0							
15. Variable									0	0							
16. Variable universal									0	0							
17. Credit									0	0							
18. Other (f)									0	0						(a)	
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																	
20. Fixed									0	0							
21. Indexed									0	0							
22. Variable with guarantees									0	0							
23. Variable without guarantees									0	0							
24. Life contingent payout									0	0							
25. Other (f)									0	0							
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities																	
27. Fixed									0	0							
28. Indexed									0	0							
29. Variable with guarantees									0	0							
30. Variable without guarantees									0	0							
31. Life contingent payout									0	0							
32. Other (f)									0	0							
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health																	
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal Employees Health Benefits Plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,033	2,794,373	(3,229)	(1,836,658)	20,924	12,858,430
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,033	2,794,373	(3,229)	(1,836,658)	20,924	12,858,430
47. TOTAL		0	0	0	0	0	0	0	0	0	0	5,138	5,594,373	(3,309)	(4,456,658)	21,445	27,893,430

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Montana DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole .....16,064							0			15		15
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other .....(f)							0					0
11. Total Individual Life	16,064	0	0	0	0	0	0	0	0	15	0	15
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other .....(f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other .....(f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other .....(f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual .....(d)							0	XXX	XXX	XXX		0
35. Comprehensive group .....(d)							0	XXX	XXX	XXX		0
36. Medicare Supplement .....(d)							0	XXX	XXX	XXX		0
37. Vision only .....(d)							0	XXX	XXX	XXX		0
38. Dental only .....(d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan .....(d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare .....(d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid .....(d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income .....(d)							0	XXX	XXX	XXX		0
44. Long-term care .....(d)							0	XXX	XXX	XXX		0
45. Other health .....(d)	5,323,508						0	XXX	XXX	XXX	830,459	830,459
46. Total Accident and Health	5,323,508	0	0	0	0	0	0	XXX	XXX	XXX	830,459	830,459
47. Total	5,339,572 (c)	0	0	0	0	0	0	0	0	15	830,459	830,474

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Montana		DURING THE YEAR							2023		NAIC Company Code		77968	
Line of Business		Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										22		Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)		
		13		Claims Settled During Current Year																
		Incurred During Current Year		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		Unpaid December 31, Current Year	23	24	25	26	27	28		
				14	15	16	17	18	19	20	21									
			Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount		Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount			
Individual Life																				
1. Industrial									0	0										
2. Whole									0	0				(2)	(250,000)	21	1,275,000			
3. Term									0	0										
4. Indexed									0	0										
5. Universal									0	0										
6. Universal with secondary guarantees									0	0										
7. Variable									0	0										
8. Variable universal									0	0										
9. Credit									0	0										
10. Other		(f)							0	0										
11. Total Individual Life			0	0	0	0	0	0	0	0	0	0	0	(2)	(250,000)	21	1,275,000			
Group Life																				
12. Whole									0	0										
13. Term									0	0										
14. Universal									0	0										
15. Variable									0	0										
16. Variable universal									0	0										
17. Credit									0	0										
18. Other		(f)							0	0							(a)			
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Individual Annuities																				
20. Fixed									0	0										
21. Indexed									0	0										
22. Variable with guarantees									0	0										
23. Variable without guarantees									0	0										
24. Life contingent payout									0	0										
25. Other		(f)							0	0										
26. Total Individual Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Group Annuities																				
27. Fixed									0	0										
28. Indexed									0	0										
29. Variable with guarantees									0	0										
30. Variable without guarantees									0	0										
31. Life contingent payout									0	0										
32. Other		(f)							0	0										
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Accident and Health																				
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,097	1,344,103	(1,547)	(950,904)	8,393	5,531,285			
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,097	1,344,103	(1,547)	(950,904)	8,393	5,531,285			
47. TOTAL			0	0	0	0	0	0	0	0	0	2,097	1,344,103	(1,549)	(1,200,904)	8,414	6,806,285			

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290		BUSINESS IN THE STATE OF Nebraska		DURING THE YEAR 2023					NAIC Company Code 77968			
Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Life												
Industrial								0				0
Whole	52,000							0			383	383
Term								0				0
Indexed								0				0
Universal								0				0
Universal with secondary guarantees								0				0
Variable								0				0
Variable universal								0				0
Credit								0				0
Other (f)								0				0
Total Individual Life	52,000	0	0	0	0	0	0	0	0	383	0	383
Group Life												
Whole								0				0
Term								0				0
Universal								0				0
Variable								0				0
Variable universal								0				0
Credit								0				0
Other (f)								0				0
Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Annuities												
Fixed								0				0
Indexed								0				0
Variable with guarantees								0				0
Variable without guarantees								0				0
Life contingent payout								0				0
Other (f)								0				0
Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
Fixed								0				0
Indexed								0				0
Variable with guarantees								0				0
Variable without guarantees								0				0
Life contingent payout								0				0
Other (f)								0				0
Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
Comprehensive individual (d)								0	XXX	XXX	XXX	0
Comprehensive group (d)								0	XXX	XXX	XXX	0
Medicare Supplement (d)								0	XXX	XXX	XXX	0
Vision only (d)								0	XXX	XXX	XXX	0
Dental only (d)								0	XXX	XXX	XXX	0
Federal Employees Health Benefits Plan (d)								0	XXX	XXX	XXX	0
Title XVIII Medicare (d)	(e)							0	XXX	XXX	XXX	0
Title XIX Medicaid (d)								0	XXX	XXX	XXX	0
Credit A&H								0	XXX	XXX	XXX	0
Disability income (d)								0	XXX	XXX	XXX	0
Long-term care (d)								0	XXX	XXX	XXX	0
Other health (d)	12,982,030							0	XXX	XXX	XXX	0
Total Accident and Health	12,982,030	0	0	0	0	0	0	0	XXX	XXX	XXX	4,644,677
Total	13,034,030 (c)	0	0	0	0	0	0	0	0	0	383	4,644,677

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Nebraska		DURING THE YEAR							2023		NAIC Company Code		77968	
Line of Business		Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										22		Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)		
		13		Claims Settled During Current Year																
		Incurred During Current Year		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		Unpaid December 31, Current Year	23	24	25	26	27	28		
				14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount									
Individual Life																				
1. Industrial									0	0										
2. Whole									0	0		45	1,720,000	(10)	(295,000)	144	5,155,000			
3. Term									0	0										
4. Indexed									0	0										
5. Universal									0	0										
6. Universal with secondary guarantees									0	0										
7. Variable									0	0										
8. Variable universal									0	0										
9. Credit									0	0										
10. Other		(f)							0	0										
11. Total Individual Life			0	0	0	0	0	0	0	0	0	45	1,720,000	(10)	(295,000)	144	5,155,000			
Group Life																				
12. Whole									0	0										
13. Term									0	0										
14. Universal									0	0										
15. Variable									0	0										
16. Variable universal									0	0										
17. Credit									0	0										
18. Other		(f)							0	0							(a)			
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Individual Annuities																				
20. Fixed									0	0										
21. Indexed									0	0										
22. Variable with guarantees									0	0										
23. Variable without guarantees									0	0										
24. Life contingent payout									0	0										
25. Other		(f)							0	0										
26. Total Individual Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Group Annuities																				
27. Fixed									0	0										
28. Indexed									0	0										
29. Variable with guarantees									0	0										
30. Variable without guarantees									0	0										
31. Life contingent payout									0	0										
32. Other		(f)							0	0										
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Accident and Health																				
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,833	2,428,564	(1,894)	(1,243,167)	20,084	13,642,644			
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,833	2,428,564	(1,894)	(1,243,167)	20,084	13,642,644			
47. TOTAL			0	0	0	0	0	0	0	0	0	3,878	4,148,564	(1,904)	(1,538,167)	20,228	18,797,644			

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Nevada DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole .....15,888							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other .....(f)							0					0
11. Total Individual Life	15,888	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other .....(f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other .....(f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other .....(f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual .....(d)							0	XXX	XXX	XXX		0
35. Comprehensive group .....(d)							0	XXX	XXX	XXX		0
36. Medicare Supplement .....(d)							0	XXX	XXX	XXX		0
37. Vision only .....(d)							0	XXX	XXX	XXX		0
38. Dental only .....(d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan .....(d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare .....(d)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid .....(d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income .....(d)							0	XXX	XXX	XXX		0
44. Long-term care .....(d)							0	XXX	XXX	XXX		0
45. Other health .....(d)	1,824,714						0	XXX	XXX	XXX	145,249	145,249
46. Total Accident and Health	1,824,714	0	0	0	0	0	0	XXX	XXX	XXX	145,249	145,249
47. Total	1,840,602 (c)	0	0	0	0	0	0	0	0	0	145,249	145,249

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Nevada		DURING THE YEAR				2023		NAIC Company Code		77968	
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount							
Individual Life																	
1. Industrial									0	0							
2. Whole									0	0		4	270,000	(1)	20,000	36	1,940,000
3. Term									0	0							
4. Indexed									0	0							
5. Universal									0	0							
6. Universal with secondary guarantees									0	0							
7. Variable									0	0							
8. Variable universal									0	0							
9. Credit									0	0							
10. Other (f)									0	0							
11. Total Individual Life		0	0	0	0	0	0	0	0	0	0	4	270,000	(1)	20,000	36	1,940,000
Group Life																	
12. Whole									0	0							
13. Term									0	0							
14. Universal									0	0							
15. Variable									0	0							
16. Variable universal									0	0							
17. Credit									0	0							
18. Other (f)									0	0						(a)	
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																	
20. Fixed									0	0							
21. Indexed									0	0							
22. Variable with guarantees									0	0							
23. Variable without guarantees									0	0							
24. Life contingent payout									0	0							
25. Other (f)									0	0							
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities																	
27. Fixed									0	0							
28. Indexed									0	0							
29. Variable with guarantees									0	0							
30. Variable without guarantees									0	0							
31. Life contingent payout									0	0							
32. Other (f)									0	0							
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health																	
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal Employees Health Benefits Plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	587	385,441	(479)	(358,334)	2,680	1,885,238
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	587	385,441	(479)	(358,334)	2,680	1,885,238
47. TOTAL		0	0	0	0	0	0	0	0	0	0	591	655,441	(480)	(338,334)	2,716	3,825,238

(a) 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 \$

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

(d) 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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
2. Group Life - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
3. Individual Annuities - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
4. Group Annuities - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		New Hampshire		DURING THE YEAR		2023		NAIC Company Code		77968			
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount							
Individual Life																	
1. Industrial									0	0							
2. Whole									0	0						9	345,000
3. Term									0	0							
4. Indexed									0	0							
5. Universal									0	0							
6. Universal with secondary guarantees									0	0							
7. Variable									0	0							
8. Variable universal									0	0							
9. Credit									0	0							
10. Other		(f)							0	0							
11. Total Individual Life			0	0	0	0	0	0	0	0	0	0	0	0	0	9	345,000
Group Life																	
12. Whole									0	0							
13. Term									0	0							
14. Universal									0	0							
15. Variable									0	0							
16. Variable universal									0	0							
17. Credit									0	0							
18. Other		(f)							0	0							(a)
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																	
20. Fixed									0	0							
21. Indexed									0	0							
22. Variable with guarantees									0	0							
23. Variable without guarantees									0	0							
24. Life contingent payout									0	0							
25. Other		(f)							0	0							
26. Total Individual Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities																	
27. Fixed									0	0							
28. Indexed									0	0							
29. Variable with guarantees									0	0							
30. Variable without guarantees									0	0							
31. Life contingent payout									0	0							
32. Other		(f)							0	0							
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health																	
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13	9,846	(38)	(32,271)	540	403,899
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13	9,846	(38)	(32,271)	540	403,899
47. TOTAL			0	0	0	0	0	0	0	0	0	13	9,846	(38)	(32,271)	549	748,899

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF New Jersey DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole 2,208							0			3,180		3,180
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other (f)							0					0
11. Total Individual Life	2,208	0	0	0	0	0	0	0	0	3,180	0	3,180
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other (f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other (f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other (f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)							0	XXX	XXX	XXX		0
35. Comprehensive group (d)							0	XXX	XXX	XXX		0
36. Medicare Supplement (d)							0	XXX	XXX	XXX		0
37. Vision only (d)							0	XXX	XXX	XXX		0
38. Dental only (d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan (d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income (d)							0	XXX	XXX	XXX		0
44. Long-term care (d)							0	XXX	XXX	XXX		0
45. Other health (d)	236,609						0	XXX	XXX	XXX	37,301	37,301
46. Total Accident and Health	236,609	0	0	0	0	0	0	XXX	XXX	XXX	37,301	37,301
47. Total	238,817 (c)	0	0	0	0	0	0	0	0	3,180	37,301	40,481

24.NJ

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		New Jersey		DURING THE YEAR		2023		NAIC Company Code		77968			
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount							
Individual Life																	
1. Industrial									0	0							
2. Whole									0	0				2	40,000	7	345,000
3. Term									0	0							
4. Indexed									0	0							
5. Universal									0	0							
6. Universal with secondary guarantees									0	0							
7. Variable									0	0							
8. Variable universal									0	0							
9. Credit									0	0							
10. Other (f)									0	0							
11. Total Individual Life		0	0	0	0	0	0	0	0	0	0	0	2	40,000	7	345,000	
Group Life																	
12. Whole									0	0							
13. Term									0	0							
14. Universal									0	0							
15. Variable									0	0							
16. Variable universal									0	0							
17. Credit									0	0							
18. Other (f)									0	0							(a)
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																	
20. Fixed									0	0							
21. Indexed									0	0							
22. Variable with guarantees									0	0							
23. Variable without guarantees									0	0							
24. Life contingent payout									0	0							
25. Other (f)									0	0							
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities																	
27. Fixed									0	0							
28. Indexed									0	0							
29. Variable with guarantees									0	0							
30. Variable without guarantees									0	0							
31. Life contingent payout									0	0							
32. Other (f)									0	0							
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health																	
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal Employees Health Benefits Plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	128	99,852	(63)	(46,859)	416	272,236
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	128	99,852	(63)	(46,859)	416	272,236
47. TOTAL		0	0	0	0	0	0	0	0	0	0	128	99,852	(61)	(6,859)	423	617,236

(a) 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 \$

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

(d) 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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
2. Group Life - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
3. Individual Annuities - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
4. Group Annuities - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF New Mexico DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole .....42,826							0			3,726		3,726
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other .....(f)							0					0
11. Total Individual Life	42,826	0	0	0	0	0	0	0	0	3,726	0	3,726
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other .....(f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other .....(f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other .....(f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual .....(d)							0	XXX	XXX	XXX		0
35. Comprehensive group .....(d)							0	XXX	XXX	XXX		0
36. Medicare Supplement .....(d)							0	XXX	XXX	XXX		0
37. Vision only .....(d)							0	XXX	XXX	XXX		0
38. Dental only .....(d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan .....(d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare .....(d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid .....(d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income .....(d)							0	XXX	XXX	XXX		0
44. Long-term care .....(d)							0	XXX	XXX	XXX		0
45. Other health .....(d)	2,034,436						0	XXX	XXX	XXX	284,021	284,021
46. Total Accident and Health	2,034,436	0	0	0	0	0	0	XXX	XXX	XXX	284,021	284,021
47. Total	2,077,262 (c)	0	0	0	0	0	0	0	0	3,726	284,021	287,747

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		New Mexico		DURING THE YEAR		2023		NAIC Company Code		77968					
Line of Business		Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										22		Policy Exhibit					
		13		Claims Settled During Current Year										Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
				Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28		
				14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																			
1. Industrial								0	0										
2. Whole								0	0		31	1,295,000	(17)	(345,000)	119	3,915,000			
3. Term								0	0										
4. Indexed								0	0										
5. Universal								0	0										
6. Universal with secondary guarantees								0	0										
7. Variable								0	0										
8. Variable universal								0	0										
9. Credit								0	0										
10. Other		(f)						0	0										
11. Total Individual Life			0	0	0	0	0	0	0	0	31	1,295,000	(17)	(345,000)	119	3,915,000			
Group Life																			
12. Whole								0	0										
13. Term								0	0										
14. Universal								0	0										
15. Variable								0	0										
16. Variable universal								0	0										
17. Credit								0	0										
18. Other		(f)						0	0							(a)			
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Individual Annuities																			
20. Fixed								0	0										
21. Indexed								0	0										
22. Variable with guarantees								0	0										
23. Variable without guarantees								0	0										
24. Life contingent payout								0	0										
25. Other		(f)						0	0										
26. Total Individual Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Group Annuities																			
27. Fixed								0	0										
28. Indexed								0	0										
29. Variable with guarantees								0	0										
30. Variable without guarantees								0	0										
31. Life contingent payout								0	0										
32. Other		(f)						0	0										
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Accident and Health																			
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	200	169,080	(9)	(9,214)	2,724	2,106,524		
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	200	169,080	(9)	(9,214)	2,724	2,106,524		
47. TOTAL			0	0	0	0	0	0	0	0	0	231	1,464,080	(26)	(354,214)	2,843	6,021,524		

