

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

NAIC Group Code

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2019 OF THE CONDITION AND AFFAIRS OF THE

AMICA LIFE INSURANCE COMPANY

0028 0028 NAIC Company Code 72222 Employer's ID Number 05-0340166

Organized under the Laws of	Rhode	Island	_, State of Domicile or Port of En	try RI
Country of Domicile		United State	es of America	
Licensed as business type:	Lif	e, Accident and Health [X	Fraternal Benefit Societies []	
Incorporated/Organized	06/13/1968		Commenced Business	05/06/1970
Statutory Home Office	100 Amica (Street and Nu		,(City or	Lincoln, RI, US 02865-1156 Town, State, Country and Zip Code)
Main Administrative Office			nica Way	
L	incoln, RI, US 02865-1156	(Street a	nd Number)	800-652-6422
	own, State, Country and Zip C			rea Code) (Telephone Number)
Mail Address	P.O. Box 6008			rovidence, RI, US 02940-6008
	(Street and Number or P.	O. Box)	(City or	Town, State, Country and Zip Code)
Primary Location of Books and F	Records		mica Way	
L	incoln, RI, US 02865-1156	(Street a	nd Number) _,	800-652-6422
(City or Te	own, State, Country and Zip C	Code)	(A	rea Code) (Telephone Number)
Internet Website Address		www.a	mica.com	
Statutory Statement Contact _	David Jo	oseph Macedo	, ,	800-652-6422-24014
	dmacedo@amica.com	(Name)		(Area Code) (Telephone Number) 401-334-2270
	(E-mail Address)		_,	(FAX Number)
		OFF	ICERS	
Chairman, President and			Senior Vice President, Chief Financial Officer and	
Chief Executive Officer Senior Assistant Vice	Robert Anthon	y DiMuccio	Treasurer	James Parker Loring
President and Secretary	Suzanne Elle	en Casey	Actuary	Woodrow Michael Crouch
		01	HER	
Robert Karl Benson, Senio			e, Vice President & Chief Life ctuary	Andrew Thomas Mudra, Vice President
Edmund Shallcross III, Senior Manag	Vice President & General	Jennifer Ann Morrison	#, Vice President & General ounsel	,
			OR TRUSTEES	
Jeffrey Pau		Jill Ja	nice Avery	Debra Ann Canales
Patricia Walsh Michael Dav			thony DiMuccio Ceith Machtley	Barry George Hittner Peter Michael Marino #
Debra Mari			ulian Reaves	Diane Desmarais Souza #
O	5			
State of County of	Rhode Island Providence	SS:		
all of the herein described assestatement, together with related condition and affairs of the said in accordance with the NAIC Arrules or regulations require differespectively. Furthermore, the same continuous	its were the absolute properti- exhibits, schedules and expla- reporting entity as of the repo- nual Statement Instructions a ferences in reporting not re- scope of this attestation by the	y of the said reporting enti inations therein contained, riting period stated above, a and Accounting Practices alated to accounting practi e described officers also in	ty, free and clear from any liens annexed or referred to, is a full a and of its income and deductions and Procedures manual except to ces and procedures, according includes the related corresponding	orting entity, and that on the reporting period stated above, or claims thereon, except as herein stated, and that this nd true statement of all the assets and liabilities and of the therefrom for the period ended, and have been completed to the extent that: (1) state law may differ; or, (2) that state to the best of their information, knowledge and belief, g electronic filing with the NAIC, when required, that is an be requested by various regulators in lieu of or in addition
Robert Anthony Dill Chairman, President and Chief			Ellen Casey President and Secretary	James Parker Loring Senior Vice President, Chief Financial Officer and Treasurer
Subscribed and sworn to before day of _		ary, 2020	a. Is this an original filing b. If no, 1. State the amendme 2. Date filed	ent number
Ann Marie Octeau Notary Public June 8, 2022				



DIRECT BUSINESS IN THE STATE OF Alabama

DURING THE YEAR 2019

NAIC Group Code 0028		LI	FE INSURANCE	NAIC Company Code 72222		
	DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.	Life insurance	183,745				183,745
2.	Annuity considerations	7,000				7,000
3.			XXX		XXX	
4.						
5.	Totals (Sum of Lines 1 to 4)	190,745				190,745
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life ir	surance:					
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4	Other					
6.5	Totals (Sum of Lines 6.1 to 6.4)					
Annu						
7.1	Paid in cash or left on deposit					
7.2						
7.3						
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	(33)				(33
10.						
11.	Annuity benefits	28,273				28,273
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	AU 01 1 C1 1 11 10					
15.	Totals	28,240				28,240
	DETAILS OF WRITE-INS					
1301.						
1302.						
1303.						
1398.	Summary of Line 13 from overflow page					
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					
		Credit Life				

	C	rdinarv		redit Life and Individual)		Group	In	ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND			No. of							
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year										
17. Incurred during current year	1 .	250,000							1	250,000
Settled during current year:										
18.1 By payment in full		(33)								(33
18.2 By payment on compromised claims										
18.3 Totals paid		(33)								(33
18.4 Reduction by compromise										
18.5 Amount rejected							. LL			
18.6 Total settlements		(33)								(33
19. Unpaid Dec. 31, current year (16+17-18.6)	1	250,033							1	250,033
year (10+17-10.0)	1	250,000							'	200,000
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior					Policies					
year	222	74 166 000	l .	(a)					222	74 , 166 , 000
21. Issued during year	18	4 760 000		(G)					18	4,760,000
22. Other changes to in force										
(Net)	(11)	(4,728,000)					. [(11)	(4,728,000
23. In force December 31 of		, ,. = - , ,								, ,. = - ,
current vear	229	74.198.000	1	(a)					229	74.198.000

 current year
 229
 74,198,000
 (a)
 229

 (a) Includes Individual Credit Life Insurance prior year \$
 , current year \$

 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$
 , current year \$

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

ACCIDENT AND HEALTH INSURANCE

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



DIRECT BUSINESS IN THE STATE OF Alaska

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE	E	NAIC Compa	ny Code 72222
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.		38,726	aria marriadary			38,726
2.		,				,
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	38,726				38,726
6.1 6.2	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Isurance: Paid in cash or left on deposit					
6.4	Other					
	Totals (Sum of Lines 6.1 to 6.4)					
Annu						
7.1	Paid in cash or left on deposit					
	Applied to provide paid-up annuities					
7.3	Other				}	
7.4 8.	Totals (Sum of Lines 7.1 to 7.3)					
0.	Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					
10.	Matured endowments					
	A '' 1 C'					
12.		4 000				1,308
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	1,308				1,308
	DETAILS OF WRITE-INS					
1301.						
1302.						
1303						
1398.	Summary of Line 13 from overflow page				ļ ļ	
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

				Credit Life						
	C	Ordinary	(Group	and Individual)		Group	li li	ndustrial		Total
DIRECT DEATH BENEFITS AND MATURED	1 No. of	2	3 No. of Ind.Pols.	4	5	6	7 No. of	8	9 No. of	10
ENDOWMENTS INCURRED	Pols. & Certifs.	Amazumt	& Gr.	Amazunt	No. of	A ma a cont	Pols. & Certifs.	Amazunt	Pols. &	Amazzunt
16. Unpaid December 31, prior	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certiis.	Amount	Certifs.	Amount
year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected	*									
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior	40	40 705 500							40	40 705 50
year21. Issued during year	46	18,785,500		(a)					46 6	18,785,50 1,375,00
22. Other changes to in force (Net)	(4)	(927,000)							(4)	(927,00
23. In force December 31 of current year	48	19,233,500		(a)					48	19,233,50