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF New York DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial												
2. Whole												
3. Term												
4. Indexed												
5. Universal												
6. Universal with secondary guarantees												
7. Variable												
8. Variable universal												
9. Credit												
10. Other	(f)											
11. Total Individual Life												
Group Life												
12. Whole												
13. Term												
14. Universal												
15. Variable												
16. Variable universal												
17. Credit												
18. Other	(f)											
19. Total Group Life												
Individual Annuities												
20. Fixed												
21. Indexed												
22. Variable with guarantees												
23. Variable without guarantees												
24. Life contingent payout												
25. Other	(f)											
26. Total Individual Annuities												
Group Annuities												
27. Fixed												
28. Indexed												
29. Variable with guarantees												
30. Variable without guarantees												
31. Life contingent payout												
32. Other	(f)											
33. Total Group Annuities												
Accident and Health												
34. Comprehensive individual	(d)							XXX	XXX	XXX		
35. Comprehensive group	(d)							XXX	XXX	XXX		
36. Medicare Supplement	(d)							XXX	XXX	XXX		
37. Vision only	(d)							XXX	XXX	XXX		
38. Dental only	(d)							XXX	XXX	XXX		
39. Federal Employees Health Benefits Plan	(d)							XXX	XXX	XXX		
40. Title XVIII Medicare	(d)	(e)						XXX	XXX	XXX		
41. Title XIX Medicaid	(d)							XXX	XXX	XXX		
42. Credit A&H								XXX	XXX	XXX		
43. Disability income	(d)							XXX	XXX	XXX		
44. Long-term care	(d)							XXX	XXX	XXX		
45. Other health	(d)							XXX	XXX	XXX		
46. Total Accident and Health								XXX	XXX	XXX		
47. Total	(c)											

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		New York		DURING THE YEAR		2023		NAIC Company Code		77968			
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Policy Exhibit		In Force December 31, Current Year (b)			
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																	
1. Industrial																	
2. Whole																	
3. Term																	
4. Indexed																	
5. Universal																	
6. Universal with secondary guarantees																	
7. Variable																	
8. Variable universal																	
9. Credit																	
10. Other (f)																	
11. Total Individual Life																	
Group Life																	
12. Whole																	
13. Term																	
14. Universal																	
15. Variable																	
16. Variable universal																	
17. Credit																	
18. Other (f)																(a)	
19. Total Group Life																	
Individual Annuities																	
20. Fixed																	
21. Indexed																	
22. Variable with guarantees																	
23. Variable without guarantees																	
24. Life contingent payout																	
25. Other (f)																	
26. Total Individual Annuities																	
Group Annuities																	
27. Fixed																	
28. Indexed																	
29. Variable with guarantees																	
30. Variable without guarantees																	
31. Life contingent payout																	
32. Other (f)																	
33. Total Group Annuities																	
Accident and Health																	
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
36. Medicare Supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
39. Federal Employees Health Benefits Plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
42. Credit A&H (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX							
47. TOTAL																	

(a) 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 \$

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$

(d) 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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ Column 7) \$ Column 12) \$

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ Column 7) \$ Column 12) \$

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ Column 7) \$ Column 12) \$

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ Column 7) \$ Column 12) \$



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF North Carolina DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole 176,235							0	25,000		11,805		36,805
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other (f)							0					0
11. Total Individual Life	176,235	0	0	0	0	0	0	25,000	0	11,805	0	36,805
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other (f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other (f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other (f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)							0	XXX	XXX	XXX		0
35. Comprehensive group (d)							0	XXX	XXX	XXX		0
36. Medicare Supplement (d)							0	XXX	XXX	XXX		0
37. Vision only (d)							0	XXX	XXX	XXX		0
38. Dental only (d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan (d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income (d)							0	XXX	XXX	XXX		0
44. Long-term care (d)							0	XXX	XXX	XXX		0
45. Other health (d)	16,155,546						0	XXX	XXX	XXX	5,803,154	5,803,154
46. Total Accident and Health	16,155,546	0	0	0	0	0	0	XXX	XXX	XXX	5,803,154	5,803,154
47. Total	16,331,781 (c)	0	0	0	0	0	0	25,000	0	11,805	5,803,154	5,839,959

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		North Carolina		DURING THE YEAR		2023		NAIC Company Code		77968					
Line of Business		Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										22		Policy Exhibit					
		13		Claims Settled During Current Year										Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
				Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28		
		14	15	16	17	18	19	20	21	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount			
		Incurred During Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount									
Individual Life																			
1. Industrial									0	0									
2. Whole		25,000	1	25,000					1	25,000		106	3,225,000	(57)	(1,520,000)	649	17,050,000		
3. Term									0	0									
4. Indexed									0	0									
5. Universal									0	0									
6. Universal with secondary guarantees									0	0									
7. Variable									0	0									
8. Variable universal									0	0									
9. Credit									0	0									
10. Other		(f)							0	0									
11. Total Individual Life		25,000	1	25,000	0	0	0	0	1	25,000	0	106	3,225,000	(57)	(1,520,000)	649	17,050,000		
Group Life																			
12. Whole									0	0									
13. Term									0	0									
14. Universal									0	0									
15. Variable									0	0									
16. Variable universal									0	0									
17. Credit									0	0									
18. Other		(f)							0	0						(a)			
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Individual Annuities																			
20. Fixed									0	0									
21. Indexed									0	0									
22. Variable with guarantees									0	0									
23. Variable without guarantees									0	0									
24. Life contingent payout									0	0									
25. Other		(f)							0	0									
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Annuities																			
27. Fixed									0	0									
28. Indexed									0	0									
29. Variable with guarantees									0	0									
30. Variable without guarantees									0	0									
31. Life contingent payout									0	0									
32. Other		(f)							0	0									
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Accident and Health																			
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,055	5,024,395	(6,237)	(3,041,373)	31,621	17,255,143		
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,055	5,024,395	(6,237)	(3,041,373)	31,621	17,255,143		
47. TOTAL			25,000	1	25,000	0	0	0	1	25,000	0	10,161	8,249,395	(6,294)	(4,561,373)	32,270	34,305,143		

(a) 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 \$ _____.

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____.

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0.

(d) 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 _____.

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____.

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		North Dakota		DURING THE YEAR				2023		NAIC Company Code		77968			
Line of Business		Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										22		Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		13		Claims Settled During Current Year															
		Incurred During Current Year		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		Unpaid December 31, Current Year	23	24	25	26	27	28	
				14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount								
Individual Life																			
1.	Industrial								0	0									
2.	Whole								0	0		9	565,000	(2)	(220,000)	53	1,650,000		
3.	Term								0	0									
4.	Indexed								0	0									
5.	Universal								0	0									
6.	Universal with secondary guarantees								0	0									
7.	Variable								0	0									
8.	Variable universal								0	0									
9.	Credit								0	0									
10.	Other	(f)							0	0									
11.	Total Individual Life		0	0	0	0	0	0	0	0	0	9	565,000	(2)	(220,000)	53	1,650,000		
Group Life																			
12.	Whole								0	0									
13.	Term								0	0									
14.	Universal								0	0									
15.	Variable								0	0									
16.	Variable universal								0	0									
17.	Credit								0	0									
18.	Other	(f)							0	0							(a)		
19.	Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Individual Annuities																			
20.	Fixed								0	0									
21.	Indexed								0	0									
22.	Variable with guarantees								0	0									
23.	Variable without guarantees								0	0									
24.	Life contingent payout								0	0									
25.	Other	(f)							0	0									
26.	Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Annuities																			
27.	Fixed								0	0									
28.	Indexed								0	0									
29.	Variable with guarantees								0	0									
30.	Variable without guarantees								0	0									
31.	Life contingent payout								0	0									
32.	Other	(f)							0	0									
33.	Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Accident and Health																			
34.	Comprehensive individual	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
35.	Comprehensive group	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
36.	Medicare Supplement	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
37.	Vision only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
38.	Dental only	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
39.	Federal Employees Health Benefits Plan	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
40.	Title XVIII Medicare	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
41.	Title XIX Medicaid	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
42.	Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
43.	Disability income	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
44.	Long-term care	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
45.	Other health	(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,867	1,038,841	(987)	(631,382)	6,877	4,367,485		
46.	Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,867	1,038,841	(987)	(631,382)	6,877	4,367,485		
47.	TOTAL		0	0	0	0	0	0	0	0	0	1,876	1,603,841	(989)	(851,382)	6,930	6,017,485		

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Ohio DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole 141,056							0	35,169		9,771		44,940
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other (f)							0					0
11. Total Individual Life	141,056	0	0	0	0	0	0	35,169	0	9,771	0	44,940
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other (f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other (f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other (f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)							0	XXX	XXX	XXX		0
35. Comprehensive group (d)							0	XXX	XXX	XXX		0
36. Medicare Supplement (d)							0	XXX	XXX	XXX		0
37. Vision only (d)							0	XXX	XXX	XXX		0
38. Dental only (d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan (d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income (d)							0	XXX	XXX	XXX		0
44. Long-term care (d)							0	XXX	XXX	XXX		0
45. Other health (d)	24,565,280						0	XXX	XXX	XXX	13,973,554	13,973,554
46. Total Accident and Health	24,565,280	0	0	0	0	0	0	XXX	XXX	XXX	13,973,554	13,973,554
47. Total	24,706,336 (c)	0	0	0	0	0	0	35,169	0	9,771	13,973,554	14,018,494

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Ohio		DURING THE YEAR				2023		NAIC Company Code		77968	
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount							
Individual Life																	
1. Industrial									0	0							
2. Whole		35,169	2	35,169					2	35,169		19	720,000	(13)	(290,169)	383	11,296,522
3. Term									0	0							
4. Indexed									0	0							
5. Universal									0	0							
6. Universal with secondary guarantees									0	0							
7. Variable									0	0							
8. Variable universal									0	0							
9. Credit									0	0							
10. Other		(f)							0	0							
11. Total Individual Life		35,169	2	35,169	0	0	0	0	2	35,169	0	19	720,000	(13)	(290,169)	383	11,296,522
Group Life																	
12. Whole									0	0							
13. Term									0	0							
14. Universal									0	0							
15. Variable									0	0							
16. Variable universal									0	0							
17. Credit									0	0							
18. Other		(f)							0	0						(a)	
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																	
20. Fixed									0	0							
21. Indexed									0	0							
22. Variable with guarantees									0	0							
23. Variable without guarantees									0	0							
24. Life contingent payout									0	0							
25. Other		(f)							0	0							
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities																	
27. Fixed									0	0							
28. Indexed									0	0							
29. Variable with guarantees									0	0							
30. Variable without guarantees									0	0							
31. Life contingent payout									0	0							
32. Other		(f)							0	0							
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health																	
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,400	2,877,500	(3,253)	(1,997,908)	36,621	25,023,822
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,400	2,877,500	(3,253)	(1,997,908)	36,621	25,023,822
47. TOTAL		35,169	2	35,169	0	0	0	0	2	35,169	0	5,419	3,597,500	(3,266)	(2,288,077)	37,004	36,320,344

(a) 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 \$

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

(d) 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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ Column 7) \$ Column 12) \$

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ Column 7) \$ Column 12) \$

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ Column 7) \$ Column 12) \$

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ Column 7) \$ Column 12) \$



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Oklahoma DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole 109,049							0	210,000		116		210,116
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other (f)							0					0
11. Total Individual Life	109,049	0	0	0	0	0	0	210,000	0	116	0	210,116
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other (f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other (f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other (f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)							0	XXX	XXX	XXX		0
35. Comprehensive group (d)							0	XXX	XXX	XXX		0
36. Medicare Supplement (d)							0	XXX	XXX	XXX		0
37. Vision only (d)							0	XXX	XXX	XXX		0
38. Dental only (d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan (d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income (d)							0	XXX	XXX	XXX		0
44. Long-term care (d)							0	XXX	XXX	XXX		0
45. Other health (d)	6,105,354						0	XXX	XXX	XXX	1,812,536	1,812,536
46. Total Accident and Health	6,105,354	0	0	0	0	0	0	XXX	XXX	XXX	1,812,536	1,812,536
47. Total	6,214,403 (c)	0	0	0	0	0	0	210,000	0	116	1,812,536	2,022,652

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Oklahoma		DURING THE YEAR				2023		NAIC Company Code		77968									
Line of Business		Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										22		23		24		25		26		27		28	
		13		Claims Settled During Current Year										Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)							
		Incurred During Current Year		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		Unpaid December 31, Current Year		23		24		25		26		27		28	
				14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount			Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount				
Individual Life																									
1. Industrial										0	0														
2. Whole		210,000	3	210,000						3	210,000		52	1,395,000	(32)	(1,035,000)	319	8,935,000							
3. Term										0	0														
4. Indexed										0	0														
5. Universal										0	0														
6. Universal with secondary guarantees										0	0														
7. Variable										0	0														
8. Variable universal										0	0														
9. Credit										0	0														
10. Other		(f)								0	0														
11. Total Individual Life		210,000	3	210,000	0	0	0	0	3	210,000	0	52	1,395,000	(32)	(1,035,000)	319	8,935,000								
Group Life																									
12. Whole										0	0														
13. Term										0	0														
14. Universal										0	0														
15. Variable										0	0														
16. Variable universal										0	0														
17. Credit										0	0														
18. Other		(f)								0	0											(a)			
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Individual Annuities																									
20. Fixed										0	0														
21. Indexed										0	0														
22. Variable with guarantees										0	0														
23. Variable without guarantees										0	0														
24. Life contingent payout										0	0														
25. Other		(f)								0	0														
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Group Annuities																									
27. Fixed										0	0														
28. Indexed										0	0														
29. Variable with guarantees										0	0														
30. Variable without guarantees										0	0														
31. Life contingent payout										0	0														
32. Other		(f)								0	0														
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Accident and Health																									
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX													
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX													
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX													
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX													
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX													
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX													
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX													
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX													
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX													
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX													
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX													
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,232	1,986,774	(1,868)	(1,131,930)	9,959	6,659,387							
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,232	1,986,774	(1,868)	(1,131,930)	9,959	6,659,387							
47. TOTAL			210,000	3	210,000	0	0	0	0	3	210,000	0	3,284	3,381,774	(1,900)	(2,166,930)	10,278	15,594,387							

(a) 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 \$

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

(d) 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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
2. Group Life - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
3. Individual Annuities - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
4. Group Annuities - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$

24. OR



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290		BUSINESS IN THE STATE OF Oregon		DURING THE YEAR 2023				NAIC Company Code 77968				
Line of Business		1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				Claims and Benefits Paid				
				3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial								0				0
2. Whole		10,793						0			385	385
3. Term								0				0
4. Indexed								0				0
5. Universal								0				0
6. Universal with secondary guarantees								0				0
7. Variable								0				0
8. Variable universal								0				0
9. Credit								0				0
10. Other .....(f)								0				0
11. Total Individual Life		10,793	0	0	0	0	0	0	0	385	0	385
Group Life												
12. Whole								0				0
13. Term								0				0
14. Universal								0				0
15. Variable								0				0
16. Variable universal								0				0
17. Credit								0				0
18. Other .....(f)								0				0
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed								0				0
21. Indexed								0				0
22. Variable with guarantees								0				0
23. Variable without guarantees								0				0
24. Life contingent payout								0				0
25. Other .....(f)								0				0
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed								0				0
28. Indexed								0				0
29. Variable with guarantees								0				0
30. Variable without guarantees								0				0
31. Life contingent payout								0				0
32. Other .....(f)								0				0
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual .....(d)								0	XXX	XXX	XXX	0
35. Comprehensive group .....(d)								0	XXX	XXX	XXX	0
36. Medicare Supplement .....(d)								0	XXX	XXX	XXX	0
37. Vision only .....(d)								0	XXX	XXX	XXX	0
38. Dental only .....(d)								0	XXX	XXX	XXX	0
39. Federal Employees Health Benefits Plan .....(d)								0	XXX	XXX	XXX	0
40. Title XVIII Medicare .....(d) (e)								0	XXX	XXX	XXX	0
41. Title XIX Medicaid .....(d)								0	XXX	XXX	XXX	0
42. Credit A&H								0	XXX	XXX	XXX	0
43. Disability income .....(d)								0	XXX	XXX	XXX	0
44. Long-term care .....(d)								0	XXX	XXX	XXX	0
45. Other health .....(d)		2,445,273						0	XXX	XXX	XXX	296,468
46. Total Accident and Health		2,445,273	0	0	0	0	0	0	XXX	XXX	XXX	296,468
47. Total		2,456,066 (c)	0	0	0	0	0	0	0	0	385	296,468

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Oregon		DURING THE YEAR		2023		NAIC Company Code		77968																	
Line of Business		Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										22		Policy Exhibit		In Force December 31, Current Year (b)															
		13		Claims Settled During Current Year						Issued During Year				Other Changes to In Force (Net)																	
				Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23		24		25		26		27		28									
		Incurred During Current Year		14 Number of Pols/ Certs		15 Amount		16 Number of Pols/ Certs		17 Amount		18 Number of Pols/ Certs		19 Amount		20 Number of Pols/ Certs		21 Amount		Unpaid December 31, Current Year		Number of Pols/ Certs		Amount		Number of Pols/ Certs		Amount		Number of Pols/ Certs		Amount
Individual Life																															
1. Industrial										0	0																				
2. Whole										0	0				13		500,000		(5)								36		935,000		
3. Term										0	0																				
4. Indexed										0	0																				
5. Universal										0	0																				
6. Universal with secondary guarantees										0	0																				
7. Variable										0	0																				
8. Variable universal										0	0																				
9. Credit										0	0																				
10. Other (f)										0	0																				
11. Total Individual Life			0		0		0		0		0		0		13		500,000		(5)								36		935,000		
Group Life																															
12. Whole										0	0																				
13. Term										0	0																				
14. Universal										0	0																				
15. Variable										0	0																				
16. Variable universal										0	0																				
17. Credit										0	0																				
18. Other (f)										0	0																			(a)	
19. Total Group Life			0		0		0		0		0		0		0		0		0		0		0		0		0		0		0
Individual Annuities																															
20. Fixed										0	0																				
21. Indexed										0	0																				
22. Variable with guarantees										0	0																				
23. Variable without guarantees										0	0																				
24. Life contingent payout										0	0																				
25. Other (f)										0	0																				
26. Total Individual Annuities			0		0		0		0		0		0		0		0		0		0		0		0		0		0		0
Group Annuities																															
27. Fixed										0	0																				
28. Indexed										0	0																				
29. Variable with guarantees										0	0																				
30. Variable without guarantees										0	0																				
31. Life contingent payout										0	0																				
32. Other (f)										0	0																				
33. Total Group Annuities			0		0		0		0		0		0		0		0		0		0		0		0		0		0		0
Accident and Health																															
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX																	
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX																	
36. Medicare Supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX																	
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX																	
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX																	
39. Federal Employees Health Benefits Plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX																	
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX																	
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX																	
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX																	
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX																	
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX																	
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,632		969,470		(590)								4,543		2,776,408		
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,632		969,470		(590)								4,543		2,776,408		
47. TOTAL			0		0		0		0		0		0		1,645		1,469,470		(595)								4,579		3,711,408		