ı	ouricht your	.0	10,200,000	(a)					.0	
((a) Includes Individual Credit Life I	nsurance p	orior year \$, current y	year \$	 			
	Includes Group Credit Life Insu	ırance Loa	ns less than or equ	al to 60 month	hs at issue, prio	r year \$, CI	urrent year \$		
	Loans greater than 60 months	at issue Bl	JT NOT GREATER	R THAN 120 N	MONTHS, prior	year\$, CI	urrent year \$		

ACCIDENT AND HEALTH INSURANCE

ACCIDENT AND HEALTH INCONANCE									
		1	2	3	4	5			
				Policyholder Dividends					
				Paid, Refunds to					
			Direct Premiums	Members or Credited		Direct Losses			
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred			
24.	Group Policies (b)								
24.1	Federal Employees Health Benefits Plan premium (b)								
24.2	Credit (Group and Individual)								
24.3	Collectively renewable policies/certificates (b)								
24.4	Medicare Title XVIII exempt from state taxes or fee								
	Other Individual Policies:								
25.1	Non-cancelable (b)								
	Guaranteed renewable (b)								
	Non-renewable for stated reasons only (b)								
	Other accident only								
	All other (b)								
	Totals (sum of Lines 25.1 to 25.5)			· · · · · · · · · · · · · · · · · · ·					
∠0.	10tals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.0)	l	l						



DIRECT BUSINESS IN THE STATE OF Arizona 0028

DURING THE YEAR 2019

NAIC Grou	ıp Code 0028	LI	FE INSURANCE	NAIC Company Code 7222		
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life	insurance	1, 141, 137		57,806		1, 198, 94
2. Annı	uity considerations	106,581				106,58
Deper	osit-type contract funds		XXX		XXX	
5. Tota	lls (Sum of Lines 1 to 4)	1,247,718		57,806		1,305,524
Life insuran						
	lied to provide paid-up additions or shorten the endowment or premium-paying period					
6.5 Tota	. (0 (1) 04(04)					
Annuities:	III (Guill of Ellics 6.1 to 6.4)					
	l in cash or left on deposit					
7.2 Appl						
7.4 Tota	uls (Sum of Lines 7.1 to 7.3)					
	nd Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9. Deat	th benefits	486.455				486,455
11. Annı		138.891				138.891
12. Surr	ender values and withdrawals for life contracts	354,231				354,231
and	regate write-ins for miscellaneous direct claims					
14. All o	ther benefits, except accident and health	1,885				1,885
15. Tota		981,462				981,462
	AILS OF WRITE-INS					
1301						
1302						
1303						
1399. Tota abo	als (Lines 1301 thru 1303 plus 1398) (Line 13 ove)					
			1		+	

	0	rdinarv	_	redit Life and Individual)		Croun	1.	ndustrial		Total
DIRECT DEATH			\ - \ -	and individual)		Group				
BENEFITS AND	1	2	3 No. of	4	5	6	7	8	9	10
MATURED	No. of		Ind.Pols.				No. of		No. of	
	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year										
17. Incurred during current year	6	489,000							6	489,000
Settled during current year:										
8.1 By payment in full	5	486,455							5	486,455
8.2 By nayment on					1					
compromised claims										
8.3 Totals paid	5	486,455							5	486,455
8.4 Reduction by compromise										
8.5 Amount rejected										
8.6 Total settlements	5	486,455							5	486,455
19. Unpaid Dec. 31, current										
year (16+17-18.6)	1	2,545							1	2,545
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	1,214	445,834,608		(a)		7,466,800			1,214	453,301,408
21. Issued during year	89	34,339,000							89	34,339,000
22. Other changes to in force (Net)	(51)	(12,869,779)				1,458,900			(51)	(11,410,879)
23. In force December 31 of current year	1,252	467,303,829		(a)		8,925,700			1.252	476,229,529

) Includes Individual Credit Life Insurance prior year \$, current year \$		
Includes Group Credit Life Insurance Loans less than o	r equal to 60 months at issue, prior year \$, current year \$	
Loans greater than 60 months at issue BUT NOT GREA	ATER THAN 120 MONTHS, prior year \$, current year \$	

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
			Policyholder Dividends		
			Paid, Refunds to		
		Direct Premiums	Members or Credited		Direct Losses
	Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plant premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certification	ates (b)				
24.4 Medicare Title XVIII exempt from state	e taxes or fee				
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26 Totals (Lines 24 + 24 1 + 24 2 + 24 3 +	+ 24 4 + 25 6)				

2b. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) [

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



DIRECT BUSINESS IN THE STATE OF Arkansas

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE		NAIC Company Code 72222		
		1	2	3	4	5	
	DIRECT PREMIUMS	-	Credit Life (Group	_			
_	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total	
1.		108,845				108,845	
2. 3.	Annuity considerations						
	Deposit-type contract funds		XXX				
4. 5.		440 505				440 505	
5.	Totals (Sum of Lines 1 to 4)	118,595				118,595	
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life in	surance:						
6.1	Paid in cash or left on deposit						
6.2	Applied to pay renewal premiums						
6.3	Applied to provide paid-up additions or shorten the						
	endowment or premium-paying period						
6.4	Other						
	Totals (Sum of Lines 6.1 to 6.4)						
Annui							
7.1	Paid in cash or left on deposit						
7.2	Applied to provide paid-up annuities						
7.3	Other						
7.4	Totals (Sum of Lines 7.1 to 7.3)						
8.	Grand Totals (Lines 6.5 plus 7.4)						
9.	DIRECT CLAIMS AND BENEFITS PAID Death benefits						
10.	Matured endowments						
11.							
12.		63,421				63.421	
13.	Aggregate write-ins for miscellaneous direct claims						
14.	All other benefits, except accident and health						
15.	Totals	63,421				63,421	
	DETAILS OF WRITE-INS						
1301.							
1302.							
1303.							
1398.	Summary of Line 13 from overflow page						
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)						
	<u> </u>		· · · · · · · · · · · · · · · · · · ·		+		

		Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total
				and individual)	L		-		_	
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND			No. of							
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS INCURRED	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on										
compromised claims	,									
18.3 Totals paid 18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	115	43,359,505		(a)					115	43,359,505
21. Issued during year	7	4,450,000							7	4,450,000
22. Other changes to in force (Net)	(3)	527,390							(3)	527,390
23. In force December 31 of current year	119	48,336,895		(a)					119	48,336,895

((a) Includes Individual Credit Life I	nsurance p	orior year \$. , current	year \$	 		
	Includes Group Credit Life Insu	ırance Loa	ns less tha	n or eq	ual to 60 i	months at	issue, prid	or year \$, CI	urrent year \$	
	Loans greater than 60 months	at issue Bl	UT NOT G	REATE	R THAN	120 MON	THS, prior	year \$, CI	urrent year \$	

ACCIDENT AND HEALTH INSURANCE

	ACCIDENT AND HEALTH INCONANCE										
		1	2	3	4	5					
				Policyholder Dividends							
				Paid, Refunds to							
			Direct Premiums	Members or Credited		Direct Losses					
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred					
24.	Group Policies (b)										
24.1	Federal Employees Health Benefits Plan premium (b)										
24.2	Credit (Group and Individual)										
24.3	Collectively renewable policies/certificates (b)										
24.4	Medicare Title XVIII exempt from state taxes or fee										
	Other Individual Policies:										
25.1	Non-cancelable (b)										
	Guaranteed renewable (b)										
	Non-renewable for stated reasons only (b)										
	Other accident only										
	All other (b)										
	Totals (sum of Lines 25.1 to 25.5)			· · · · · · · · · · · · · · · · · · ·							
∠0.	10tals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.0)	l	l								



DIRECT BUSINESS IN THE STATE OF California

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE	NAIC Company Code 72222		
	DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.		5,726,902		,		5,869,193
2.		246,611				246,611
3.			XXX		XXX	
4.						
5.	Totals (Sum of Lines 1 to 4)	5,973,513		142,291		6,115,804
Life ir	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS asurance:					
6.1	Paid in cash or left on deposit					
6.3						
6.4						
6.5	- · · · · - · · · · · · · · · · · · · ·					
Annu	ities:					
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,858,005				1,858,005
10.						
11.	Annuity benefits	233,595				233,595
12.	Surrender values and withdrawals for life contracts	194 , 165				194 , 165
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health	37,361				37,361
15.	Totals	2,323,126				2,323,126
	DETAILS OF WRITE-INS					
1301	·					
1302						
1303						
1398						
1399	. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

•				•		•		•		
		Ordinary		Credit Life and Individual)		Group	1-	ndustrial		Total
DIDECT DEATH	,		_ `		 				•	
DIRECT DEATH	1	2	. 3	4	5	6	/	8	9	10
BENEFITS AND			No. of							
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior		070 007								070 00
year	8	372,907								372,907
17. Incurred during current year	23	1,893,912			1	25,000			24	1,918,912
Settled during current year:										
18.1 By payment in full	22	1,858,005							22	1,858,005
18.2 By payment on compromised claims	,									
18.3 Totals paid	22	1,858,005							22	1,858,009
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	22	1,858,005							22	1,858,00
19. Unpaid Dec. 31, current		, ,								, ,
year (16+17-18.6)	9	408,814			1	25,000			10	433,814
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior										
year	5,397			(a)		18,3/9,/00				3, 161, 456, 647
21. Issued during year	341	223,870,000							341	223,870,000
	(300)	(133,671,667)				927,500			(300)	(132,744,16
23. In force December 31 of current year	5,438	3,233,275,280		(a)		19,307,200			5,438	3,252,582,480

_	ourrorn your	-,	-,,	(α)			,,			-,	-,-
(a	a) Includes Individual Credit Life I	nsurance p	orior year \$, current	year \$					
	Includes Group Credit Life Insu	rance Loa	ns less than or equ	ual to 60 month	ns at issue, prio	r year \$, Cl	urrent year \$		
	Loans greater than 60 months	at issue Bl	JT NOT GREATER	R THAN 120 M	MONTHS, prior	year \$, Cl	urrent year \$		

ACCIDENT AND HEALTH INSURANCE

	ACCIDENT AND HEALTH INCONANCE										
		1	2	3	4	5					
				Policyholder Dividends							
				Paid, Refunds to							
			Direct Premiums	Members or Credited		Direct Losses					
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred					
24.	Group Policies (b)										
24.1	Federal Employees Health Benefits Plan premium (b)										
24.2	Credit (Group and Individual)										
24.3	Collectively renewable policies/certificates (b)										
24.4	Medicare Title XVIII exempt from state taxes or fee										
	Other Individual Policies:										
25.1	Non-cancelable (b)										
	Guaranteed renewable (b)										
	Non-renewable for stated reasons only (b)										
	Other accident only										
	All other (b)										
	Totals (sum of Lines 25.1 to 25.5)			· · · · · · · · · · · · · · · · · · ·							
∠0.	10tals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.0)	l	l								



DIRECT BUSINESS IN THE STATE OF Colorado

DURING THE YEAR 2019

	Group Code 0028	LI	FE INSURANCE	NAIC Company Code 72222		
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life insurance	2,009,150		41,741		2,050,891
2.	Annuity considerations	163,824				163,824
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	2,172,974		41,741		2,214,715
l ife in	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS asurance:					
	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4	1 3 01					
6.5						
Annui	ities:					
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4						
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,130,000				1,130,000
10.	Matured endowments					
11.	Annuity benefits	229,610				229,610
12.		335,785				335,785
	•					
15.	Totals	1,695,395				1,695,395
	DETAILS OF WRITE-INS					
1301.						
1302.						
1303.						
1398.	Summary of Line 13 from overflow page					
1399.	. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

		Ordinary	_	Credit Life (Group and Individual)		Group		ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND	-	_	No. of	•		•		-		
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year	1	500,000								500,000
17. Incurred during current year	2	1, 130,000							2	1, 130,000
Settled during current year:										
18.1 By payment in full	2	1.130.000							2	1.130.000
18.2 By payment on										, ,
compromised claims	2	1 130 000							2	1, 130,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	2	1 130 000							2	1,130,000
19. Unpaid Dec. 31, current	<i>-</i>	1, 100,000							L	1, 100,000
year (16+17-18.6)	1	500,000							1	500,000
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior										
year	2,250	967,668,575		(a)		5,391,700			2,250	973,060,275
21. Issued during year	241	122,103,500							241	122,103,500
22. Other changes to in force (Net)	(135)	(32,147,795)				138,000			(135)	(32,009,795
23. In force December 31 of current year	2.356	1.057.624.280		(a)		5.529.700			2.356	1.063.153.980

 current year
 2,356
 1,057,624,280
 (a)
 5,529,700
 2,356
 1,0

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

ACCIDENT AND HEALTH INSURANCE

	ACCIDENT AND HEALTH INSURANCE										
		1	2	3	4	5					
	·			Policyholder Dividends							
				Paid, Refunds to							
	ļ		Direct Premiums	Members or Credited		Direct Losses					
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred					
24.	Group Policies (b)										
24.1	Federal Employees Health Benefits Plan premium (b)										
24.2	Credit (Group and Individual)										
24.3	Collectively renewable policies/certificates (b)										
24.4	Medicare Title XVIII exempt from state taxes or fee										
	Other Individual Policies:										
25.1	Non-cancelable (b)										
	Guaranteed renewable (b)										
	Non-renewable for stated reasons only (b)										
	Other accident only										
	All other (b)										
	Totals (sum of Lines 25.1 to 25.5)										
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)										



DIRECT BUSINESS IN THE STATE OF Connecticut

DURING THE YEAR 2019

	Group Code 0028	1.1	FE INSURANCE	NAIC Company Code 7222		
INAIC	Group Code 0026	1	2	3	4	5
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	Credit Life (Group and Individual)	Group	4 Industrial	5 Total
1.		8,390,596		252 122		8,649,025
2.	Annuity considerations					
3.		,	XXX			,
4.				T		
5.	Totals (Sum of Lines 1 to 4)	8.884.770		258.429		9,143,199
	DIRECT DIVIDENDS TO	0,001,110		200, 120		0,110,100
	POLICYHOLDERS/REFUNDS TO MEMBERS					
Life ir	nsurance:					
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4	Other					
	Totals (Sum of Lines 6.1 to 6.4)					
Annu						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	3,542,547		106,200		3,648,747
10.						
11.	Annuity benefits					1,538,081
12.	Surrender values and withdrawals for life contracts	2,425,487				2,425,487
14.	All other benefits, except accident and health	15,708				15,708
15.	Totals	7,521,823		106,200		7,628,023
	DETAILS OF WRITE-INS					
	·					
1302.						
1303.						
1398.	. Summary of Line 13 from overflow page					
1399.	. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