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Pennsylvania DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole .....47,757							0			122		122
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other .....(f)							0					0
11. Total Individual Life	47,757	0	0	0	0	0	0	0	0	122	0	122
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other .....(f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other .....(f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other .....(f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual .....(d)							0	XXX	XXX	XXX		0
35. Comprehensive group .....(d)							0	XXX	XXX	XXX		0
36. Medicare Supplement .....(d)							0	XXX	XXX	XXX		0
37. Vision only .....(d)							0	XXX	XXX	XXX		0
38. Dental only .....(d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan .....(d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare .....(d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid .....(d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income .....(d)							0	XXX	XXX	XXX		0
44. Long-term care .....(d)							0	XXX	XXX	XXX		0
45. Other health .....(d)	3,549,712						0	XXX	XXX	XXX	1,333,902	1,333,902
46. Total Accident and Health	3,549,712	0	0	0	0	0	0	XXX	XXX	XXX	1,333,902	1,333,902
47. Total	3,597,469 (c)	0	0	0	0	0	0	0	0	122	1,333,902	1,334,024

24.PA

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF				Pennsylvania				DURING THE YEAR				2023		NAIC Company Code				77968	
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)							
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount						
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount													
Individual Life																							
1. Industrial									0	0													
2. Whole									0	0		26	885,000	(16)	(360,000)	134	3,520,000						
3. Term									0	0													
4. Indexed									0	0													
5. Universal									0	0													
6. Universal with secondary guarantees									0	0													
7. Variable									0	0													
8. Variable universal									0	0													
9. Credit									0	0													
10. Other		(f)							0	0													
11. Total Individual Life			0	0	0	0	0	0	0	0	0	26	885,000	(16)	(360,000)	134	3,520,000						
Group Life																							
12. Whole									0	0													
13. Term									0	0													
14. Universal									0	0													
15. Variable									0	0													
16. Variable universal									0	0													
17. Credit									0	0													
18. Other		(f)							0	0									(a)				
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				
Individual Annuities																							
20. Fixed									0	0													
21. Indexed									0	0													
22. Variable with guarantees									0	0													
23. Variable without guarantees									0	0													
24. Life contingent payout									0	0													
25. Other		(f)							0	0													
26. Total Individual Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				
Group Annuities																							
27. Fixed									0	0													
28. Indexed									0	0													
29. Variable with guarantees									0	0													
30. Variable without guarantees									0	0													
31. Life contingent payout									0	0													
32. Other		(f)							0	0													
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				
Accident and Health																							
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,035	745,385	(575)	(391,890)	5,378	3,718,210						
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,035	745,385	(575)	(391,890)	5,378	3,718,210						
47. TOTAL			0	0	0	0	0	0	0	0	0	1,061	1,630,385	(591)	(751,890)	5,512	7,238,210						

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Rhode Island DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other	(f)						0					0
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other	(f)						0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other	(f)						0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other	(f)						0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual	(d)						0	XXX	XXX	XXX		0
35. Comprehensive group	(d)						0	XXX	XXX	XXX		0
36. Medicare Supplement	(d)						0	XXX	XXX	XXX		0
37. Vision only	(d)						0	XXX	XXX	XXX		0
38. Dental only	(d)						0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan	(d)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare	(d)	(e)					0	XXX	XXX	XXX		0
41. Title XIX Medicaid	(d)						0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income	(d)						0	XXX	XXX	XXX		0
44. Long-term care	(d)						0	XXX	XXX	XXX		0
45. Other health	(d)						0	XXX	XXX	XXX		0
46. Total Accident and Health	45,575	0	0	0	0	0	0	XXX	XXX	XXX	3,285	3,285
47. Total	45,575 (c)	0	0	0	0	0	0	0	0	0	3,285	3,285

24.RI

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Rhode Island		DURING THE YEAR							2023		NAIC Company Code		77968	
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)				
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount			
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount										
Individual Life																				
1. Industrial									0	0										
2. Whole									0	0										
3. Term									0	0										
4. Indexed									0	0										
5. Universal									0	0										
6. Universal with secondary guarantees									0	0										
7. Variable									0	0										
8. Variable universal									0	0										
9. Credit									0	0										
10. Other		(f)							0	0										
11. Total Individual Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Group Life																				
12. Whole									0	0										
13. Term									0	0										
14. Universal									0	0										
15. Variable									0	0										
16. Variable universal									0	0										
17. Credit									0	0										
18. Other		(f)							0	0							(a)			
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Individual Annuities																				
20. Fixed									0	0										
21. Indexed									0	0										
22. Variable with guarantees									0	0										
23. Variable without guarantees									0	0										
24. Life contingent payout									0	0										
25. Other		(f)							0	0										
26. Total Individual Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Group Annuities																				
27. Fixed									0	0										
28. Indexed									0	0										
29. Variable with guarantees									0	0										
30. Variable without guarantees									0	0										
31. Life contingent payout									0	0										
32. Other		(f)							0	0										
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Accident and Health																				
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX									
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13	7,723	(15)	(9,319)	67	45,680			
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13	7,723	(15)	(9,319)	67	45,680			
47. TOTAL			0	0	0	0	0	0	0	0	0	13	7,723	(15)	(9,319)	67	45,680			

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF South Carolina DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole 133,371							0	20,000		6,693		26,693
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other (f)							0					0
11. Total Individual Life	133,371	0	0	0	0	0	0	20,000	0	6,693	0	26,693
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other (f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other (f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other (f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)							0	XXX	XXX	XXX		0
35. Comprehensive group (d)							0	XXX	XXX	XXX		0
36. Medicare Supplement (d)							0	XXX	XXX	XXX		0
37. Vision only (d)							0	XXX	XXX	XXX		0
38. Dental only (d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan (d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income (d)							0	XXX	XXX	XXX		0
44. Long-term care (d)							0	XXX	XXX	XXX		0
45. Other health (d)	5,569,021						0	XXX	XXX	XXX	1,500,459	1,500,459
46. Total Accident and Health	5,569,021	0	0	0	0	0	0	XXX	XXX	XXX	1,500,459	1,500,459
47. Total	5,702,392 (c)	0	0	0	0	0	0	20,000	0	6,693	1,500,459	1,527,152

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF				South Carolina				DURING THE YEAR				2023		NAIC Company Code				77968	
Line of Business		Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										22		Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)					
		13		Claims Settled During Current Year																			
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		Unpaid December 31, Current Year	23	24	25	26	27	28							
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount														
		Incurred During Current Year										Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount						
Individual Life																							
1. Industrial									0	0													
2. Whole		20,000	1	20,000					1	20,000		44	1,485,000	(49)	(1,369,573)	382	9,915,000						
3. Term									0	0													
4. Indexed									0	0													
5. Universal									0	0													
6. Universal with secondary guarantees									0	0													
7. Variable									0	0													
8. Variable universal									0	0													
9. Credit									0	0													
10. Other		(f)							0	0													
11. Total Individual Life		20,000	1	20,000	0	0	0	0	1	20,000	0	44	1,485,000	(49)	(1,369,573)	382	9,915,000						
Group Life																							
12. Whole									0	0													
13. Term									0	0													
14. Universal									0	0													
15. Variable									0	0													
16. Variable universal									0	0													
17. Credit									0	0													
18. Other		(f)							0	0							(a)						
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0						
Individual Annuities																							
20. Fixed									0	0													
21. Indexed									0	0													
22. Variable with guarantees									0	0													
23. Variable without guarantees									0	0													
24. Life contingent payout									0	0													
25. Other		(f)							0	0													
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0						
Group Annuities																							
27. Fixed									0	0													
28. Indexed									0	0													
29. Variable with guarantees									0	0													
30. Variable without guarantees									0	0													
31. Life contingent payout									0	0													
32. Other		(f)							0	0													
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0						
Accident and Health																							
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX												
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,139	2,590,096	(3,616)	(1,475,511)	12,313	6,165,755						
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,139	2,590,096	(3,616)	(1,475,511)	12,313	6,165,755						
47. TOTAL			20,000	1	20,000	0	0	0	0	1	20,000	0	6,183	4,075,096	(3,665)	(2,845,084)	12,695	16,080,755					

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF South Dakota DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole .....14,184							0			7		7
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other .....(f)							0					0
11. Total Individual Life	14,184	0	0	0	0	0	0	0	0	7	0	7
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other .....(f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other .....(f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other .....(f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual .....(d)							0	XXX	XXX	XXX		0
35. Comprehensive group .....(d)							0	XXX	XXX	XXX		0
36. Medicare Supplement .....(d)							0	XXX	XXX	XXX		0
37. Vision only .....(d)							0	XXX	XXX	XXX		0
38. Dental only .....(d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan .....(d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare .....(d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid .....(d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income .....(d)							0	XXX	XXX	XXX		0
44. Long-term care .....(d)							0	XXX	XXX	XXX		0
45. Other health .....(d)	8,847,120						0	XXX	XXX	XXX	3,996,814	3,996,814
46. Total Accident and Health	8,847,120	0	0	0	0	0	0	XXX	XXX	XXX	3,996,814	3,996,821
47. Total	8,861,304 (c)	0	0	0	0	0	0	0	0	7	3,996,814	3,996,821

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		South Dakota		DURING THE YEAR				2023		NAIC Company Code		77968			
Line of Business		Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										22		Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		13		Claims Settled During Current Year															
		Incurred During Current Year		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		Unpaid December 31, Current Year	23	24	25	26	27	28	
				14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount								
Individual Life																			
1. Industrial									0	0									
2. Whole									0	0		4	50,000	(2)	(20,000)	42	1,500,000		
3. Term									0	0									
4. Indexed									0	0									
5. Universal									0	0									
6. Universal with secondary guarantees									0	0									
7. Variable									0	0									
8. Variable universal									0	0									
9. Credit									0	0									
10. Other		(f)							0	0									
11. Total Individual Life			0	0	0	0	0	0	0	0	0	4	50,000	(2)	(20,000)	42	1,500,000		
Group Life																			
12. Whole									0	0									
13. Term									0	0									
14. Universal									0	0									
15. Variable									0	0									
16. Variable universal									0	0									
17. Credit									0	0									
18. Other		(f)							0	0							(a)		
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Individual Annuities																			
20. Fixed									0	0									
21. Indexed									0	0									
22. Variable with guarantees									0	0									
23. Variable without guarantees									0	0									
24. Life contingent payout									0	0									
25. Other		(f)							0	0									
26. Total Individual Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Annuities																			
27. Fixed									0	0									
28. Indexed									0	0									
29. Variable with guarantees									0	0									
30. Variable without guarantees									0	0									
31. Life contingent payout									0	0									
32. Other		(f)							0	0									
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Accident and Health																			
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,885	2,476,952	(1,786)	(1,077,008)	14,500	9,554,618		
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,885	2,476,952	(1,786)	(1,077,008)	14,500	9,554,618		
47. TOTAL			0	0	0	0	0	0	0	0	0	3,889	2,526,952	(1,788)	(1,097,008)	14,542	11,054,618		

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Tennessee DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole .....153,532							0	75,000		2,215		77,215
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other .....(f)							0					0
11. Total Individual Life	153,532	0	0	0	0	0	0	75,000	0	2,215	0	77,215
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other .....(f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other .....(f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other .....(f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual .....(d)							0	XXX	XXX	XXX		0
35. Comprehensive group .....(d)							0	XXX	XXX	XXX		0
36. Medicare Supplement .....(d)							0	XXX	XXX	XXX		0
37. Vision only .....(d)							0	XXX	XXX	XXX		0
38. Dental only .....(d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan .....(d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare .....(d)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid .....(d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income .....(d)							0	XXX	XXX	XXX		0
44. Long-term care .....(d)							0	XXX	XXX	XXX		0
45. Other health .....(d)	9,318,655						0	XXX	XXX	XXX	2,871,339	2,871,339
46. Total Accident and Health	9,318,655	0	0	0	0	0	0	XXX	XXX	XXX	2,871,339	2,871,339
47. Total	9,472,187 (c)	0	0	0	0	0	0	75,000	0	2,215	2,871,339	2,948,554

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Tennessee		DURING THE YEAR				2023		NAIC Company Code		77968			
Line of Business		Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										22		Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
		13		Claims Settled During Current Year										23	24	25	26	27	28
		Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount			
		14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount										
Individual Life		Incurred During Current Year																	
1. Industrial									0	0									
2. Whole		75,000	1	75,000					1	75,000		41	1,060,000	(15)	(540,000)	345	10,820,000		
3. Term									0	0									
4. Indexed									0	0									
5. Universal									0	0									
6. Universal with secondary guarantees									0	0									
7. Variable									0	0									
8. Variable universal									0	0									
9. Credit									0	0									
10. Other		(f)							0	0									
11. Total Individual Life		75,000	1	75,000	0	0	0	0	1	75,000	0	41	1,060,000	(15)	(540,000)	345	10,820,000		
Group Life																			
12. Whole									0	0									
13. Term									0	0									
14. Universal									0	0									
15. Variable									0	0									
16. Variable universal									0	0									
17. Credit									0	0									
18. Other		(f)							0	0							(a)		
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Individual Annuities																			
20. Fixed									0	0									
21. Indexed									0	0									
22. Variable with guarantees									0	0									
23. Variable without guarantees									0	0									
24. Life contingent payout									0	0									
25. Other		(f)							0	0									
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Annuities																			
27. Fixed									0	0									
28. Indexed									0	0									
29. Variable with guarantees									0	0									
30. Variable without guarantees									0	0									
31. Life contingent payout									0	0									
32. Other		(f)							0	0									
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Accident and Health																			
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,976	2,923,272	(2,670)	(1,601,559)	15,739	10,177,110		
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,976	2,923,272	(2,670)	(1,601,559)	15,739	10,177,110		
47. TOTAL			75,000	1	75,000	0	0	0	0	1	75,000	0	5,017	3,983,272	(2,685)	(2,141,559)	16,084	20,997,110	

(a) 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 \$ _____.

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____.

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0.

(d) 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 _____.

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____.

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Texas DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole .....2,465,187							0	395,000		159,045		554,045
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other .....(f)							0					0
11. Total Individual Life	2,465,187	0	0	0	0	0	0	395,000	0	159,045	0	554,045
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other .....(f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other .....(f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other .....(f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual .....(d)							0	XXX	XXX	XXX		0
35. Comprehensive group .....(d)							0	XXX	XXX	XXX		0
36. Medicare Supplement .....(d)							0	XXX	XXX	XXX		0
37. Vision only .....(d)							0	XXX	XXX	XXX		0
38. Dental only .....(d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan .....(d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare .....(d)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid .....(d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income .....(d)							0	XXX	XXX	XXX		0
44. Long-term care .....(d)							0	XXX	XXX	XXX		0
45. Other health .....(d)	75,472,962						0	XXX	XXX	XXX	22,931,298	22,931,298
46. Total Accident and Health	75,472,962	0	0	0	0	0	0	XXX	XXX	XXX	22,931,298	22,931,298
47. Total	77,938,149 (c)	0	0	0	0	0	0	395,000	0	159,045	22,931,298	23,485,343

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Texas		DURING THE YEAR				2023		NAIC Company Code		77968			
Line of Business		Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										22		Policy Exhibit					
		13		Claims Settled During Current Year										Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
				Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28		
		14	15	16	17	18	19	20	21	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
		Incurred During Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount									
Individual Life																			
1. Industrial									0	0									
2. Whole		395,000	11	395,000					11	395,000		1,457	43,665,000	(1,355)	(39,145,000)	7,405	212,206,000		
3. Term									0	0									
4. Indexed									0	0									
5. Universal									0	0									
6. Universal with secondary guarantees									0	0									
7. Variable									0	0									
8. Variable universal									0	0									
9. Credit									0	0									
10. Other		(f)							0	0									
11. Total Individual Life		395,000	11	395,000	0	0	0	0	11	395,000	0	1,457	43,665,000	(1,355)	(39,145,000)	7,405	212,206,000		
Group Life																			
12. Whole									0	0									
13. Term									0	0									
14. Universal									0	0									
15. Variable									0	0									
16. Variable universal									0	0									
17. Credit									0	0									
18. Other		(f)							0	0							(a)		
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Individual Annuities																			
20. Fixed									0	0									
21. Indexed									0	0									
22. Variable with guarantees									0	0									
23. Variable without guarantees									0	0									
24. Life contingent payout									0	0									
25. Other		(f)							0	0									
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Annuities																			
27. Fixed									0	0									
28. Indexed									0	0									
29. Variable with guarantees									0	0									
30. Variable without guarantees									0	0									
31. Life contingent payout									0	0									
32. Other		(f)							0	0									
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Accident and Health																			
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27,094	16,914,040	(22,979)	(14,139,710)	120,792	77,931,008		
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27,094	16,914,040	(22,979)	(14,139,710)	120,792	77,931,008		
47. TOTAL			395,000	11	395,000	0	0	0	11	395,000	0	28,551	60,579,040	(24,334)	(53,284,710)	128,197	290,137,008		

(a) 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 \$ _____.

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____.

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0.

(d) 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 _____.

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____.

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Utah DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole 9,207							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other (f)							0					0
11. Total Individual Life	9,207	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other (f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other (f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other (f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)							0	XXX	XXX	XXX		0
35. Comprehensive group (d)							0	XXX	XXX	XXX		0
36. Medicare Supplement (d)							0	XXX	XXX	XXX		0
37. Vision only (d)							0	XXX	XXX	XXX		0
38. Dental only (d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan (d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income (d)							0	XXX	XXX	XXX		0
44. Long-term care (d)							0	XXX	XXX	XXX		0
45. Other health (d)	8,006,806						0	XXX	XXX	XXX	2,320,093	2,320,093
46. Total Accident and Health	8,006,806	0	0	0	0	0	0	XXX	XXX	XXX	2,320,093	2,320,093
47. Total	8,016,013 (c)	0	0	0	0	0	0	0	0	0	2,320,093	2,320,093

24. UT

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Utah		DURING THE YEAR				2023		NAIC Company Code		77968	
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount							
Individual Life																	
1. Industrial									0	0							
2. Whole									0	0		11	505,000	(3)	(95,000)	16	665,000
3. Term									0	0							
4. Indexed									0	0							
5. Universal									0	0							
6. Universal with secondary guarantees									0	0							
7. Variable									0	0							
8. Variable universal									0	0							
9. Credit									0	0							
10. Other (f)									0	0							
11. Total Individual Life		0	0	0	0	0	0	0	0	0	0	11	505,000	(3)	(95,000)	16	665,000
Group Life																	
12. Whole									0	0							
13. Term									0	0							
14. Universal									0	0							
15. Variable									0	0							
16. Variable universal									0	0							
17. Credit									0	0							
18. Other (f)									0	0							(a)
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																	
20. Fixed									0	0							
21. Indexed									0	0							
22. Variable with guarantees									0	0							
23. Variable without guarantees									0	0							
24. Life contingent payout									0	0							
25. Other (f)									0	0							
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities																	
27. Fixed									0	0							
28. Indexed									0	0							
29. Variable with guarantees									0	0							
30. Variable without guarantees									0	0							
31. Life contingent payout									0	0							
32. Other (f)									0	0							
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health																	
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal Employees Health Benefits Plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,743	2,185,411	(2,641)	(1,548,368)	12,434	8,445,936
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,743	2,185,411	(2,641)	(1,548,368)	12,434	8,445,936
47. TOTAL		0	0	0	0	0	0	0	0	0	0	3,754	2,690,411	(2,644)	(1,643,368)	12,450	9,110,936

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Vermont DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole .....469							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other .....(f)							0					0
11. Total Individual Life	469	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other .....(f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other .....(f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other .....(f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual .....(d)							0	XXX	XXX	XXX		0
35. Comprehensive group .....(d)							0	XXX	XXX	XXX		0
36. Medicare Supplement .....(d)							0	XXX	XXX	XXX		0
37. Vision only .....(d)							0	XXX	XXX	XXX		0
38. Dental only .....(d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan .....(d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare .....(d)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid .....(d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income .....(d)							0	XXX	XXX	XXX		0
44. Long-term care .....(d)							0	XXX	XXX	XXX		0
45. Other health .....(d)							0	XXX	XXX	XXX	13,520	13,520
46. Total Accident and Health	42,421	0	0	0	0	0	0	XXX	XXX	XXX	13,520	13,520
47. Total	42,890 (c)	0	0	0	0	0	0	0	0	0	13,520	13,520

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Vermont		DURING THE YEAR				2023		NAIC Company Code		77968	
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount							
Individual Life																	
1. Industrial									0	0							
2. Whole									0	0						1	
3. Term									0	0						75,000	
4. Indexed									0	0							
5. Universal									0	0							
6. Universal with secondary guarantees									0	0							
7. Variable									0	0							
8. Variable universal									0	0							
9. Credit									0	0							
10. Other		(f)							0	0							
11. Total Individual Life		0	0	0	0	0	0	0	0	0	0	0	0	0	1	75,000	
Group Life																	
12. Whole									0	0							
13. Term									0	0							
14. Universal									0	0							
15. Variable									0	0							
16. Variable universal									0	0							
17. Credit									0	0							
18. Other		(f)							0	0						(a)	
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Individual Annuities																	
20. Fixed									0	0							
21. Indexed									0	0							
22. Variable with guarantees									0	0							
23. Variable without guarantees									0	0							
24. Life contingent payout									0	0							
25. Other		(f)							0	0							
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Group Annuities																	
27. Fixed									0	0							
28. Indexed									0	0							
29. Variable with guarantees									0	0							
30. Variable without guarantees									0	0							
31. Life contingent payout									0	0							
32. Other		(f)							0	0							
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Accident and Health																	
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	1,728	(5)	(6,760)	56	
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	1,728	(5)	(6,760)	56	
47. TOTAL		0	0	0	0	0	0	0	0	0	0	2	1,728	(5)	(6,760)	57	

(a) 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 \$

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

(d) 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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
2. Group Life - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
3. Individual Annuities - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
4. Group Annuities - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Virginia DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members				7 Total (Col. 3+4+5+6)	Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other		8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole 105,257							0	23,605		10,601		34,206
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other (f)							0					0
11. Total Individual Life	105,257	0	0	0	0	0	0	23,605	0	10,601	0	34,206
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other (f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other (f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other (f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)							0	XXX	XXX	XXX		0
35. Comprehensive group (d)							0	XXX	XXX	XXX		0
36. Medicare Supplement (d)							0	XXX	XXX	XXX		0
37. Vision only (d)							0	XXX	XXX	XXX		0
38. Dental only (d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan (d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income (d)							0	XXX	XXX	XXX		0
44. Long-term care (d)							0	XXX	XXX	XXX		0
45. Other health (d)	6,559,660						0	XXX	XXX	XXX	3,356,080	3,356,080
46. Total Accident and Health	6,559,660	0	0	0	0	0	0	XXX	XXX	XXX	3,356,080	3,356,080
47. Total	6,664,917 (c)	0	0	0	0	0	0	23,605	0	10,601	3,356,080	3,390,286

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Virginia		DURING THE YEAR						2023		NAIC Company Code		77968	
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)			
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount		
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount									
Individual Life																			
1. Industrial																			
2. Whole		23,605	1	23,605						1	23,605		61	2,290,000	(37)	(1,637,242)	369	8,129,561	
3. Term										0	0								
4. Indexed										0	0								
5. Universal										0	0								
6. Universal with secondary guarantees										0	0								
7. Variable										0	0								
8. Variable universal										0	0								
9. Credit										0	0								
10. Other		(f)								0	0								
11. Total Individual Life		23,605	1	23,605	0	0	0	0	1	23,605	0	61	2,290,000	(37)	(1,637,242)	369	8,129,561		
Group Life																			
12. Whole										0	0								
13. Term										0	0								
14. Universal										0	0								
15. Variable										0	0								
16. Variable universal										0	0								
17. Credit										0	0								
18. Other		(f)								0	0						(a)		
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Individual Annuities																			
20. Fixed										0	0								
21. Indexed										0	0								
22. Variable with guarantees										0	0								
23. Variable without guarantees										0	0								
24. Life contingent payout										0	0								
25. Other		(f)								0	0								
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Annuities																			
27. Fixed										0	0								
28. Indexed										0	0								
29. Variable with guarantees										0	0								
30. Variable without guarantees										0	0								
31. Life contingent payout										0	0								
32. Other		(f)								0	0								
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Accident and Health																			
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,037	2,319,222	(2,333)	(1,301,702)	11,680	7,240,934		
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,037	2,319,222	(2,333)	(1,301,702)	11,680	7,240,934		
47. TOTAL		23,605	1	23,605	0	0	0	0	1	23,605	0	4,098	4,609,222	(2,370)	(2,938,944)	12,049	15,370,494		

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Washington DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole 101, 112							0	25,000		12,141		37,141
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other (f)							0					0
11. Total Individual Life	101, 112	0	0	0	0	0	0	25,000	0	12,141	0	37,141
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other (f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other (f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other (f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual (d)							0	XXX	XXX	XXX		0
35. Comprehensive group (d)							0	XXX	XXX	XXX		0
36. Medicare Supplement (d)							0	XXX	XXX	XXX		0
37. Vision only (d)							0	XXX	XXX	XXX		0
38. Dental only (d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan (d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare (d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid (d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income (d)							0	XXX	XXX	XXX		0
44. Long-term care (d)							0	XXX	XXX	XXX		0
45. Other health (d)	4,586,070						0	XXX	XXX	XXX	810,272	810,272
46. Total Accident and Health	4,586,070	0	0	0	0	0	0	XXX	XXX	XXX	810,272	810,272
47. Total	4,687,182 (c)	0	0	0	0	0	0	25,000	0	12,141	810,272	847,413

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Washington		DURING THE YEAR		2023		NAIC Company Code		77968					
Line of Business		Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										22		Policy Exhibit					
		13		Claims Settled During Current Year										Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
				Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28		
				14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	
Individual Life																			
1. Industrial									0	0									
2. Whole		25,000	1	25,000					1	25,000		9	500,000	(19)	(555,000)	156	7,745,000		
3. Term									0	0									
4. Indexed									0	0									
5. Universal									0	0									
6. Universal with secondary guarantees									0	0									
7. Variable									0	0									
8. Variable universal									0	0									
9. Credit									0	0									
10. Other		(f)							0	0									
11. Total Individual Life		25,000	1	25,000	0	0	0	0	1	25,000	0	9	500,000	(19)	(555,000)	156	7,745,000		
Group Life																			
12. Whole									0	0									
13. Term									0	0									
14. Universal									0	0									
15. Variable									0	0									
16. Variable universal									0	0									
17. Credit									0	0									
18. Other		(f)							0	0						(a)			
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Individual Annuities																			
20. Fixed									0	0									
21. Indexed									0	0									
22. Variable with guarantees									0	0									
23. Variable without guarantees									0	0									
24. Life contingent payout									0	0									
25. Other		(f)							0	0									
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Annuities																			
27. Fixed									0	0									
28. Indexed									0	0									
29. Variable with guarantees									0	0									
30. Variable without guarantees									0	0									
31. Life contingent payout									0	0									
32. Other		(f)							0	0									
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Accident and Health																			
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,269	1,374,040	(865)	(526,050)	7,983	5,092,658		
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,269	1,374,040	(865)	(526,050)	7,983	5,092,658		
47. TOTAL			25,000	1	25,000	0	0	0	0	1	25,000	0	2,278	1,874,040	(884)	(1,081,050)	8,139	12,837,658	

(a) 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 \$

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

(d) 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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
2. Group Life - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
3. Individual Annuities - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
4. Group Annuities - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF West Virginia DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole .....143,462							0			5,200		5,200
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other .....(f)							0					0
11. Total Individual Life	143,462	0	0	0	0	0	0	0	0	5,200	0	5,200
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other .....(f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other .....(f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other .....(f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual .....(d)							0	XXX	XXX	XXX		0
35. Comprehensive group .....(d)							0	XXX	XXX	XXX		0
36. Medicare Supplement .....(d)							0	XXX	XXX	XXX		0
37. Vision only .....(d)							0	XXX	XXX	XXX		0
38. Dental only .....(d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan .....(d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare .....(d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid .....(d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income .....(d)							0	XXX	XXX	XXX		0
44. Long-term care .....(d)							0	XXX	XXX	XXX		0
45. Other health .....(d)	4,664,991						0	XXX	XXX	XXX	1,025,386	1,025,386
46. Total Accident and Health	4,664,991	0	0	0	0	0	0	XXX	XXX	XXX	1,025,386	1,025,386
47. Total	4,808,453 (c)	0	0	0	0	0	0	0	0	5,200	1,025,386	1,030,586

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		West Virginia		DURING THE YEAR		2023		NAIC Company Code		77968			
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount							
Individual Life																	
1. Industrial									0	0							
2. Whole									0	0		126	3,920,000	(42)	(1,805,000)	583	14,571,764
3. Term									0	0							
4. Indexed									0	0							
5. Universal									0	0							
6. Universal with secondary guarantees									0	0							
7. Variable									0	0							
8. Variable universal									0	0							
9. Credit									0	0							
10. Other (f)									0	0							
11. Total Individual Life		0	0	0	0	0	0	0	0	0	0	126	3,920,000	(42)	(1,805,000)	583	14,571,764
Group Life																	
12. Whole									0	0							
13. Term									0	0							
14. Universal									0	0							
15. Variable									0	0							
16. Variable universal									0	0							
17. Credit									0	0							
18. Other (f)									0	0						(a)	
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities																	
20. Fixed									0	0							
21. Indexed									0	0							
22. Variable with guarantees									0	0							
23. Variable without guarantees									0	0							
24. Life contingent payout									0	0							
25. Other (f)									0	0							
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities																	
27. Fixed									0	0							
28. Indexed									0	0							
29. Variable with guarantees									0	0							
30. Variable without guarantees									0	0							
31. Life contingent payout									0	0							
32. Other (f)									0	0							
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health																	
34. Comprehensive individual (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal Employees Health Benefits Plan (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health (d)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,201	937,210	(757)	(575,496)	6,211	4,906,736
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,201	937,210	(757)	(575,496)	6,211	4,906,736
47. TOTAL		0	0	0	0	0	0	0	0	0	0	1,327	4,857,210	(799)	(2,380,496)	6,794	19,478,500

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Wisconsin DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole .....24,652							0			881		881
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other .....(f)							0					0
11. Total Individual Life	24,652	0	0	0	0	0	0	0	0	881	0	881
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other .....(f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other .....(f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other .....(f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual .....(d)							0	XXX	XXX	XXX		0
35. Comprehensive group .....(d)							0	XXX	XXX	XXX		0
36. Medicare Supplement .....(d)							0	XXX	XXX	XXX		0
37. Vision only .....(d)							0	XXX	XXX	XXX		0
38. Dental only .....(d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan .....(d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare .....(d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid .....(d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income .....(d)							0	XXX	XXX	XXX		0
44. Long-term care .....(d)							0	XXX	XXX	XXX		0
45. Other health .....(d)	10,061,736						0	XXX	XXX	XXX	1,048,377	1,048,377
46. Total Accident and Health	10,061,736	0	0	0	0	0	0	XXX	XXX	XXX	1,048,377	1,048,377
47. Total	10,086,388 (c)	0	0	0	0	0	0	0	0	881	1,048,377	1,049,258

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Wisconsin		DURING THE YEAR		2023		NAIC Company Code		77968					
Line of Business		Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										22		Policy Exhibit					
		13		Claims Settled During Current Year										Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
				Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28		
		14	15	16	17	18	19	20	21	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount			
		Incurred During Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount									
Individual Life																			
1. Industrial									0	0									
2. Whole									0	0		10	140,000		(65,000)	78	2,380,000		
3. Term									0	0									
4. Indexed									0	0									
5. Universal									0	0									
6. Universal with secondary guarantees									0	0									
7. Variable									0	0									
8. Variable universal									0	0									
9. Credit									0	0									
10. Other		(f)							0	0									
11. Total Individual Life			0	0	0	0	0	0	0	0	0	10	140,000	0	(65,000)	78	2,380,000		
Group Life																			
12. Whole									0	0									
13. Term									0	0									
14. Universal									0	0									
15. Variable									0	0									
16. Variable universal									0	0									
17. Credit									0	0									
18. Other		(f)							0	0							(a)		
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Individual Annuities																			
20. Fixed									0	0									
21. Indexed									0	0									
22. Variable with guarantees									0	0									
23. Variable without guarantees									0	0									
24. Life contingent payout									0	0									
25. Other		(f)							0	0									
26. Total Individual Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Group Annuities																			
27. Fixed									0	0									
28. Indexed									0	0									
29. Variable with guarantees									0	0									
30. Variable without guarantees									0	0									
31. Life contingent payout									0	0									
32. Other		(f)							0	0									
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Accident and Health																			
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,448	3,502,751	(3,104)	(1,952,674)	17,664	10,990,255		
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,448	3,502,751	(3,104)	(1,952,674)	17,664	10,990,255		
47. TOTAL			0	0	0	0	0	0	0	0	0	5,458	3,642,751	(3,104)	(2,017,674)	17,742	13,370,255		