	(Ordinary		Credit Life and Individual)		Group	lı	ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND MATURED ENDOWMENTS INCURRED	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior	Ceruis.	Amount	Ceruis.	Amount	Ceruis.	Amount	Ceruis.	Amount	Ceruis.	Amount
year										
17. Incurred during current year	23	3,679,050			2	131,200			25	3,810,250
Settled during current year:		, ,				,				, ,
18.1 By payment in full	19	3,542,547			1	106,200			20	3,648,747
18.2 By payment on compromised claims										
18.3 Totals paid	19	3,542,547			1	106,200			20	3,648,747
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	19	3,542,547			1	106,200			20	3,648,747
19. Unpaid Dec. 31, current year (16+17-18.6)	4	136,503			1	25,000			5	161,503
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	0 310	3 730 613 653		(a)		3/1 277 300			0 310	3,773,890,953
21. Issued during year	479	190 502 713		(a)						
22. Other changes to in force (Net)										(176,386,20
23. In force December 31 of current year	9.172			(a)		34.687.100			9.172	3.788.007.465

 current year
 9,172
 3,753,320,365
 (a)
 34,687,100
 9,172
 3,7

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

ACCIDENT AND HEALTH INSURANCE

	•	CODEN AND	IILALIII IIIOOI	MITOL		
		1	2	3	4	5
				Policyholder Dividends		
				Paid, Refunds to		
			Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only					
	All other (b)					
	Totals (sum of Lines 25.1 to 25.5)			· · · · · · · · · · · · · · · · · · ·		
∠0.	10tals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.0)	l	l			



DIRECT BUSINESS IN THE STATE OF Delaware

DURING THE YEAR 2019

14/110	Group Code 0028	LI	FE INSURANCE	E	NAIC Compa	any Code 72222
	DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
		236,188				236,188
		600				600
			XXX		XXX	
5.	Totals (Sum of Lines 1 to 4)	236,788				236,788
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS urance:					
	Paid in cash or left on deposit					
	Applied to pay renewal premiums					
	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.5	Totals (Sum of Lines 6.1 to 6.4)					
Annuiti						
	Paid in cash or left on deposit					
7.1	Applied to provide paid-up annuities					
	Other					
-	Totals (Sum of Lines 7.1 to 7.3)					
	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	100 000				100 000
	Matured endowments					100,000
						39.072
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	AU 0 1 C1 1 11 10 1					
15.	Totals	139,072				139,072
	DETAILS OF WRITE-INS	,				,
1301.						
1302.						
1303.						
1398.	Summary of Line 13 from overflow page					
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

)rdinary	_	redit Life and Individual)		Group	ı	ndustrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4	5	6	7	8	9	10
MATURED ENDOWMENTS INCURRED	No. of Pols. & Certifs.	Amount	Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior										
year 17. Incurred during current year Settled during current year:	1	100,000							1	100,000
18.1 By payment in full	1	100 000							1	100.000
18.2 By payment on									'	
compromised claims	1	100,000							1	100,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	1	100,000							1	100,000
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT 20. In force December 31, prior					No. of Policies					
year	249	92 384 489		(a)		135 100			249	92,519,589
21. Issued during year	26	8,550,000							26	8,550,000
22. Other changes to in force (Net)									(11)	(4,665,93
23. In force December 31 of current year	264	96.268.550		(a)		135.100			264	96.403.650

 current year
 264
 96,268,550
 (a)
 135,100
 264

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

ACCIDENT AND HEALTH INSURANCE

	•		HEALIH MOOI	U 1110E		
		1	2	3	4	5
	·			Policyholder Dividends		
	ļ			Paid, Refunds to		
	ļ		Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only					
	All other (b)					
	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					



DIRECT BUSINESS IN THE STATE OF District of Columbia

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE		NAIC Compa	ny Code 72222
	DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.	Life insurance	273,150		1,046		274 , 196
2.						
3.			XXX		XXX	
4.	re					
5.	Totals (Sum of Lines 1 to 4)	273,150		1,046		274,196
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
	nsurance:					
6.1						
6.2						
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4	Other					
	Totals (Sum of Lines 6.1 to 6.4)					
Annu						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					
10.						
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	78,787				78,787
13.	Aggregate write-ins for miscellaneous direct claims	,				
14.	All -4b b £t4 4 t4 4 4 b 4b -					
15.	Totals	78,787				78,787
	DETAILS OF WRITE-INS	,				,
1301	·					
1302						
1303						
1398	Summary of Line 13 from overflow page					
	. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					
	1	Credit Life	<u> </u>		<u>-</u>	
	T I	U.rean Hite		1		

		Ordinary		Credit Life and Individual)		Group		ndustrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4	5	6	7	8	9	10
MATURED ENDOWMENTS INCURRED	No. of Pols. & Certifs.	Amount	Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amazunt
16. Unpaid December 31, prior	Certiis.	Amount	Ceruis.	Amount	Ceruis.	Amount	Certiis.	Amount	Ceruis.	Amount
year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior										
year	233	150,254,820		(a)					233	150, 254, 82
21. Issued during year	12	6,700,000							12	6,700,00
22. Other changes to in force (Net)	(12)	(4,297,928)							(12)	(4,297,92
23. In force December 31 of current year	233	152.656.892		(a)					233	152.656.89

 current year
 233
 152,656,892
 (a)
 233
 1

 (a) Includes Individual Credit Life Insurance prior year \$

 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$

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

 current year \$
 current year \$

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

ACCIDENT AND HEALTH INSURANCE

	/ (O O I D E I (I / (I I D		V		
	1	2	3	4	5
			Policyholder Dividends		
			Paid, Refunds to		
		Direct Premiums	Members or Credited		Direct Losses
	Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fe	96				
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25	i.6)				



DIRECT BUSINESS IN THE STATE OF Florida

DURING THE YEAR 2019

	Group Code 0028	1.1	FE INSURANCE			ny Code 72222
NAIC	Gloup Code 0020	1	2	3	4 NAIC Compa	5
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	ordinary	Credit Life (Group and Individual)	Group	4 Industrial	Total
1.		5,228,119	and marriadary	004.000		5,462,728
2.		553,824				553.824
3.					XXX	,
4.						
5.	Totals (Sum of Lines 1 to 4)	5,781,943		234,609		6,016,552
Life in	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS ISUIRANCE:	, ,		,		, ,
	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4						
	,					
Annui						
7.1						
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,709,998		343,600		2,053,598
10.	Matured endowments					
11.	Annuity benefits					, ,
12.		1,037,896				1,037,896
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14		5,270				5,270
	Totals	4.928.602		343.600		5.272.202
	DETAILS OF WRITE-INS	4,020,002		040,000		0,272,202
1301						
1302					<u> </u>	
1303						
1398.	Summary of Line 13 from overflow page					
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