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Wyoming DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole .....17,427							0			533		533
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other .....(f)							0					0
11. Total Individual Life	17,427	0	0	0	0	0	0	0	0	533	0	533
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other .....(f)							0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other .....(f)							0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other .....(f)							0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual .....(d)							0	XXX	XXX	XXX		0
35. Comprehensive group .....(d)							0	XXX	XXX	XXX		0
36. Medicare Supplement .....(d)							0	XXX	XXX	XXX		0
37. Vision only .....(d)							0	XXX	XXX	XXX		0
38. Dental only .....(d)							0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan .....(d)							0	XXX	XXX	XXX		0
40. Title XVIII Medicare .....(d) (e)							0	XXX	XXX	XXX		0
41. Title XIX Medicaid .....(d)							0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income .....(d)							0	XXX	XXX	XXX		0
44. Long-term care .....(d)							0	XXX	XXX	XXX		0
45. Other health .....(d)	3,477,041						0	XXX	XXX	XXX	746,791	746,791
46. Total Accident and Health	3,477,041	0	0	0	0	0	0	XXX	XXX	XXX	746,791	746,791
47. Total	3,494,468 (c)	0	0	0	0	0	0	0	0	533	746,791	747,324

24.WY

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Wyoming		DURING THE YEAR		2023		NAIC Company Code		77968					
Line of Business		Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits										22		Policy Exhibit					
		13		Claims Settled During Current Year										Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
				Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year		23	24	25	26	27	28		
		14	15	16	17	18	19	20	21	Unpaid December 31, Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount			
		Incurred During Current Year	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount									
Individual Life																			
1. Industrial								0	0										
2. Whole								0	0		4	40,000	(6)	(165,000)	43	1,540,000			
3. Term								0	0										
4. Indexed								0	0										
5. Universal								0	0										
6. Universal with secondary guarantees								0	0										
7. Variable								0	0										
8. Variable universal								0	0										
9. Credit								0	0										
10. Other		(f)						0	0										
11. Total Individual Life		0	0	0	0	0	0	0	0	0	4	40,000	(6)	(165,000)	43	1,540,000			
Group Life																			
12. Whole								0	0										
13. Term								0	0										
14. Universal								0	0										
15. Variable								0	0										
16. Variable universal								0	0										
17. Credit								0	0										
18. Other		(f)						0	0							(a)			
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Individual Annuities																			
20. Fixed								0	0										
21. Indexed								0	0										
22. Variable with guarantees								0	0										
23. Variable without guarantees								0	0										
24. Life contingent payout								0	0										
25. Other		(f)						0	0										
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Group Annuities																			
27. Fixed								0	0										
28. Indexed								0	0										
29. Variable with guarantees								0	0										
30. Variable without guarantees								0	0										
31. Life contingent payout								0	0										
32. Other		(f)						0	0										
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
Accident and Health																			
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX								
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,433	788,736	(671)	(413,229)	5,747	3,684,914		
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,433	788,736	(671)	(413,229)	5,747	3,684,914		
47. TOTAL		0	0	0	0	0	0	0	0	0	0	1,437	828,736	(677)	(578,229)	5,790	5,224,914		

(a) 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 \$ _____

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: _____ 2) covering number of lives: _____ 3) face amount \$ _____

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ _____ Group: \$ _____ Total: \$ _____0

(d) 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 _____

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ _____

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

2. Group Life - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

3. Individual Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____

4. Group Annuities - Other includes the following amounts related to Separate Account policies:

Column 1) \$ _____ Column 7) \$ _____ Column 12) \$ _____



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Puerto Rico DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial							0					0
2. Whole							0					0
3. Term							0					0
4. Indexed							0					0
5. Universal							0					0
6. Universal with secondary guarantees							0					0
7. Variable							0					0
8. Variable universal							0					0
9. Credit							0					0
10. Other	(f)						0					0
11. Total Individual Life	0	0	0	0	0	0	0	0	0	0	0	0
Group Life												
12. Whole							0					0
13. Term							0					0
14. Universal							0					0
15. Variable							0					0
16. Variable universal							0					0
17. Credit							0					0
18. Other	(f)						0					0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed							0					0
21. Indexed							0					0
22. Variable with guarantees							0					0
23. Variable without guarantees							0					0
24. Life contingent payout							0					0
25. Other	(f)						0					0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed							0					0
28. Indexed							0					0
29. Variable with guarantees							0					0
30. Variable without guarantees							0					0
31. Life contingent payout							0					0
32. Other	(f)						0					0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual	(d)						0	XXX	XXX	XXX		0
35. Comprehensive group	(d)						0	XXX	XXX	XXX		0
36. Medicare Supplement	(d)						0	XXX	XXX	XXX		0
37. Vision only	(d)						0	XXX	XXX	XXX		0
38. Dental only	(d)						0	XXX	XXX	XXX		0
39. Federal Employees Health Benefits Plan	(d)						0	XXX	XXX	XXX		0
40. Title XVIII Medicare	(d)	(e)					0	XXX	XXX	XXX		0
41. Title XIX Medicaid	(d)						0	XXX	XXX	XXX		0
42. Credit A&H							0	XXX	XXX	XXX		0
43. Disability income	(d)						0	XXX	XXX	XXX		0
44. Long-term care	(d)						0	XXX	XXX	XXX		0
45. Other health	(d)						0	XXX	XXX	XXX	18,416	18,416
46. Total Accident and Health	32,443	0	0	0	0	0	0	XXX	XXX	XXX	18,416	18,416
47. Total	32,443 (c)	0	0	0	0	0	0	0	0	0	18,416	18,416

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Puerto Rico		DURING THE YEAR		2023		NAIC Company Code		77968			
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23 Number of Pols/ Certs	24 Amount	25 Number of Pols/ Certs	26 Amount	27 Number of Pols/ Certs	28 Amount
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount							
Individual Life																	
1. Industrial									0	0							
2. Whole									0	0							
3. Term									0	0							
4. Indexed									0	0							
5. Universal									0	0							
6. Universal with secondary guarantees									0	0							
7. Variable									0	0							
8. Variable universal									0	0							
9. Credit									0	0							
10. Other		(f)							0	0							
11. Total Individual Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Group Life																	
12. Whole									0	0							
13. Term									0	0							
14. Universal									0	0							
15. Variable									0	0							
16. Variable universal									0	0							
17. Credit									0	0							
18. Other		(f)							0	0						(a)	
19. Total Group Life			0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Individual Annuities																	
20. Fixed									0	0							
21. Indexed									0	0							
22. Variable with guarantees									0	0							
23. Variable without guarantees									0	0							
24. Life contingent payout									0	0							
25. Other		(f)							0	0							
26. Total Individual Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Group Annuities																	
27. Fixed									0	0							
28. Indexed									0	0							
29. Variable with guarantees									0	0							
30. Variable without guarantees									0	0							
31. Life contingent payout									0	0							
32. Other		(f)							0	0							
33. Total Group Annuities			0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Accident and Health																	
34. Comprehensive individual		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
35. Comprehensive group		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
36. Medicare Supplement		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
37. Vision only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
38. Dental only		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
39. Federal Employees Health Benefits Plan		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
40. Title XVIII Medicare		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
41. Title XIX Medicaid		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
42. Credit A&H			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
43. Disability income		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
44. Long-term care		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
45. Other health		(d)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			15	5,993	92	
46. Total Accident and Health			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	15	5,993	92	
47. TOTAL			0	0	0	0	0	0	0	0	0	0	0	15	5,993	92	

(a) 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 \$

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies: 2) covering number of lives: 3) face amount \$

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$ Group: \$ Total: \$ 0

(d) 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

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
2. Group Life - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
3. Individual Annuities - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$
4. Group Annuities - Other includes the following amounts related to Separate Account policies:
- Column 1) \$ Column 7) \$ Column 12) \$



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America
LIFE INSURANCE (STATE PAGE)^(b)

NAIC Group Code 0290 BUSINESS IN THE STATE OF Grand Total DURING THE YEAR 2023 NAIC Company Code 77968

Line of Business	1 Premiums and Annuities Considerations	2 Other Considerations	Dividends to Policyholders/Refunds to Members					Claims and Benefits Paid				
			3 Paid in Cash or Left on Deposit	4 Applied to Pay Renewal Premiums	5 Applied to Provide Paid-Up Additions or Shorten the Endowment or Premium-Paying Period	6 Other	7 Total (Col. 3+4+5+6)	8 Death and Annuity Benefits	9 Matured Endowments	10 Surrender Values and Withdrawals for Life Contracts	11 All Other Benefits	12 Total (Sum Columns 8 through 11)
Individual Life												
1. Industrial	0	0	0	0	0	0	0	0	0	0	0	0
2. Whole	6,235,355	0	0	0	0	0	0	973,774	0	370,983	0	1,344,757
3. Term	0	0	0	0	0	0	0	0	0	0	0	0
4. Indexed	0	0	0	0	0	0	0	0	0	0	0	0
5. Universal	0	0	0	0	0	0	0	0	0	0	0	0
6. Universal with secondary guarantees	0	0	0	0	0	0	0	0	0	0	0	0
7. Variable	0	0	0	0	0	0	0	0	0	0	0	0
8. Variable universal	0	0	0	0	0	0	0	0	0	0	0	0
9. Credit	0	0	0	0	0	0	0	0	0	0	0	0
10. Other	(f) 0	0	0	0	0	0	0	0	0	0	0	0
11. Total Individual Life	6,235,355	0	0	0	0	0	0	973,774	0	370,983	0	1,344,757
Group Life												
12. Whole	0	0	0	0	0	0	0	0	0	0	0	0
13. Term	0	0	0	0	0	0	0	0	0	0	0	0
14. Universal	0	0	0	0	0	0	0	0	0	0	0	0
15. Variable	0	0	0	0	0	0	0	0	0	0	0	0
16. Variable universal	0	0	0	0	0	0	0	0	0	0	0	0
17. Credit	0	0	0	0	0	0	0	0	0	0	0	0
18. Other	(f) 0	0	0	0	0	0	0	0	0	0	0	0
19. Total Group Life	0	0	0	0	0	0	0	0	0	0	0	0
Individual Annuities												
20. Fixed	0	0	0	0	0	0	0	0	0	0	0	0
21. Indexed	0	0	0	0	0	0	0	0	0	0	0	0
22. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0
23. Variable without guarantees	0	0	0	0	0	0	0	0	0	0	0	0
24. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0
25. Other	(f) 0	0	0	0	0	0	0	0	0	0	0	0
26. Total Individual Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Group Annuities												
27. Fixed	0	0	0	0	0	0	0	0	0	0	0	0
28. Indexed	0	0	0	0	0	0	0	0	0	0	0	0
29. Variable with guarantees	0	0	0	0	0	0	0	0	0	0	0	0
30. Variable without guarantees	0	0	0	0	0	0	0	0	0	0	0	0
31. Life contingent payout	0	0	0	0	0	0	0	0	0	0	0	0
32. Other	(f) 0	0	0	0	0	0	0	0	0	0	0	0
33. Total Group Annuities	0	0	0	0	0	0	0	0	0	0	0	0
Accident and Health												
34. Comprehensive individual	(d) 0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
35. Comprehensive group	(d) 0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
36. Medicare Supplement	(d) 0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
37. Vision only	(d) 0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
38. Dental only	(d) 0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
39. Federal Employees Health Benefits Plan	(d) 0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
40. Title XVIII Medicare	(d) 0 (e) 0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
41. Title XIX Medicaid	(d) 0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
42. Credit A&H	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
43. Disability income	(d) 0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
44. Long-term care	(d) 0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
45. Other health	(d) 398,704,662	0	0	0	0	0	0	XXX	XXX	XXX	118,833,606	118,833,606
46. Total Accident and Health	398,704,662	0	0	0	0	0	0	XXX	XXX	XXX	118,833,606	118,833,606
47. Total	404,940,017 (c)	0	0	0	0	0	0	973,774	0	370,983	118,833,606	120,178,363

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

LIFE INSURANCE (STATE PAGE) (Continued)^(b)

NAIC Group Code		0290		BUSINESS IN THE STATE OF		Grand Total		DURING THE YEAR		2023		NAIC Company Code		77968			
Line of Business		13 Incurred During Current Year	Direct Death Benefits, Matured Endowments Incurred and Annuity Benefits								22 Unpaid December 31, Current Year	Policy Exhibit					
			Claims Settled During Current Year									Issued During Year		Other Changes to In Force (Net)		In Force December 31, Current Year (b)	
			Totals Paid		Reduction by Compromise		Amount Rejected		Total Settled During Current Year			23	24	25	26	27	28
			14 Number of Pols/ Certs	15 Amount	16 Number of Pols/ Certs	17 Amount	18 Number of Pols/ Certs	19 Amount	20 Number of Pols/ Certs	21 Amount		Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount	Number of Pols/ Certs	Amount
Individual Life																	
1. Industrial		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2. Whole		973,774	28	973,774	0	0	0	0	28	973,774	0	3,875	114,555,000	(2,770)	(81,966,746)	19,548	544,839,544
3. Term		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
4. Indexed		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
5. Universal		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
6. Universal with secondary guarantees		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
7. Variable		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
8. Variable universal		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
9. Credit		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
10. Other		(f) 0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
11. Total Individual Life		973,774	28	973,774	0	0	0	0	28	973,774	0	3,875	114,555,000	(2,770)	(81,966,746)	19,548	544,839,544
Group Life																	
12. Whole		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
13. Term		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
14. Universal		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15. Variable		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
16. Variable universal		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
17. Credit		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
18. Other		(f) 0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
19. Total Group Life		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Individual Annuities																	
20. Fixed		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
21. Indexed		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
22. Variable with guarantees		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
23. Variable without guarantees		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
24. Life contingent payout		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
25. Other		(f) 0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
26. Total Individual Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Group Annuities																	
27. Fixed		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
28. Indexed		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
29. Variable with guarantees		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
30. Variable without guarantees		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
31. Life contingent payout		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
32. Other		(f) 0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
33. Total Group Annuities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Accident and Health																	
34. Comprehensive individual		(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
35. Comprehensive group		(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
36. Medicare Supplement		(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
37. Vision only		(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
38. Dental only		(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
39. Federal Employees Health Benefits Plan		(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
40. Title XVIII Medicare		(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
41. Title XIX Medicaid		(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
42. Credit A&H		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
43. Disability income		(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
44. Long-term care		(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
45. Other health		(d) XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	160,196	94,095,056	(108,088)	(63,299,283)	662,657	418,692,840	
46. Total Accident and Health		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	160,196	94,095,056	(108,088)	(63,299,283)	662,657	418,692,840	
47. TOTAL		973,774	28	973,774	0	0	0	0	28	973,774	0	164,071	208,650,056	(110,858)	(145,266,029)	682,205	963,532,384

(a) 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

(b) Corporate Owned Life Insurance/BOLI: 1) Number of policies:0 2) covering number of lives:0 3) face amount \$0

(c) Deposit-Type Contract Considerations NOT included in Total Premiums and Annuities Considerations: Individual: \$0 Group: \$0 Total: \$0

(d) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0

(e) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$0

(f) Certain Separate Account products are included in "Other" product categories in the table(s) above:

1. Individual Life - Other includes the following amounts related to Separate Account policies: Column 1) \$0 Column 7) \$0 Column 12) \$0

2. Group Life - Other includes the following amounts related to Separate Account policies: Column 1) \$0 Column 7) \$0 Column 12) \$0

3. Individual Annuities - Other includes the following amounts related to Separate Account policies: Column 1) \$0 Column 7) \$0 Column 12) \$0

4. Group Annuities - Other includes the following amounts related to Separate Account policies: Column 1) \$0 Column 7) \$0 Column 12) \$0

ANNUAL STATEMENT FOR THE YEAR 2023 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		(6,606,287)
2. Current year's realized pre-tax capital gains/(losses) of \$ (1,611,962) transferred into the reserve net of taxes of \$ (290,153)		(1,321,809)
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)		(7,928,096)
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)		(1,080,688)
6. Reserve as of December 31, current year (Line 4 minus Line 5)		(6,847,408)

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. 2023	(978,916)	(101,772)	0	(1,080,688)
2. 2024	(1,045,263)	(127,400)	0	(1,172,662)
3. 2025	(1,082,558)	(89,763)	0	(1,172,321)
4. 2026	(1,113,561)	(75,398)	0	(1,188,960)
5. 2027	(1,138,276)	(59,226)	0	(1,197,502)
6. 2028	(1,178,202)	(44,005)	0	(1,222,207)
7. 2029	(1,221,120)	(36,423)	0	(1,257,542)
8. 2030	(1,270,116)	(38,073)	0	(1,308,189)
9. 2031	(1,321,178)	(40,391)	0	(1,361,568)
10. 2032	(1,174,474)	(41,713)	0	(1,216,188)
11. 2033	(833,689)	(44,370)	0	(878,059)
12. 2034	(410,962)	(46,348)	0	(457,311)
13. 2035	23,139	(48,666)	0	(25,527)
14. 2036	467,030	(51,322)	0	415,708
15. 2037	718,649	(54,295)	0	664,354
16. 2038	784,327	(56,285)	0	728,043
17. 2039	806,001	(56,973)	0	749,028
18. 2040	866,008	(53,717)	0	812,292
19. 2041	890,371	(50,798)	0	839,572
20. 2042	824,500	(48,208)	0	776,292
21. 2043	601,529	(44,634)	0	556,894
22. 2044	412,413	(39,344)	0	373,069
23. 2045	215,662	(31,342)	0	184,320
24. 2046	490	(22,673)	0	(22,183)
25. 2047	(108,674)	(14,004)	0	(122,677)
26. 2048	(105,454)	(4,668)	0	(110,122)
27. 2049	(90,408)	0	0	(90,408)
28. 2050	(69,200)	0	0	(69,200)
29. 2051	(52,152)	0	0	(52,152)
30. 2052	(22,203)	0	0	(22,203)
31. 2053 and Later		0	0	0
32. Total (Lines 1 to 31)	(6,606,286)	(1,321,809)	0	(7,928,095)