				Credit Life						
	C	Ordinary	(Group	and Individual)		Group	li li	ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND			No. of							
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year	3	743,093							3	743,093
17. Incurred during current year	22	1,316,074			6	439 , 100			28	1,755,174
Settled during current year:										
18.1 By payment in full	21	1.709.998			5	343.600			26	2.053.598
18.2 By payment on										,,
compromised claims	,									
compromised claims	21	1,709,998			5	343,600			26	2,053,598
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	21	1,709,998			5	343,600			26	2,053,598
19. Unpaid Dec. 31, current										
year (16+17-18.6)	4	349,169			1	95,500			5	444,669
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	5,823	1,771,825,796		(a)		30 , 334 , 500			5,823	1,802,160,296
21. Issued during year	383	122,735,000							383	122,735,000
22. Other changes to in force										
(Net)	(240)	(27,811,830)				(657,500)			(240)	(28,469,330
23. In force December 31 of		1 000 710 000				00 077 000			5 000	1 000 405 00
current year	5,966	1,866,748,966		(a)		29,677,000			5,966	1,896,425,96

ouricit your	0,000	1,000,110,000	(a)		20,011,000			0,00	٠,٠
(a) Includes Individual Credit Life I	nsurance p	orior year \$, C	urrent year \$					
Includes Group Credit Life Insu	irance Loai	ns less than or equa	I to 60 months at issu	ie, prior year \$, Cl	urrent year \$		
Loans greater than 60 months	at issue Bl	UT NOT GREATER	THAN 120 MONTHS	, prior year \$, Cl	urrent year \$		

ACCIDENT AND HEALTH INSURANCE

	•	CODEN AND	IILALIII IIIOOI	MITOL		
		1	2	3	4	5
				Policyholder Dividends		
				Paid, Refunds to		
			Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only					
	All other (b)					
	Totals (sum of Lines 25.1 to 25.5)			· · · · · · · · · · · · · · · · · · ·		
∠0.	10tals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.0)	l	l			



DIRECT BUSINESS IN THE STATE OF Georgia

DURING THE YEAR 2019

	Group Code 0028	LI	FE INSURANCE		NAIC Company Code 7222		
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5	
1.		3,904,191		75.547		3,979,738	
2.	Annuity considerations					263,413	
3.	Deposit-type contract funds		XXX		XXX		
4.							
5.	Totals (Sum of Lines 1 to 4)	4,167,604		75,547		4,243,151	
Life in	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS asurance:						
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period						
6.4	Other						
6.5							
Annu	ities:						
7.1	Paid in cash or left on deposit						
7.2	Applied to provide paid-up annuities						
7.3	Other						
7.4							
8.	Grand Totals (Lines 6.5 plus 7.4)						
	DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits			114,600		3,440,397	
10.	Matured endowments						
11.	Annuity benefits						
12.		160,919				160,919	
		10,381				10,381	
15.	Totals	3,608,814		114,600		3,723,414	
	DETAILS OF WRITE-INS						
1301.							
1302.							
1303.							
	Summary of Line 13 from overflow page						
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)						

		Ordinary		redit Life and Individual)		Group	In	dustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND		_	No. of	•		•		-	-	
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year	3	450 , 194							3	450 , 19
17. Incurred during current year	11	2,941,000			2	175,300			13	3,116,30
Settled during current year:										
18.1 By payment in full	12	3,325,797			1	114,600			13	3,440,39
18.2 By payment on compromised claims										
18.3 Totals paid	12	3,325,797			1	114,600			13	3,440,39
18.4 Reduction by compromise							L			
18.5 Amount rejected									_	
18.6 Total settlements	12	3.325.797			1				13	3,440,39
19. Unpaid Dec. 31. current		, , === , ,								
year (16+17-18.6)	2	65,397			1	60,700			3	126,09
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	4 410	1 664 100 972		(a)		0 759 400			4 410	1,673,859,27
21. Issued during year	1 ,418	220 625 073		(a)						238,625,87
22 Other changes to in force									023	∠აი,∪∠ე,8/
22. Other changes to in force (Net)	(308)	(71,072,028)				573,700			(308)	(70,498,32
23. In force December 31 of current year	4.734	1.831.654.718		(a)		10.332.100			4.734	1.841.986.8

 current year
 4,734
 1,831,654,718
 (a)
 10,332,100
 4,734
 1,8

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

ACCIDENT AND HEALTH INSURANCE

	/ (O O I D E I (I / (I I D		V		
	1	2	3	4	5
			Policyholder Dividends		
			Paid, Refunds to		
		Direct Premiums	Members or Credited		Direct Losses
	Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fe	96				
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25	i.6)				



DIRECT BUSINESS IN THE STATE OF Hawaii

DURING THE YEAR 2019

NAIC Group Code 0028	LI	FE INSURANCE		NAIC Compa	ny Code 72222
DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
o	33,393		1,277		34,67
:					
. <u>-</u>		XXX		XXX	
Other considerations Totals (Sum of Lines 1 to 4)	33.393		4 077	······	04.07
DIRECT DIVIDENDS TO	33,393		1,277		34,67
POLICYHOLDERS/REFUNDS TO MEMBERS Life insurance:					
6.1 Paid in cash or left on deposit					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID					
10. Matured endowments					
11. Annuity benefits	245				24
12. Surrender values and withdrawals for life contracts					
15. Totals	245				24
DETAILS OF WRITE-INS					
1302.					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					
abovey	Credit Life	L			

	Ordinary		_	Credit Life and Individual)		Group		ndustrial		Total
DIRECT DEATH BENEFITS AND	1	2	3	4	5	6	7	8	9	10
MATURED ENDOWMENTS INCURRED	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year										
Incurred during current year Settled during current year: 18.1 By payment in full										
18.2 By payment on compromised claims										
18.4 Reduction by compromise										
18.5 Amount rejected										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT 20. In force December 31, prior					No. of Policies					
year21. Issued during year	39	15,393,370		(a)		165,000			39	15,558,370
22. Other changes to in force (Net)						(5,000)			7	2,648,000
23. In force December 31 of current year	46	18,046,370		(a)		160,000			46	18,206,370

ACCIDENT AND HEALTH INSURANCE

	/ (O O I D E I (I / (I I D		V		
	1	2	3	4	5
			Policyholder Dividends		
			Paid, Refunds to		
		Direct Premiums	Members or Credited		Direct Losses
	Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fe	96				
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25	i.6)				



DIRECT BUSINESS IN THE STATE OF Idaho

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE	•	NAIC Compa	any Code /2222
		1	2	3	4	5
	DIRECT PREMIUMS		Credit Life (Group			
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.	Life insurance	188,813		8,538		197,351
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	188,813		8,538		197,351
	DIRECT DIVIDENDS TO					
	POLICYHOLDERS/REFUNDS TO MEMBERS					
	nsurance:					
	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the					
	endowment or premium-paying period					
6.4	Other					
	Totals (Sum of Lines 6.1 to 6.4)					
Annu						
7.1	Paid in cash or left on deposit					
	Applied to provide paid-up annuities					
7.3						
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits	7,061				7,061
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
	Totals	7.061				7,061
	DETAILS OF WRITE-INS	,				,
1301						
1303						
1398	Summary of Line 13 from overflow page					
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13					
	above)					

				Credit Life						
	O	rdinary	(Group	and Individual)		Group	l l	ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND			No. of							
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on										
compromised claims	,									
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current										
year (16+17-18.6)										
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	301	94,925,718		(a)		1, 102,800			301	96,028,518
21. Issued during year	23	8,100,000							23	8, 100,000
22. Other changes to in force										
(Net)	(16)	(7,762,515)				143,000			(16)	(7,619,51
23. In force December 31 of										
current year	308	95,263,203		(a)		1,245,800			308	96,509,00

L	ourront you.		**,,	(α)			.,,			
((a) Includes Individual Credit Life I	nsurance p	rior year \$, current	year \$				
	Includes Group Credit Life Insu	rance Loai	ns less than or equ	al to 60 month	ns at issue, prio	r year \$, C	urrent year \$	
	Loans greater than 60 months	at issue Bl	JT NOT GREATER	R THAN 120 M	MONTHS, prior	year \$, C	urrent year \$	