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

ASSET VALUATION RESERVE

	Default Component			Equity Component			7
	1	2	3	4	5	6	
	Other Than Mortgage Loans	Mortgage Loans	Total (Cols. 1 + 2)	Common Stock	Real Estate and Other Invested Assets	Total (Cols. 4 + 5)	Total Amount (Cols. 3 + 6)
1. Reserve as of December 31, prior year	12,085,321	233,908	12,319,230	2,616	1,668,083	1,670,700	13,989,930
2. Realized capital gains/(losses) net of taxes - General Account	(6,918,451)		(6,918,451)		(783,200)	(783,200)	(7,701,651)
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		1,343,433	1,343,433	1,343,433
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	2,671,068	159,260	2,830,328	0	302,730	302,730	3,133,057
8. Accumulated balances (Lines 1 through 5 - 6 + 7)	7,837,939	393,168	8,231,107	2,616	2,531,046	2,533,662	10,764,769
9. Maximum reserve	13,743,236	600,183	14,343,419	28,858	5,792,438	5,821,297	20,164,716
10. Reserve objective	7,971,429	459,281	8,430,710	18,148	5,403,126	5,421,275	13,851,985
11. 20% of (Line 10 - Line 8)	26,698	13,223	39,921	3,106	574,416	577,522	617,443
12. Balance before transfers (Lines 8 + 11)	7,864,637	406,391	8,271,027	5,723	3,105,462	3,111,185	11,382,212
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)	7,864,637	406,391	8,271,027	5,723	3,105,462	3,111,185	11,382,212

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

Line Num- ber	NAIC Desig- nation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols.4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
LONG-TERM BONDS												
1.		Exempt Obligations	17,795,765	XXX	XXX	17,795,765	0.0000	0	0.0000	0	0.0000	0
2.1	1	NAIC Designation Category 1.A	269,755,833	XXX	XXX	269,755,833	0.0002	53,951	0.0007	188,829	0.0013	350,683
2.2	1	NAIC Designation Category 1.B	101,387,143	XXX	XXX	101,387,143	0.0004	40,555	0.0011	111,526	0.0023	233,190
2.3	1	NAIC Designation Category 1.C	142,157,885	XXX	XXX	142,157,885	0.0006	85,295	0.0018	255,884	0.0035	497,553
2.4	1	NAIC Designation Category 1.D	65,392,561	XXX	XXX	65,392,561	0.0007	45,775	0.0022	143,864	0.0044	287,727
2.5	1	NAIC Designation Category 1.E	55,209,567	XXX	XXX	55,209,567	0.0009	49,689	0.0027	149,066	0.0055	303,653
2.6	1	NAIC Designation Category 1.F	77,564,789	XXX	XXX	77,564,789	0.0011	85,321	0.0034	263,720	0.0068	527,441
2.7	1	NAIC Designation Category 1.G	177,178,672	XXX	XXX	177,178,672	0.0014	248,050	0.0042	744,150	0.0085	1,506,019
2.8		Subtotal NAIC 1 (2.1+2.2+2.3+2.4+2.5+2.6+2.7)	888,646,450	XXX	XXX	888,646,450	XXX	608,636	XXX	1,857,039	XXX	3,706,265
3.1	2	NAIC Designation Category 2.A	257,137,590	XXX	XXX	257,137,590	0.0021	539,989	0.0063	1,619,967	0.0105	2,699,945
3.2	2	NAIC Designation Category 2.B	363,496,858	XXX	XXX	363,496,858	0.0025	908,742	0.0076	2,762,576	0.0127	4,616,410
3.3	2	NAIC Designation Category 2.C	95,567,523	XXX	XXX	95,567,523	0.0036	344,043	0.0108	1,032,129	0.0180	1,720,215
3.4		Subtotal NAIC 2 (3.1+3.2+3.3)	716,201,971	XXX	XXX	716,201,971	XXX	1,792,774	XXX	5,414,672	XXX	9,036,570
4.1	3	NAIC Designation Category 3.A	13,495,882	XXX	XXX	13,495,882	0.0069	93,122	0.0183	246,975	0.0262	353,592
4.2	3	NAIC Designation Category 3.B	0	XXX	XXX	0	0.0099	0	0.0264	0	0.0377	0
4.3	3	NAIC Designation Category 3.C	9,225,915	XXX	XXX	9,225,915	0.0131	120,859	0.0350	322,907	0.0500	461,296
4.4		Subtotal NAIC 3 (4.1+4.2+4.3)	22,721,797	XXX	XXX	22,721,797	XXX	213,981	XXX	569,882	XXX	814,888
5.1	4	NAIC Designation Category 4.A	0	XXX	XXX	0	0.0184	0	0.0430	0	0.0615	0
5.2	4	NAIC Designation Category 4.B	2,339,386	XXX	XXX	2,339,386	0.0238	55,677	0.0555	129,836	0.0793	185,513
5.3	4	NAIC Designation Category 4.C	0	XXX	XXX	0	0.0310	0	0.0724	0	0.1034	0
5.4		Subtotal NAIC 4 (5.1+5.2+5.3)	2,339,386	XXX	XXX	2,339,386	XXX	55,677	XXX	129,836	XXX	185,513
6.1	5	NAIC Designation Category 5.A	0	XXX	XXX	0	0.0472	0	0.0846	0	0.1410	0
6.2	5	NAIC Designation Category 5.B	0	XXX	XXX	0	0.0663	0	0.1188	0	0.1980	0
6.3	5	NAIC Designation Category 5.C	0	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	0	XXX	XXX	0	0.0000	0	0.2370	0	0.2370	0
8.		Total Unrated Multi-class Securities Acquired by Conversion	0	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)	1,647,705,369	XXX	XXX	1,647,705,369	XXX	2,671,068	XXX	7,971,429	XXX	13,743,236
PREFERRED STOCKS												
10.	1	Highest Quality	0	XXX	XXX	0	0.0005	0	0.0016	0	0.0033	0
11.	2	High Quality	0	XXX	XXX	0	0.0021	0	0.0064	0	0.0106	0
12.	3	Medium Quality	0	XXX	XXX	0	0.0099	0	0.0263	0	0.0376	0
13.	4	Low Quality	0	XXX	XXX	0	0.0245	0	0.0572	0	0.0817	0
14.	5	Lower Quality	0	XXX	XXX	0	0.0630	0	0.1128	0	0.1880	0
15.	6	In or Near Default	0	XXX	XXX	0	0.0000	0	0.2370	0	0.2370	0
16.		Affiliated Life with AVR	0	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

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

Line Num- ber	NAIC Desig- nation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols.4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
SHORT-TERM BONDS												
18.		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)	1,647,705,369	XXX	XXX	1,647,705,369	XXX	2,671,068	XXX	7,971,429	XXX	13,743,236

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

Line Num- ber	NAIC Desig- nation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols.4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
		MORTGAGE LOANS										
		In Good Standing:										
35.		Farm Mortgages - CM1 - Highest Quality			XXX	0	0.0011	0	0.0057	0	0.0074	0
36.		Farm Mortgages - CM2 - High Quality			XXX	0	0.0040	0	0.0114	0	0.0149	0
37.		Farm Mortgages - CM3 - Medium Quality			XXX	0	0.0069	0	0.0200	0	0.0257	0
38.		Farm Mortgages - CM4 - Low Medium Quality			XXX	0	0.0120	0	0.0343	0	0.0428	0
39.		Farm Mortgages - CM5 - Low Quality			XXX	0	0.0183	0	0.0486	0	0.0628	0
40.		Residential Mortgages - Insured or Guaranteed			XXX	0	0.0003	0	0.0007	0	0.0011	0
41.		Residential Mortgages - All Other			XXX	0	0.0015	0	0.0034	0	0.0046	0
42.		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0003	0	0.0007	0	0.0011	0
43.		Commercial Mortgages - All Other - CM1 - Highest Quality	2,101,753		XXX	2,101,753	0.0011	2,312	0.0057	11,980	0.0074	15,553
44.		Commercial Mortgages - All Other - CM2 - High Quality	39,236,928		XXX	39,236,928	0.0040	156,948	0.0114	447,301	0.0149	584,630
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)	41,338,681	0	XXX	41,338,681	XXX	159,260	XXX	459,281	XXX	600,183
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)	41,338,681	0	XXX	41,338,681	XXX	159,260	XXX	459,281	XXX	600,183

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

Line Num- ber	NAIC Desig- nation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols.4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
COMMON STOCK												
1.		Unaffiliated - Public		XXX	XXX	0	0.0000	0	0.1580 (a)	0	0.1580 (a)	0
2.		Unaffiliated - Private		XXX	XXX	0	0.0000	0	0.1945	0	0.1945	0
3.		Federal Home Loan Bank	2,975,100	XXX	XXX	2,975,100	0.0000	0	0.0061	18,148	0.0097	28,858
4.		Affiliated - Life with AVR		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
Affiliated - Investment Subsidiary:												
5.		Fixed Income - Exempt Obligations				0	XXX		XXX		XXX	
6.		Fixed Income - Highest Quality				0	XXX		XXX		XXX	
7.		Fixed Income - High Quality				0	XXX		XXX		XXX	
8.		Fixed Income - Medium Quality				0	XXX		XXX		XXX	
9.		Fixed Income - Low Quality				0	XXX		XXX		XXX	
10.		Fixed Income - Lower Quality				0	XXX		XXX		XXX	
11.		Fixed Income - In/Near Default				0	XXX		XXX		XXX	
12.		Unaffiliated Common Stock - Public				0	0.0000	0	0.1580 (a)	0	0.1580 (a)	0
13.		Unaffiliated Common Stock - Private				0	0.0000	0	0.1945	0	0.1945	0
14.		Real Estate				0	(b)	0	(b)	0	(b)	0
15.		Affiliated - Certain Other (See SVO Purposes and Procedures Manual)		XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
16.		Affiliated - All Other		XXX	XXX	0	0.0000	0	0.1945	0	0.1945	0
17.		Total Common Stock (Sum of Lines 1 through 16)	2,975,100	0	0	2,975,100	XXX	0	XXX	18,148	XXX	28,858
REAL ESTATE												
18.		Home Office Property (General Account only)				0	0.0000	0	0.0912	0	0.0912	0
19.		Investment Properties				0	0.0000	0	0.0912	0	0.0912	0
20.		Properties Acquired in Satisfaction of Debt				0	0.0000	0	0.1337	0	0.1337	0
21.		Total Real Estate (Sum of Lines 18 through 20)	0	0	0	0	XXX	0	XXX	0	XXX	0
OTHER INVESTED ASSETS												
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS												
22.		Exempt Obligations		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
23.	1	Highest Quality		XXX	XXX	0	0.0005	0	0.0016	0	0.0033	0
24.	2	High Quality		XXX	XXX	0	0.0021	0	0.0064	0	0.0106	0
25.	3	Medium Quality		XXX	XXX	0	0.0099	0	0.0263	0	0.0376	0
26.	4	Low Quality		XXX	XXX	0	0.0245	0	0.0572	0	0.0817	0
27.	5	Lower Quality		XXX	XXX	0	0.0630	0	0.1128	0	0.1880	0
28.	6	In or Near Default		XXX	XXX	0	0.0000	0	0.2370	0	0.2370	0
29.		Total with Bond Characteristics (Sum of Lines 22 through 28)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0

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

Line Num- ber	NAIC Desig- nation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols.4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS										
30.	1	Highest Quality	55,160,696	XXX	XXX	55,160,696	0.0005	27,580	0.0016	88,257	0.0033	182,030
31.	2	High Quality	7,228,667	XXX	XXX	7,228,667	0.0021	15,180	0.0064	46,263	0.0106	76,624
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)	62,389,363	XXX	XXX	62,389,363	XXX	42,761	XXX	134,521	XXX	258,654
		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	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	25,069,053		XXX	25,069,053	0.0040	100,276	0.0114	285,787	0.0149	373,529
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)	25,069,053	0	XXX	25,069,053	XXX	100,276	XXX	285,787	XXX	373,529
64.		Total with Mortgage Loan Characteristics (Lines 56 + 63)	25,069,053	0	XXX	25,069,053	XXX	100,276	XXX	285,787	XXX	373,529

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

Line Number	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols.4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK										
65.		Unaffiliated Public		XXX	XXX	0	0.0000	0	0.1580 (a)	0	0.1580 (a)	0
66.		Unaffiliated Private	24,054,714	XXX	XXX	24,054,714	0.0000	0	0.1945	4,678,642	0.1945	4,678,642
67.		Affiliated Life with AVR		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
68.		Affiliated Certain Other (See SVO Purposes & Procedures Manual)		XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
69.		Affiliated Other - All Other		XXX	XXX	0	0.0000	0	0.1945	0	0.1945	0
70.		Total with Common Stock Characteristics (Sum of Lines 65 through 69)	24,054,714	XXX	XXX	24,054,714	XXX	0	XXX	4,678,642	XXX	4,678,642
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE										
71.		Home Office Property (General Account only)				0	0.0000	0	0.0912	0	0.0912	0
72.		Investment Properties				0	0.0000	0	0.0912	0	0.0912	0
73.		Properties Acquired in Satisfaction of Debt				0	0.0000	0	0.1337	0	0.1337	0
74.		Total with Real Estate Characteristics (Sum of Lines 71 through 73)	0	0	0	0	XXX	0	XXX	0	XXX	0
		LOW INCOME HOUSING TAX CREDIT INVESTMENTS										
75.		Guaranteed Federal Low Income Housing Tax Credit	0			0	0.0003	0	0.0006	0	0.0010	0
76.		Non-guaranteed Federal Low Income Housing Tax Credit	25,348,063			25,348,063	0.0063	159,693	0.0120	304,177	0.0190	481,613
77.		Guaranteed State Low Income Housing Tax Credit	0			0	0.0003	0	0.0006	0	0.0010	0
78.		Non-guaranteed State Low Income Housing Tax Credit	0			0	0.0063	0	0.0120	0	0.0190	0
79.		All Other Low Income Housing Tax Credit	0			0	0.0273	0	0.0600	0	0.0975	0
80.		Total LIHTC (Sum of Lines 75 through 79)	25,348,063	0	0	25,348,063	XXX	159,693	XXX	304,177	XXX	481,613
		RESIDUAL TRanches OR INTERESTS										
81.		Fixed Income Instruments - Unaffiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
82.		Fixed Income Instruments - Affiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
83.		Common Stock - Unaffiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
84.		Common Stock - Affiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
85.		Preferred Stock - Unaffiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
86.		Preferred Stock - Affiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
87.		Real Estate - Unaffiliated	0			0	0.0000	0	0.1580	0	0.1580	0
88.		Real Estate - Affiliated	0			0	0.0000	0	0.1580	0	0.1580	0
89.		Mortgage Loans - Unaffiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
90.		Mortgage Loans - Affiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
91.		Other - Unaffiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
92.		Other - Affiliated	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
93.		Total Residual Tranches or Interests (Sum of Lines 81 through 92)	0	0	0	0	XXX	0	XXX	0	XXX	0
		ALL OTHER INVESTMENTS										
94.		NAIC 1 Working Capital Finance Investments		XXX		0	0.0000	0	0.0042	0	0.0042	0
95.		NAIC 2 Working Capital Finance Investments		XXX		0	0.0000	0	0.0137	0	0.0137	0
96.		Other Invested Assets - Schedule BA		XXX		0	0.0000	0	0.1580	0	0.1580	0
97.		Other Short-Term Invested Assets - Schedule DA		XXX		0	0.0000	0	0.1580	0	0.1580	0
98.		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)	136,861,193	0	0	136,861,193	XXX	302,730	XXX	5,403,126	XXX	5,792,438

(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

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	397,420,698	XXX		XXX		XXX		XXX		XXX		XXX		XXX
2. Premiums earned	396,230,956	XXX		XXX		XXX		XXX		XXX		XXX		XXX
3. Incurred claims	122,293,349	30.9	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
5. Incurred claims and cost containment expenses (Lines 3 and 4)	122,293,349	30.9	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
6. Increase in contract reserves	140,998,786	35.6	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
7. Commissions (a)	90,708,867	22.9		0.0		0.0		0.0		0.0		0.0		0.0
8. Other general insurance expenses	46,578,629	11.8		0.0		0.0		0.0		0.0		0.0		0.0
9. Taxes, licenses and fees	8,659,925	2.2		0.0		0.0		0.0		0.0		0.0		0.0
10. Total other expenses incurred	145,947,421	36.8	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 .	(13,008,600)	(3.3)	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
14. Gain from underwriting after dividends or refunds	(13,008,600)	(3.3)	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
DETAILS OF WRITE-INS														
1101.														
1102.														
1103.														
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
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	397,420,698	XXX
2. Premiums earned		XXX		XXX		XXX		XXX		XXX	396,230,956	XXX
3. Incurred claims	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	122,293,349	30.9
4. Cost containment expenses		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	122,293,349	30.9
6. Increase in contract reserves	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	140,998,786	35.6
7. Commissions (a)		0.0		0.0		0.0		0.0		0.0	90,708,867	22.9
8. Other general insurance expenses		0.0		0.0		0.0		0.0		0.0	46,578,629	11.8
9. Taxes, licenses and fees		0.0		0.0		0.0		0.0		0.0	8,659,925	2.2
10. Total other expenses incurred	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	145,947,421	36.8
11. Aggregate write-ins for deductions	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 .	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	(13,008,600)	(3.3)
13. Dividends or refunds		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	(13,008,600)	(3.3)
DETAILS OF WRITE-INS												
1101.												
1102.												
1103.												
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
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 \$ reported as "Contract, membership and other fees retained by agents."