ACCIDENT AND HEALTH INSURANCE

	•	CODEN AND	IILALIII IIIOOI	MITOL		
		1	2	3	4	5
				Policyholder Dividends		
				Paid, Refunds to		
			Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only					
	All other (b)					
	Totals (sum of Lines 25.1 to 25.5)			· · · · · · · · · · · · · · · · · · ·		
∠0.	10tals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.0)	l	l			



DIRECT BUSINESS IN THE STATE OF Illinois

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	LE INSOKANCE	_	NAIC Compa	iny Code /2222
		1	2	3	4	5
	DIRECT PREMIUMS		Credit Life (Group			
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.	Life insurance					1,672,468
2.	Annuity considerations	58,082				58,082
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	1,684,556		45,994		1,730,550
	DIRECT DIVIDENDS TO					
	POLICYHOLDERS/REFUNDS TO MEMBERS					
Life in	surance:					
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the					
	endowment or premium-paying period					
6.4	Other					
Annui						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,447,940		67,800		1,515,740
10.	Matured endowments					
11.	Annuity benefits					98,281
12.	Surrender values and withdrawals for life contracts	216,011				216,011
13.	Aggregate write-ins for miscellaneous direct claims					
	All other benefits, except accident and health					
15.	Totals	1,762,232		67,800		1,830,032
	DETAILS OF WRITE-INS					
1301.						
1302.						
1303.						
1398.	Summary of Line 13 from overflow page					
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13					
	above)					

	(Ordinary		Credit Life and Individual)		Group	li li	ndustrial		Total
DIRECT DEATH	1	2	3	A	5	6	7	8	9	10
BENEFITS AND		_	No. of	7	0	O	'	O	3	10
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior									9 3 7 3 1 3	
vear	1	6,940							1	6,940
17. Incurred during current year	3	1,441,000			1	67,800			4	1,508,800
Settled during current year:		, ,				,				, ,
18.1 By payment in full	4	1.447.940			1	67.800			5	1.515.740
18.2 By payment on compromised claims										
18.3 Totals paid	4	1.447.940			1	67,800			5	1,515,740
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	4	1.447.940			1	67.800			5	1,515,740
19. Unpaid Dec. 31, current year (16+17-18.6)		, ,				,				,,
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	1 606	764 457 661		(0)		5 0/1 100			1 606	770,398,761
21. Issued during year	000, ا					5,941,100			1,000	48,716,000
00 04									93	40,710,000
22. Other changes to in force (Net)	(111)	(41,741,867)				145,700			(111)	(41,596,167
23. In force December 31 of current year	1.588	771.431.794		(a)		6.086.800			1.588	777.518.594

	ourroin your	.,	,,	(α)			-,,			.,	
(a	a) Includes Individual Credit Life I	nsurance p	rior year \$, current y	ear\$					
	Includes Group Credit Life Insu	ırance Loar	ns less than or equ	ial to 60 month	ns at issue, prior	year \$, CI	urrent year \$		
	Loans greater than 60 months	at issue BL	IT NOT GREATER	R THAN 120 M	MONTHS, prior y	/ear\$, CI	urrent year \$		

ACCIDENT AND HEALTH INSURANCE

	ACCIDENT AND HEALTH INCORANCE												
		1	2	3	4	5							
				Policyholder Dividends									
				Paid, Refunds to									
			Direct Premiums	Members or Credited		Direct Losses							
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred							
24.	Group Policies (b)												
24.1	Federal Employees Health Benefits Plan premium (b)												
24.2	Credit (Group and Individual)												
24.3	Collectively renewable policies/certificates (b)												
24.4	Medicare Title XVIII exempt from state taxes or fee												
	Other Individual Policies:												
25.1	Non-cancelable (b)												
	Guaranteed renewable (b)												
	Non-renewable for stated reasons only (b)												
	Other accident only												
	All other (b)												
	Totals (sum of Lines 25.1 to 25.5)			· · · · · · · · · · · · · · · · · · ·									
∠0.	10tals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.0)	l	l										



DIRECT BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2019

IAIC	Group Code 0028	LI	FE INSURANCE		NAIC Compa	ny Code 72222
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life insurance	513,608		32,155		545,76
2.	Annuity considerations	17,994				17,99
3.	Deposit-type contract funds		XXX		XXX	
4.						
5.	Totals (Sum of Lines 1 to 4)	531,602		32,155		563,75
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS asurance:					
6.1					·······	
	Applied to pay renewal premiums					
	endowment or premium-paying period					
	Other Totals (Sum of Lines 6.1 to 6.4)					
o.s Annu						
7.1						
7.3						
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					
10.						
11.		216,562				216.56
12.		24,429				,
13.	Aggregate write-ins for miscellaneous direct claims	, , , , , , , , , , , , , , , , , , , ,				,
14.	All other benefits, except accident and health	1,198				1 , 19
15.	Totals	242,189				242,18
	DETAILS OF WRITE-INS					
1301						
1302	·					
1303						
1398	. Summary of Line 13 from overflow page					
1399	. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

	C	Ordinary		redit Life and Individual)		Group	lr	ndustrial		Total
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS	No. of Pols. &	2	3 No. of Ind.Pols. & Gr.	4	5 No. of	6	7 No. of Pols. &	8	9 No. of Pols. &	10
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims	,									
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior										
year	680	277,366,795		(a)		4 , 153 , 400				
21. Issued during year	37	14, 132,000							37	14,132,0
22. Other changes to in force (Net)	(51)	(13,355,595)				596,700			(51)	(12,758,8
23. In force December 31 of current year	666	278.143.200		(a)		4.750.100			666	282.893.3

 current year
 666
 278,143,200
 (a)
 4,750,100
 666
 2

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

ACCIDENT AND HEALTH INSURANCE

	ACCIDENT AND TIEAETT INSCRANCE													
		1	2	3	4	5								
	·			Policyholder Dividends										
	ļ			Paid, Refunds to										
	ļ		Direct Premiums	Members or Credited		Direct Losses								
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred								
24.	Group Policies (b)													
24.1	Federal Employees Health Benefits Plan premium (b)													
24.2	Credit (Group and Individual)													
24.3	Collectively renewable policies/certificates (b)													
24.4	Medicare Title XVIII exempt from state taxes or fee													
	Other Individual Policies:													
25.1	Non-cancelable (b)													
	Guaranteed renewable (b)													
	Non-renewable for stated reasons only (b)													
	Other accident only													
	All other (b)													
	Totals (sum of Lines 25.1 to 25.5)													
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)													



DIRECT BUSINESS IN THE STATE OF Iowa

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE		NAIC Company Code 72222		
	DIRECT PREMIUMS	1 Ordinani	2 Credit Life (Group and Individual)	3	4	5 Total	
1.	AND ANNUITY CONSIDERATIONS Life insurance	Ordinary 115,368	,	Group	Industrial	Total 115,368	
2.						,	
3.	_ 1						
3. 4							
4. 5.	Totals (Sum of Lines 1 to 4)	115.368				115.368	
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS asurance:	113,300				110,00	
6.1	Paid in cash or left on deposit						
	Applied to provide paid-up additions or shorten the endowment or premium-paying period						
6.4	Other						
6.5	Totals (Sum of Lines 6.1 to 6.4)						
Annui							
7.1	Paid in cash or left on deposit						
7.2	Applied to provide paid-up annuities						
7.3	Other						
7.4	Totals (Sum of Lines 7.1 to 7.3)						
8.	Grand Totals (Lines 6.5 plus 7.4)						
	DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	109,000				109,000	
10.							
11.		2,559				2,559	
12.							
14.	All other benefits, except accident and health						
15.	Totals	111,559				111,559	
	DETAILS OF WRITE-INS						
1301.							
1302.							
1303.	·						
1398.	Summary of Line 13 from overflow page						
1399.	. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)						
		Credit Life					