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)

PART 2. - RESERVES AND LIABILITIES

	1	2	3	4	5	6	7	8	9	10	11	12	13
	Total	Comprehensive (Hospital and Medical) Individual	Comprehensive (Hospital and Medical) Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Medicare Title XVIII	Medicaid Title XIX	Credit A&H	Disability Income	Long-Term Care	Other Health
A. Premium Reserves:													
1. Unearned premiums	21,198,698												21,198,698
2. Advance premiums	0												
3. Reserve for rate credits	0												
4. Total premium reserves, current year	21,198,698	0	0	0	0	0	0	0	0	0	0	0	21,198,698
5. Total premium reserves, prior year	20,008,955	0	0	0	0	0	0	0	0	0	0	0	20,008,955
6. Increase in total premium reserves	1,189,743	0	0	0	0	0	0	0	0	0	0	0	1,189,743
B. Contract Reserves:													
1. Additional reserves (a)	1,612,663,918												1,612,663,918
2. Reserve for future contingent benefits	0												
3. Total contract reserves, current year	1,612,663,918	0	0	0	0	0	0	0	0	0	0	0	1,612,663,918
4. Total contract reserves, prior year	1,471,665,132	0	0	0	0	0	0	0	0	0	0	0	1,471,665,132
5. Increase in contract reserves	140,998,786	0	0	0	0	0	0	0	0	0	0	0	140,998,786
C. Claim Reserves and Liabilities:													
1. Total current year	34,841,733	0	0	0	0	0	0	0	0	0	0	0	34,841,733
2. Total prior year	30,989,412	0	0	0	0	0	0	0	0	0	0	0	30,989,412
3. Increase	3,852,321	0	0	0	0	0	0	0	0	0	0	0	3,852,321

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

	1	2	3	4	5	6	7	8	9	10	11	12	13
	Total	Comprehensive (Hospital and Medical) Individual	Comprehensive (Hospital and Medical) Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Medicare Title XVIII	Medicaid Title XIX	Credit A&H	Disability Income	Long-Term Care	Other Health
1. Claims paid during the year:													
1.1 On claims incurred prior to current year	22,325,110												22,325,110
1.2 On claims incurred during current year	96,115,918												96,115,918
2. Claim reserves and liabilities, December 31, current year:													
2.1 On claims incurred prior to current year	6,061,798												6,061,798
2.2 On claims incurred during current year	28,779,935												28,779,935
3. Test:													
3.1 Lines 1.1 and 2.1	28,386,908	0	0	0	0	0	0	0	0	0	0	0	28,386,908
3.2 Claim reserves and liabilities, December 31, prior year	30,989,412	0	0	0	0	0	0	0	0	0	0	0	30,989,412
3.3 Line 3.1 minus Line 3.2	(2,602,504)	0	0	0	0	0	0	0	0	0	0	0	(2,602,504)

PART 4. - REINSURANCE

	1	2	3	4	5	6	7	8	9	10	11	12	13
	Total	Comprehensive (Hospital and Medical) Individual	Comprehensive (Hospital and Medical) Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Medicare Title XVIII	Medicaid Title XIX	Credit A&H	Disability Income	Long-Term Care	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	2,482,088												2,482,088
2. Premiums earned	2,492,125												2,492,125
3. Incurred claims	339,709												339,709
4. Commissions	609,438												609,438

(a) Includes \$ premium deficiency reserve.

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

SCHEDULE H - PART 5 - HEALTH CLAIMS

	1	2	3	4	5	6	7	8	9	10	11	12	13
	Comprehensive (Hospital and Medical) Individual	Comprehensive (Hospital and Medical) Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Medicare Title XVIII	Medicaid Title XIX	Credit A&H	Disability Income	Long-Term Care	Other Health	Total
A. Direct:													
1. Incurred claims												122,633,058	122,633,058
2. Beginning claim reserves and liabilities												31,273,660	31,273,660
3. Ending claim reserves and liabilities												35,073,112	35,073,112
4. Claims paid	0	0	0	0	0	0	0	0	0	0	0	118,833,606	118,833,606
B. Assumed Reinsurance:													
1. Incurred claims													0
2. Beginning claim reserves and liabilities													0
3. Ending claim reserves and liabilities													0
4. Claims paid	0	0	0	0	0	0	0	0	0	0	0	0	0
C. Ceded Reinsurance:													
1. Incurred claims												339,709	339,709
2. Beginning claim reserves and liabilities												284,248	284,248
3. Ending claim reserves and liabilities												231,379	231,379
4. Claims paid	0	0	0	0	0	0	0	0	0	0	0	392,578	392,578
D. Net:													
1. Incurred claims	0	0	0	0	0	0	0	0	0	0	0	122,293,349	122,293,349
2. Beginning claim reserves and liabilities	0	0	0	0	0	0	0	0	0	0	0	30,989,412	30,989,412
3. Ending claim reserves and liabilities	0	0	0	0	0	0	0	0	0	0	0	34,841,733	34,841,733
4. Claims paid	0	0	0	0	0	0	0	0	0	0	0	118,441,028	118,441,028
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	122,293,349	122,293,349
2. Beginning reserves and liabilities												30,989,412	30,989,412
3. Ending reserves and liabilities												34,841,733	34,841,733
4. Paid claims and cost containment expenses	0	0	0	0	0	0	0	0	0	0	0	118,441,028	118,441,028

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 2023 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

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2023 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	10		12	13			
								Current Year	Prior Year		Current Year	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	4,974	4,619	642					
88099	75-1608507	08/01/2007	Optimum Re Insurance Company	TX	YRT/I	OL	17,230,766	7,218	7,191	84,628					
0899999. General Account - Authorized U.S. Non-Affiliates								17,245,766	12,192	11,810	85,270	0	0	0	0
1099999. Total General Account - Authorized Non-Affiliates								17,245,766	12,192	11,810	85,270	0	0	0	0
1199999. Total General Account Authorized								17,245,766	12,192	11,810	85,270	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								17,245,766	12,192	11,810	85,270	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)								17,245,766	12,192	11,810	85,270	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								17,245,766	12,192	11,810	85,270	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 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

NAIC Company Code	2	3	4	5	6	7	8	9	10	Outstanding Surplus Relief		13	14
	ID Number	Effective Date	Name of Company	Domi- ciliary Juris- diction	Type of Reinsurance Ceded	Type of Business Ceded	Premiums	Unearned Premiums (Estimated)	Reserve Credit Taken Other than for Unearned Premiums	11	12	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
										Current Year	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	1,852,544	83,863	8,496,835 .....	.....	.....	.....	.....
61832	.. 52-0676509 ..	10/08/2010	Chesapeake Life Insurance Company	OK	OTH/I	A	525,025	19,908	1,814,288 .....	.....	.....	.....	.....
61832	.. 52-0676509 ..	10/08/2010	Chesapeake Life Insurance Company	OK	OTH/I	OM	104,519	4,693	218,765 .....	.....	.....	.....	.....
0899999.	General Account - Authorized U.S. Non-Affiliates						2,482,088	108,464	10,529,888	0	0	0	0
1099999.	Total General Account - Authorized Non-Affiliates						2,482,088	108,464	10,529,888	0	0	0	0
1199999.	Total General Account Authorized						2,482,088	108,464	10,529,888	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						2,482,088	108,464	10,529,888	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)						2,482,088	108,464	10,529,888	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							2,482,088	108,464	10,529,888	0	0	0	

Schedule S - Part 4
N O N E

Schedule S - Part 4 - Bank Footnote
N O N E

Schedule S - Part 5
N O N E

Schedule S - Part 5 - Bank Footnote
N O N E

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

	1 2023	2 2022	3 2021	4 2020	5 2019
A. OPERATIONS ITEMS					
1. Premiums and annuity considerations for life and accident and health contracts	2,567	2,890	3,052	3,004	3,025
2. Commissions and reinsurance expense allowances	610	822	987	988	996
3. Contract claims	326	359	382	300	489
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	0
7. Increase in aggregate reserve for life and accident and health contracts	1,380	1,322	1,429	1,387	1,341
B. BALANCE SHEET ITEMS					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected	65	71	77	79	77
9. Aggregate reserves for life and accident and health contracts	10,651	9,271	7,948	6,519	5,132
10. Liability for deposit-type contracts	0	0	0	0	0
11. Contract claims unpaid	231	365	365	459	478
12. Amounts recoverable on reinsurance	15	0	20	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
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
18. Funds deposited by and withheld from (F)	0	0	0	0	0
19. Letters of credit (L)	0	0	0	0	0
20. Trust agreements (T)	0	0	0	0	0
21. Other (O)	0	0	0	0	0
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
22. Multiple Beneficiary Trust	0	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)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	1,829,456,397	0	1,829,456,397
2. Reinsurance (Line 16)	15,284	(15,284)	0
3. Premiums and considerations (Line 15)	13,744,599	65,107	13,809,706
4. Net credit for ceded reinsurance	XXX	10,832,100	10,832,100
5. All other admitted assets (balance)	50,161,345	0	50,161,345
6. Total assets excluding Separate Accounts (Line 26)	1,893,377,625	10,881,923	1,904,259,548
7. Separate Account assets (Line 27)	0	0	0
8. Total assets (Line 28)	1,893,377,625	10,881,923	1,904,259,548
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9. Contract reserves (Lines 1 and 2)	1,657,928,510	10,650,544	1,668,579,054
10. Liability for deposit-type contracts (Line 3)	20,098,528	0	20,098,528
11. Claim reserves (Line 4)	31,718,826	231,379	31,950,205
12. Policyholder dividends/member refunds/reserves (Lines 5 through 7)	0	0	0
13. Premium & annuity considerations received in advance (Line 8)	0	0	0
14. Other contract liabilities (Line 9)	100,349	0	100,349
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	0
17. Reinsurance with Certified Reinsurers (Line 24.02 inset amount)	0	0	0
18. Funds held under reinsurance treaties with Certified Reinsurers (Line 24.03 inset amount)	0	0	0
19. All other liabilities (balance)	23,594,555	0	23,594,555
20. Total liabilities excluding Separate Accounts (Line 26)	1,733,440,768	10,881,923	1,744,322,691
21. Separate Account liabilities (Line 27)	0	0	0
22. Total liabilities (Line 28)	1,733,440,768	10,881,923	1,744,322,691
23. Capital & surplus (Line 38)	159,936,857	XXX	159,936,857
24. Total liabilities, capital & surplus (Line 39)	1,893,377,625	10,881,923	1,904,259,548
NET CREDIT FOR CEDED REINSURANCE			
25. Contract reserves	10,650,544		
26. Claim reserves	231,379		
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	15,284		
32. Other ceded reinsurance recoverables	0		
33. Total ceded reinsurance recoverables	10,897,207		
34. Premiums and considerations	65,107		
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	65,107		
41. Total net credit for ceded reinsurance	10,832,100		

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

Allocated by States and Territories

			Direct Business Only					
			1	2	3	4	5	6
States, Etc.			Life (Group and Individual)	Annuities (Group and Individual)	Disability Income (Group and Individual)	Long-Term Care (Group and Individual)	Deposit-Type Contracts	Totals
1.	Alabama	AL	56,128	0			0	56,128
2.	Alaska	AK	0	0			0	0
3.	Arizona	AZ	93,216	0			0	93,216
4.	Arkansas	AR	444,384	0			0	444,384
5.	California	CA	75,763	0			0	75,763
6.	Colorado	CO	72,197	0			0	72,197
7.	Connecticut	CT	710	0			0	710
8.	Delaware	DE	3,199	0			0	3,199
9.	District of Columbia	DC	409	0			0	409
10.	Florida	FL	127,517	0			0	127,517
11.	Georgia	GA	253,697	0			0	253,697
12.	Hawaii	HI	710	0			0	710
13.	Idaho	ID	3,923	0			0	3,923
14.	Illinois	IL	114,480	0			0	114,480
15.	Indiana	IN	37,510	0			0	37,510
16.	Iowa	IA	94,020	0			0	94,020
17.	Kansas	KS	268,987	0			0	268,987
18.	Kentucky	KY	292,978	0			0	292,978
19.	Louisiana	LA	129,874	0			0	129,874
20.	Maine	ME	10,241	0			0	10,241
21.	Maryland	MD	46,347	0			0	46,347
22.	Massachusetts	MA	1,250	0			0	1,250
23.	Michigan	MI	28,141	0			0	28,141
24.	Minnesota	MN	80,902	0			0	80,902
25.	Mississippi	MS	30,084	0			0	30,084
26.	Missouri	MO	164,279	0			0	164,279
27.	Montana	MT	16,064	0			0	16,064
28.	Nebraska	NE	52,000	0			0	52,000
29.	Nevada	NV	15,888	0			0	15,888
30.	New Hampshire	NH	8,327	0			0	8,327
31.	New Jersey	NJ	2,208	0			0	2,208
32.	New Mexico	NM	42,826	0			0	42,826
33.	New York	NY	0	0			0	0
34.	North Carolina	NC	176,235	0			0	176,235
35.	North Dakota	ND	14,346	0			0	14,346
36.	Ohio	OH	141,056	0			0	141,056
37.	Oklahoma	OK	109,049	0			0	109,049
38.	Oregon	OR	10,793	0			0	10,793
39.	Pennsylvania	PA	47,757	0			0	47,757
40.	Rhode Island	RI	0	0			0	0
41.	South Carolina	SC	133,371	0			0	133,371
42.	South Dakota	SD	14,184	0			0	14,184
43.	Tennessee	TN	153,532	0			0	153,532
44.	Texas	TX	2,465,187	0			0	2,465,187
45.	Utah	UT	9,207	0			0	9,207
46.	Vermont	VT	469	0			0	469
47.	Virginia	VA	105,257	0			0	105,257
48.	Washington	WA	101,112	0			0	101,112
49.	West Virginia	WV	143,462	0			0	143,462
50.	Wisconsin	WI	24,652	0			0	24,652
51.	Wyoming	WY	17,427	0			0	17,427
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		6,235,355	0	0	0	0	6,235,355

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
...	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	..BMJ.....	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	63-0031059 ..	.....	.....	.....	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 .....	.....	NYSE	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.....	.....
..0290	Globe Life Inc.	77968	34-1626521 ..	.....	.....	.....	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.	59-2695248 ..	.....	.....	.....	.....	American Life and Health Group, Inc.	..TX.....	NIA.....	Globe Life Inc.	Ownership.....	100.000 ..	Globe Life Inc.	NO.....	.....
...	.....	.....00000	82-5431371 ..	.....	.....	.....	AILO 1, LLC	..TX.....	NIA.....	American Income Life Insurance Company	Ownership.....	100.000 ..	Globe Life Inc.	NO.....	.....
...	.....	.....00000	84-3765985 ..	.....	.....	.....	LND 01, LLC	..TX.....	NIA.....	Liberty National Life Insurance Company ...	Ownership.....	100.000 ..	Globe Life Inc.	NO.....	.....

Asterisk	Explanation

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

SCHEDULE Y

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

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2023 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

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

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
MARCH FILING	
1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
3. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	YES
4. Will an actuarial opinion be filed by March 1?	YES
APRIL FILING	
5. Will Management’s Discussion and Analysis be filed by April 1?	YES
6. Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies)	YES
7. Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
JUNE FILING	
8. Will an audited financial report be filed by June 1?	YES
9. Will Accountant’s Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES

SUPPLEMENTAL FILINGS

The following supplemental reports are required to be filed as part of your annual statement filing if your company is engaged in the type of business covered by the supplement. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a “NONE” report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

MARCH FILING	
10. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? (Not applicable to fraternal benefit societies) ..	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?	YES
24. Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?	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 2023 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 Supplement be filed with the state of domicile and the NAIC by March 1?	YES
36.	Will the Market Conduct Annual Statement (MCAS) Premium Exhibit for Year be filed with appropriate jurisdictions and with the NAIC by March 1?	YES

APRIL FILING

37.	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
38.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
39.	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
40.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	YES
41.	Will the Supplemental Health Care Exhibit (Parts 1 and 2) 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:		
11.		
12.		
13.		
14.		
15.		
16.		
17.		
18.		
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39.		
41.		
42.		
43.		
44.		
47.		

Bar Codes:

11.	Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]	
12.	Trusted 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]	
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]	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

21.	Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI [Document Identifier 448]	 7 7 9 6 8 2 0 2 3 4 4 8 0 0 0 0 0
22.	Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) [Document Identifier 449]	 7 7 9 6 8 2 0 2 3 4 4 9 0 0 0 0 0
24.	C-3 RBC Certifications Required Under C-3 Phase II [Document Identifier 451]	 7 7 9 6 8 2 0 2 3 4 5 1 0 0 0 0 0
25.	Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities [Document Identifier 452]	 7 7 9 6 8 2 0 2 3 4 5 2 0 0 0 0 0
26.	Modified Guaranteed Annuity Model Regulation [Document Identifier 453]	 7 7 9 6 8 8 2 0 2 3 4 5 3 0 0 0 0 0
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]	 7 7 9 6 8 8 2 0 2 3 4 5 4 0 0 0 0 0
28.	Workers' Compensation Carve-Out Supplement [Document Identifier 495]	 7 7 9 6 8 2 0 2 3 4 9 5 0 0 0 0 0
30.	Medicare Part D Coverage Supplement [Document Identifier 365]	 7 7 9 6 8 2 0 2 3 3 6 5 0 0 0 0 0
31.	Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]	 7 7 9 6 8 2 0 2 3 2 2 4 0 0 0 0 0
32.	Relief from the one-year cooling off period for independent CPA [Document Identifier 225]	 7 7 9 6 8 2 0 2 3 2 2 5 0 0 0 0 0
33.	Relief from the Requirements for Audit Committees [Document Identifier 226]	 7 7 9 6 8 2 0 2 3 2 2 6 0 0 0 0 0
38.	Long-Term Care Experience Reporting Forms [Document Identifier 306]	 7 7 9 6 8 2 0 2 3 3 0 6 0 0 0 0 0
39.	Credit Insurance Experience Exhibit [Document Identifier 230]	 7 7 9 6 8 2 0 2 3 2 3 0 0 0 0 0 0
41.	Supplemental Health Care Exhibit (Parts 1 and 2) [Document Identifier 216]	 7 7 9 6 8 2 0 2 3 2 1 6 0 0 0 0 0
42.	Actuarial Memorandum Required by Actuarial Guideline XXXVIII 8D [Document Identifier 435]	 7 7 9 6 8 2 0 2 3 4 3 5 0 0 0 0 0
43.	Supplemental Term and Universal Life Insurance Reinsurance Exhibit [Document Identifier 345]	 7 7 9 6 8 2 0 2 3 3 4 5 0 0 0 0 0
44.	Variable Annuities Supplement [Document Identifier 286]	 7 7 9 6 8 8 2 0 2 3 2 8 6 0 0 0 0 0
47.	Variable Annuities Summary of the PBR Actuarial Report [Document Identifier 459]	 7 7 9 6 8 2 0 2 3 4 5 9 0 0 0 0 0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Exhibit 2 Line 9.3

	Insurance				5	6	7
	1	Accident and Health		4			
		2	3				
	Life	Cost Containment	All Other	All Other Lines of Business	Investment	Fraternal	Total
09.304. Recruiting Fees			460,134	.....	.....	.....	460,134
09.305. Donations			92,925	.....	.....	.....	92,925
09.306. Office Services			29,295	.....	.....	.....	29,295
09.307. Seminars			28,015	.....	.....	.....	28,015
09.397. Summary of remaining write-ins for Line 9.3 from overflow page	0	0	610,369	0	0	0	610,369

Additional Write-ins for Exhibit of Nonadmitted Assets Line 25

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	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 2023 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, 2023
(To Be Filed by March 1)

NAIC Group Code 0290

NAIC Company Code 77968

	Prior Year	Current Year	
	1 Reported Reserve	2 Reported Reserve	3 Due and Deferred Premium Asset
1. Post-Reinsurance-Ceded Reserve			
1.1. Term Life Insurance.....	238	301	135
1.2. Universal Life With Secondary Guarantee			
1.3. Non-Participating Whole Life	1,965,623	3,760,051	53,573
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)	1,965,861	3,760,352	XXX
3. Pre-Reinsurance-Ceded Reserve			
3.1. Term Life Insurance.....	238	301	135
3.2. Universal Life With Secondary Guarantee			
3.3. Non-Participating Whole Life	1,965,623	3,760,051	53,573
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)	1,965,861	3,760,352	XXX
5. Total Reserves Ceded (Line 4 minus Line 2)	0	0	XXX
DETAILS OF WRITE-INS			
1.901.			
1.902.			
1.903.			
1.998. Summary of remaining write-ins for Line 1.9 from overflow page	0	0	0
1.999. Totals (Lines 1.901 thru 1.903 plus 1.998) (Line 1.9 above)	0	0	0
3.901.			
3.902.			
3.903.			
3.998. Summary of remaining write-ins for Line 3.9 from overflow page	0	0	0
3.999. Totals (Lines 3.901 thru 3.903 plus 3.998) (Line 3.9 above)	0	0	0

SUPPLEMENT FOR THE YEAR 2023 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, 2023
(To Be Filed by March 1)
(\$000 Omitted for Face Amounts)

[illegible]

SUPPLEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

VM-20 RESERVES SUPPLEMENT – PART 2

Life PBR Exemption
For The Year Ended December 31, 2023
(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, 2023
(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?	
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 2023 OF THE Family Heritage Life Insurance Company of America

SCHEDULE O SUPPLEMENT

For The Year Ended December 31, 2023
(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 2019	2 2020	3 2021	4 2022	5 2023(a)
1.	Prior	435	63	16	30	20
2.	2019	1,117	526	35	12	9
3.	2020	XXX	919	520	39	31
4.	2021	XXX	XXX	1,272	442	160
5.	2022	XXX	XXX	XXX	1,254	647
6.	2023	XXX	XXX	XXX	XXX	1,313

Section B - Other Accident and Health

1.	Prior	19,615	2,626	998	694	478
2.	2019	78,990	16,339	1,272	652	252
3.	2020	XXX	82,283	14,911	1,283	818
4.	2021	XXX	XXX	87,322	17,199	1,940
5.	2022	XXX	XXX	XXX	94,736	17,970
6.	2023	XXX	XXX	XXX	XXX	94,803

Section C - Credit Accident and Health

1.	Prior					
2.	2019					
3.	2020	XXX				
4.	2021	XXX				
5.	2022	XXX	XX	XXX		
6.	2023	XXX	XX		XXX	

Section D -

1.	Prior					
2.	2019					
3.	2020	XXX				
4.	2021	XXX				
5.	2022	XXX	XX	XXX		
6.	2023	XXX	XX		XXX	

Section E -

1.	Prior					
2.	2019					
3.	2020	XXX				
4.	2021	XXX				
5.	2022	XXX	XX	XXX		
6.	2023	XXX	XX		XXX	

Section F -

1.	Prior					
2.	2019					
3.	2020	XXX				
4.	2021	XXX				
5.	2022	XXX	XX	XXX		
6.	2023	XXX	XX		XXX	

Section G -

1.	Prior					
2.	2019					
3.	2020	XXX				
4.	2021	XXX				
5.	2022	XXX	XX	XXX		
6.	2023	XXX	XX		XXX	

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

SUPPLEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O - PART 2

Development of Incurred Losses
(\$000 Omitted)

Section A - Group Accident and Health

Years in Which Losses Were Incurred		Net Amounts Paid for Cost Containment Expenses				
		1 2019	2 2020	3 2021	4 2022	5 2023
1.	Prior	NONE				
2.	2019					
3.	2020					
4.	2021					
5.	2022					
6.	2023					

Section B - Other Accident and Health

1.	Prior	NONE				
2.	2019					
3.	2020					
4.	2021					
5.	2022					
6.	2023					

Section C - Credit Accident and Health

1.	Prior	NONE				
2.	2019					
3.	2020					
4.	2021					
5.	2022					
6.	2023					

Section D -

1.	Prior	NONE				
2.	2019					
3.	2020					
4.	2021					
5.	2022					
6.	2023					

Section E -

1.	Prior	NONE				
2.	2019					
3.	2020					
4.	2021					
5.	2022					
6.	2023					

Section F -

1.	Prior	NONE				
2.	2019					
3.	2020					
4.	2021					
5.	2022					
6.	2023					

Section G -

1.	Prior	NONE				
2.	2019					
3.	2020					
4.	2021					
5.	2022					
6.	2023					

SUPPLEMENT FOR THE YEAR 2023 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 2019	2 2020	3 2021	4 2022	5 2023
1.	2019	2,202	1,785	1,727	.XXX	.XXX
2.	2020	.XXX	2,264	1,528	1,530	.XXX
3.	2021	.XXX	.XXX	2,339	1,834	1,943
4.	2022	.XXX	.XXX	.XXX	2,606	2,067
5.	2023	.XXX	.XXX	.XXX	.XXX	2,984

Section B - Other Accident and Health

1.	2019	101,191	97,844	97,557	.XXX	.XXX
2.	2020	.XXX	105,559	99,268	99,679	.XXX
3.	2021	.XXX	.XXX	109,508	107,203	107,891
4.	2022	.XXX	.XXX	.XXX	119,175	116,128
5.	2023	.XXX	.XXX	.XXX	.XXX	121,912

Section C - Credit Accident and Health

1.	2019				.XXX	.XXX
2.	2020	.XXX				.XXX
3.	2021	.XXX				
4.	2022	.XXX	.XX	.XXX		
5.	2023	.XXX	.XX	.XXX	.XXX	

Section D -

1.	2019				.XXX	.XXX
2.	2020	.XXX				.XXX
3.	2021	.XXX				
4.	2022	.XX	.XX	.XXX		
5.	2023	.XXX	.XX	.XXX	.XXX	

Section E -

1.	2019				.XXX	.XXX
2.	2020	.XXX				.XXX
3.	2021	.XXX				
4.	2022	.XX	.XX	.XXX		
5.	2023	.XXX	.XX	.XXX	.XXX	

Section F -

1.	2019				.XXX	.XXX
2.	2020	.XXX				.XXX
3.	2021	.XXX				
4.	2022	.XX	.XX	.XXX		
5.	2023	.XXX	.XX	.XXX	.XXX	

Section G -

1.	2019				.XXX	.XXX
2.	2020	.XXX				.XXX
3.	2021	.XXX				
4.	2022	.XX	.XX	.XXX		
5.	2023	.XXX	.XX	.XXX	.XXX	

SUPPLEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O - PART 4

Development of Incurred Losses
(\$000 Omitted)

Section A - Group Accident and Health

Years in Which Losses 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 2019	2 2020	3	4 2022	5 2023
1.	2019	NONE				
2.	2020		XXX			
3.	2021		XXX			
4.	2022		XXX	XXX		
5.	2023		XXX	XXX	XXX	

Section B - Other Accident and Health

1.	2019	NONE				
2.	2020		XXX			
3.	2021		XXX			
4.	2022		XXX	XX	XXX	
5.	2023		XXX	XX	XXX	

Section C - Credit Accident and Health

1.	2019	NONE				
2.	2020		XXX			
3.	2021		XXX			
4.	2022		XXX	XX	XXX	
5.	2023		XXX	XX	XXX	

Section D -

1.	2019	NONE				
2.	2020		XXX			
3.	2021		XXX			
4.	2022		XXX	XX	XXX	
5.	2023		XXX	XX	XXX	XXX

Section E -

1.	2019	NONE				
2.	2020		XXX			
3.	2021		XXX			
4.	2022		XXX	XX	XXX	
5.	2023		XXX	XX	XXX	XXX

Section F -

1.	2019	NONE				
2.	2020		XXX			
3.	2021		XXX			
4.	2022		XXX	XX	XXX	
5.	2023		XXX	XX	XXX	XXX

Section G -

1.	2019	NONE				
2.	2020		XXX			
3.	2021		XXX			
4.	2022		XXX	XX	XXX	
5.	2023		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	Development	
2.	Ordinary Life		979
3.	Individual Annuity		
4.	Supplementary Contracts		
5.	Credit Life		
6.	Group Life	Development	
7.	Group Annuities		
8.	Group Accident and Health		1,953
9.	Credit Accident and Health	Development	
10.	Other Accident and Health		32,889
11.	Total		35,821



SUPPLEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

HEALTH SUPPLEMENTS

For The Year Ended December 31, 2023
(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 ID Number 34-1626521

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

475-2

Health Supplement - Exhibit 3 - Health Care Receivables

N O N E

Health Supplement - Exhibit 3A - Health Care Receivables Collected and Accrued

N O N E



SUPPLEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Alabama

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	YES
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Alaska

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	NO
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Arizona

NAIC Group Code 0290 NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	YES
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Arkansas

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	YES
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: California

NAIC Group Code0290

NAIC Company Code77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	YES
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Colorado

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	YES
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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(To Be Filed by March 1)

FOR THE STATE OF: Connecticut

NAIC Group Code 0290 NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	NO
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	NO
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Delaware

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	NO
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: District of Columbia

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	NO
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	NO
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Florida

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	YES
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Georgia

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	YES
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Hawaii

NAIC Group Code 0290NAIC Company Code 77968

MCAS LINE OF BUSINESS		MCAS Reportable Premium/Considerations (Yes/No)
1.	Disability Income	NO
2.	Health	NO
3.	Homeowners	NO
4.	Individual Annuity	NO
5.	Individual Life	NO
6.	Lender-Placed Home and Auto	NO
7.	Long-Term Care	NO
8.	Other Health	YES
9.	Private Flood	NO
10.	Private Passenger Auto	NO
11.	Short-Term Limited Duration Health Plans	NO
12.	Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Idaho

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	NO
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Illinois

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	YES
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Indiana

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	NO
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Iowa

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	YES
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Kansas

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	YES
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Kentucky

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	YES
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Louisiana

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	YES
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Maine

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	NO
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Maryland

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	NO
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Massachusetts

NAIC Group Code0290

NAIC Company Code77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	NO
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	NO
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Michigan

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	NO
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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(To Be Filed by March 1)

FOR THE STATE OF: Minnesota

NAIC Group Code0290

NAIC Company Code77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	YES
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Mississippi

NAIC Group Code 0290NAIC Company Code 77968

MCAS LINE OF BUSINESS		MCAS Reportable Premium/Considerations (Yes/No)
1.	Disability Income	NO
2.	Health	NO
3.	Homeowners	NO
4.	Individual Annuity	NO
5.	Individual Life	NO
6.	Lender-Placed Home and Auto	NO
7.	Long-Term Care	NO
8.	Other Health	YES
9.	Private Flood	NO
10.	Private Passenger Auto	NO
11.	Short-Term Limited Duration Health Plans	NO
12.	Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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(To Be Filed by March 1)

FOR THE STATE OF: Missouri

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	YES
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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(To Be Filed by March 1)

FOR THE STATE OF: Montana

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	NO
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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(To Be Filed by March 1)

FOR THE STATE OF: Nebraska

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	YES
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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(To Be Filed by March 1)

FOR THE STATE OF: Nevada

NAIC Group Code0290

NAIC Company Code77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO.....
2. Health	NO.....
3. Homeowners	NO.....
4. Individual Annuity	NO.....
5. Individual Life	NO.....
6. Lender-Placed Home and Auto	NO.....
7. Long-Term Care	NO.....
8. Other Health	YES.....
9. Private Flood	NO.....
10. Private Passenger Auto	NO.....
11. Short-Term Limited Duration Health Plans	NO.....
12. Travel	NO.....



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
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FOR THE STATE OF: New Hampshire

NAIC Group Code 0290NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	NO
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
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FOR THE STATE OF: New Jersey

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	NO
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: New Mexico

NAIC Group Code0290

NAIC Company Code77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO.....
2. Health	NO.....
3. Homeowners	NO.....
4. Individual Annuity	NO.....
5. Individual Life	NO.....
6. Lender-Placed Home and Auto	NO.....
7. Long-Term Care	NO.....
8. Other Health	YES.....
9. Private Flood	NO.....
10. Private Passenger Auto	NO.....
11. Short-Term Limited Duration Health Plans	NO.....
12. Travel	NO.....



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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(To Be Filed by March 1)

FOR THE STATE OF: New York

NAIC Group Code0290

NAIC Company Code77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	NO
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	NO
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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FOR THE STATE OF: North Carolina

NAIC Group Code0290

NAIC Company Code77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	YES
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
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FOR THE STATE OF: North Dakota

NAIC Group Code0290

NAIC Company Code77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	NO
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	NO
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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FOR THE STATE OF: Ohio

NAIC Group Code0290

NAIC Company Code77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	YES
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
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FOR THE STATE OF: Oklahoma

NAIC Group Code0290

NAIC Company Code77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	YES
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Oregon

NAIC Group Code0290

NAIC Company Code77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO.....
2. Health	NO.....
3. Homeowners	NO.....
4. Individual Annuity	NO.....
5. Individual Life	NO.....
6. Lender-Placed Home and Auto	NO.....
7. Long-Term Care	NO.....
8. Other Health	YES.....
9. Private Flood	NO.....
10. Private Passenger Auto	NO.....
11. Short-Term Limited Duration Health Plans	NO.....
12. Travel	NO.....



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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FOR THE STATE OF: Pennsylvania

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	NO
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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FOR THE STATE OF: Rhode Island

NAIC Group Code0290

NAIC Company Code77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	NO
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	NO
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



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MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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FOR THE STATE OF: South Carolina

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	YES
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: South Dakota

NAIC Group Code0290

NAIC Company Code77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	NO
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Tennessee

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	YES
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Texas

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	YES
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Utah

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	NO
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Vermont

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	NO
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	NO
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Virginia

NAIC Group Code0290

NAIC Company Code77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	YES
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Washington

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	YES
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: West Virginia

NAIC Group Code0290

NAIC Company Code77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	YES
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Wisconsin

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	NO
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Wyoming

NAIC Group Code 0290

NAIC Company Code 77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	NO
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	YES
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2023 OF THE Family Heritage Life Insurance Company of America

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed by March 1)

FOR THE STATE OF: Puerto Rico

NAIC Group Code0290

NAIC Company Code77968

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO
2. Health	NO
3. Homeowners	NO
4. Individual Annuity	NO
5. Individual Life	NO
6. Lender-Placed Home and Auto	NO
7. Long-Term Care	NO
8. Other Health	NO
9. Private Flood	NO
10. Private Passenger Auto	NO
11. Short-Term Limited Duration Health Plans	NO
12. Travel	NO