	_			Credit Life		_	l .			
	O	rdinary	(Group	and Individual)		Group	l)	ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND			No. of							
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year										
17. Incurred during current year	1	109.000							1	109.000
Settled during current year:		,								,
18.1 By payment in full	1	100 000							1	109.000
18.2 By payment on		100,000								100,000
compromised claims 18.3 Totals paid	1	100 000							1	109.000
										109,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	1	109,000							1	109,000
Unpaid Dec. 31, current										
year (16+17-18.6)										
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	173	68,330,597		(a)					173	68,330,597
21. Issued during year	22	8,650,000							22	8,650,000
22. Other changes to in force										
(Net)	(15)	(6, 189, 062)							(15)	(6, 189, 062
23. In force December 31 of		, , -, ,							,	. , -,
current year	180	70,791,535		(a)					180	70,791,535

ı	ouricht your	100	10,101,000	(a)					100	
((a) Includes Individual Credit Life I	nsurance p	orior year \$, current ye	ear\$	 			
	Includes Group Credit Life Insu	ırance Loa	ns less than or equ	al to 60 months	at issue, prior	year \$, Cl	urrent year \$		
	Loans greater than 60 months	at issue Bl	JT NOT GREATER	R THAN 120 MC	NTHS, prior ye	ear\$, Cl	urrent year \$		

ACCIDENT AND HEALTH INSURANCE

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



DIRECT BUSINESS IN THE STATE OF Kansas

DURING THE YEAR 2019

NAIC Group Code 0028		LI	FE INSURANCE	NAIC Company Code 72222		
		1	2	3	4	5
	DIRECT PREMIUMS		Credit Life (Group			
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.	Life insurance	171,106				171,106
2.	Annuity considerations	613,531				613,531
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	784.637				784.637
	DIRECT DIVIDENDS TO	,				,
	POLICYHOLDERS/REFUNDS TO MEMBERS					
Life ir	surance:					
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
	Applied to provide paid-up additions or shorten the					
	endowment or premium-paying period					
6.4	Other					
	Totals (Sum of Lines 6.1 to 6.4)					
Annu						
7.1	Paid in cash or left on deposit					
	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (Sum of Lines 7.1 to 7.3)					
	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits	11,677				11,677
	Surrender values and withdrawals for life contracts	709				709
13.	Aggregate write-ins for miscellaneous direct claims					
	and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	12,386				12,386
	DETAILS OF WRITE-INS					
1301						
1302						
1303						
1398	Summary of Line 13 from overflow page					
1399	Totals (Lines 1301 thru 1303 plus 1398) (Line 13					
	above)					
		Credit Life				

				redit Life						
	0	rdinary	(Group	and Individual)		Group	li	ndustrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4	5	6	7	8	9	10
MATURED ENDOWMENTS	No. of Pols. &		Ind.Pols. & Gr.		No. of		No. of Pols. &		No. of Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims	,									
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior	000	00 470 050							000	00 470 05
year	222	88,473,953		(a)					222	88,473,95
21. Issued during year	30	10,075,000							30	10,075,00
22. Other changes to in force (Net)	(16)	(3,054,000)							(16)	(3,054,00
23. In force December 31 of current year	236	95,494,953		(a)					236	95,494,95

ouricit your	_00	00, 101,000	(a)					_00	
(a) Includes Individual Credit Life I	nsurance p	rior year \$, current y	ear\$	 			
Includes Group Credit Life Insu	ırance Loa	ns less than or equ	al to 60 months	at issue, prior	year \$, Cl	urrent year \$		
Loans greater than 60 months	at issue Bl	JT NOT GREATER	R THAN 120 MC	ONTHS, prior y	/ear\$, Cl	urrent year \$		

ACCIDENT AND HEALTH INSURANCE

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



DIRECT BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE		NAIC Comp	any Code 72222
		1	2	3	4	5
	DIRECT PREMIUMS		Credit Life (Group	_		
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group 799	Industrial	Total
1.		352,534				353,333
2.	Annuity considerations					10,000
3. 4	Deposit-type contract funds		XXX		XXX	
4. 5.	Other considerations			799		000,000
5.	DIRECT DIVIDENDS TO	362,534		799		363,333
	POLICYHOLDERS/REFUNDS TO MEMBERS surance:					
	Paid in cash or left on deposit					
	Applied to pay renewal premiums					
	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4	Other					
	Totals (Sum of Lines 6.1 to 6.4)					
Annui						
7.1						
	Applied to provide paid-up annuities					
7.4	Other					
8.	Totals (Sum of Lines 7.1 to 7.3)					
0.	DIRECT CLAIMS AND BENEFITS PAID					
9	Death benefits	10,000				10,000
10.	Matured endowments					10,000
11.		116				116
12.	Surrender values and withdrawals for life contracts	12,506				12,506
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health	1,993				1,993
	Totals	24.615				24.615
	DETAILS OF WRITE-INS	2.,0.0				2.,0.0
1301.						
1302.						
1303.						
1398.	Summary of Line 13 from overflow page					
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					
						·

	0	rdinarv		redit Life and Individual)		Group	In	dustrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4	5	6	7	8	9	10
MATURED ENDOWMENTS INCURRED	No. of Pols. & Certifs.	Amount	Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior										
year	1	10,000							1	10,000
18.1 By payment in full18.2 By payment on									1	10,000
compromised claims	1	10,000								10,000
18.4 Reduction by compromise										
18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6)	1	10,000							1	10,000
POLICY EXHIBIT 20. In force December 31, prior					No. of Policies					
vear	433	150,292,635		(a)		103,200			433	150,395,835
21. Issued during year	32	9,020,000		· ·						9,020,000
22. Other changes to in force (Net)						3,300			(20)	(7,909,410
23. In force December 31 of current year	445	151,399,925		(a)		106,500			445	151,506,425

Includes Individual Credit Life Insurance prior year \$, current year \$			
Includes Group Credit Life Insurance Loans less than o	r equal to 60 months at issue, prior year \$,	current year \$	
Loans greater than 60 months at issue BUT NOT GREA	ATER THAN 120 MONTHS, prior year \$,	current year \$	

ACCIDENT AND HEALTH INSURANCE

	ACCIDENT AND HEAETH INSCRINCE											
		1	2	3	4	5						
				Policyholder Dividends								
				Paid, Refunds to								
			Direct Premiums	Members or Credited		Direct Losses						
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred						
24.	Group Policies (b)											
24.1	Federal Employees Health Benefits Plan premium (b)											
24.2	Credit (Group and Individual)											
24.3	Collectively renewable policies/certificates (b)											
24.4	Medicare Title XVIII exempt from state taxes or fee											
	Other Individual Policies:											
25.1	Non-cancelable (b)											
	Guaranteed renewable (b)											
	Non-renewable for stated reasons only (b)											
	Other accident only											
	All other (b)											
	Totals (sum of Lines 25.1 to 25.5)			· · · · · · · · · · · · · · · · · · ·								
∠0.	10tals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.0)	l	l									



DIRECT BUSINESS IN THE STATE OF Louisiana 0028

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE		NAIC Company Code 72222		
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS Life insurance Annuity considerations Deposit-type contract funds Other considerations Totals (Sum of Lines 1 to 4) DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Surance: Paid in cash or left on deposit Applied to pay renewal premiums Applied to provide paid-up additions or shorten the endowment or premium-paying period Other Totals (Sum of Lines 6.1 to 6.4) ies: Paid in cash or left on deposit Applied to provide paid-up annuities Other Totals (Sum of Lines 7.1 to 7.3) Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID Death benefits Matured endowments Annuity benefits Surrender values and withdrawals for life contracts Aggregate write-ins for miscellaneous direct claims and benefits paid All other benefits, except accident and health Totals DETAILS OF WRITE-INS Summary of Line 13 from overflow page	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total	
1.		294.289		r		294.28	
2.		10.100				10 . 10	
3.	_ 1						
4.							
5.	Totals (Sum of Lines 1 to 4)	304,389				304,38	
	POLICYHOLDERS/REFUNDS TO MEMBERS asurance:						
	Applied to provide paid-up additions or shorten the						
6.4	Other						
6.5	T . I . (0 . (1) . 0 . (1)						
Annui	ities:						
7.2	Applied to provide paid-up annuities						
7.3	Other						
7.4	Totals (Sum of Lines 7.1 to 7.3)						
8.							
	DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	99,876				99,87	
10.							
11.	, , , , , , , , , , , , , , , , , , , ,	26,077				26,07	
12.		42,345				42,34	
13.	and benefits paid						
	, i						
15.		168,298				168,29	
1301.	·						
1302.	·						
1303.					-		
	. Totals (Lines 1301 thru 1303 plus 1398) (Line 13				1		

		•		•		•		•		
		Ordinary				Group		ndustrial		Total
DIDECT DEATH	1			and individual)	- -		7		_	
DIRECT DEATH	1	2		5	6	/	8	9	10	
BENEFITS AND									No. of	
MATURED	No. of						No. of Pols. &	No. of		
ENDOWMENTS	Pols. &								Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year										
17. Incurred during current year	2	175,000							2	175,000
Settled during current year:										
18.1 By payment in full	1	99.876							1	99.876
18.2 By payment on										,
compromised claims										
18.3 Totals paid	1	99,876							1	99,876
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	1	99,876							1	99,876
19. Unpaid Dec. 31, current										
year (16+17-18.6)	1	75,124							1	75, 124
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	275	104,956,673		(a)					275	104,956,673
21. Issued during year	24	5,932,000							24	5,932,000
22. Other changes to in force										
(Net)	(24)	(7,341,828)							(24)	(7,341,828)
23. In force December 31 of										
current year	275	103,546,845		(a)	1				275	103,546,845

L	ourront you.		,	(α)						
((a) Includes Individual Credit Life I	nsurance pi	rior year \$, current	year \$	 		•	
	Includes Group Credit Life Insu	rance Loan	is less than or equ	ial to 60 month	ns at issue, prio	r year \$, C	urrent year \$		
	Loans greater than 60 months	at issue BU	IT NOT GREATER	R THAN 120 M	MONTHS, prior	year \$, C	urrent year \$		

ACCIDENT AND HEALTH INSURANCE

	7.001521(1.7415.112.4211111001134102											
		1	2	3	4	5						
				Policyholder Dividends								
				Paid, Refunds to								
			Direct Premiums	Members or Credited		Direct Losses						
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred						
24.	Group Policies (b)											
24.1	Federal Employees Health Benefits Plan premium (b)											
24.2	Credit (Group and Individual)											
24.3	Collectively renewable policies/certificates (b)											
24.4	Medicare Title XVIII exempt from state taxes or fee											
	Other Individual Policies:											
25.1	Non-cancelable (b)											
	Guaranteed renewable (b)											
25.3	Non-renewable for stated reasons only (b)											
25.4	Other accident only											
25.5	All other (b)											
	Totals (sum of Lines 25.1 to 25.5)											
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)											



DIRECT BUSINESS IN THE STATE OF Maine

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE		NAIC Compar	ny Code 72222
		1	2	3	4	5
	DIRECT PREMIUMS		Credit Life (Group			
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.	Life insurance	853,383		38,780		892, 163
2.	Annuity considerations	83,705				
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	937,088		38,780		975,868
	DIRECT DIVIDENDS TO					
	POLICYHOLDERS/REFUNDS TO MEMBERS					
	nsurance:					
6.1						
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4	Other					
	Totals (Sum of Lines 6.1 to 6.4)					
Annu						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	805.044		109.800		914.844
10.		,		·		,
11.	Annuity benefits	146,892				146.892
12.		66,359				66,359
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					,
14.	All other benefits, except accident and health	12,086				12,086
15.	Totals	1,030,381		109,800		1,140,181
	DETAILS OF WRITE-INS	, ,		, i		
1301.						
1302.						
1303						
1398						
	. Totals (Lines 1301 thru 1303 plus 1398) (Line 13					

above)	03 plus 1390	b) (Lille 13								
	0	rdinary	_	Credit Life and Individual)		Group	Ir	ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND MATURED	No. of		No. of Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year	1	10,044							1	10,044
17. Incurred during current year	4	795,000			2	172,400			6	967,400
Settled during current year:										
18.1 By payment in full	5	805,044			1	109,800			6	914,844
18.2 By payment on compromised claims										
compromised claims		.805,044				109,800			6	914,844
18.4 Reduction by compromise					L l					
18.5 Amount rejected										
18.6 Total settlements	5	805,044			1	109,800			6	914,844
19. Unpaid Dec. 31, current year (16+17-18.6)					1 1	62,600			1	62.600
year (10 - 11 - 10.0)					No. of	52,555				52,555
POLICY EXHIBIT					Policies					
20. In force December 31, prior year	999	364 886 868		(a)		5 009 200			999	369,896,068
21. Issued during year	50	16.321.734		(~)		, 5.5.5,200				16,321,734
22. Other changes to in force (Net)										(16,344,424)
23. In force December 31 of current year	990	365,096,878		(a)		4,776,500			990	369,873,378

L	ourront you.		,	(α)			.,,			
((a) Includes Individual Credit Life I	nsurance p	orior year \$, current y	/ear \$				
	Includes Group Credit Life Insu	rance Loa	ns less than or equ	ual to 60 month	ns at issue, prio	year \$, Cl	urrent year \$	
	Loans greater than 60 months	at issue Bl	JT NOT GREATE	R THAN 120 M	MONTHS, prior y	/ear\$, Cl	urrent year \$	

ACCIDENT AND HEALTH INSURANCE

	ACCIDENT AND	IILALIII IIIOO	IVAITOL		
	1	2	3	4	5
			Policyholder Dividends		
			Paid, Refunds to		
		Direct Premiums	Members or Credited		Direct Losses
	Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fe	ee				
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)			-		
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25	(.6)				



DIRECT BUSINESS IN THE STATE OF Maryland

DURING THE YEAR 2019

1	72222	NAIC Company Code		FE INSURANCE	Group Code 0028	NAIC Group Code 0028				
AND ANNUITY CONSIDERATIONS	5	4	3	2	1					
1. Life insurance		_	_							
2. Annuity considerations 50,147 3. Deposit-type contract funds 4. Other considerations 5. Totals (Sum of Lines 1 to 4) 2,155,002 60,091 7.	Total									
3. Deposit-type contract funds	, ,		60,091							
4. Other considerations 5. Totals (Sum of Lines 1 to 4) 2,155,002 60,091 20 10										
5. Totals (Sum of Lines 1 to 4)		XXX		XXX			-			
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Life insurance: 6.1 Paid in cash or left on deposit 6.2 Applied to pay renewal premiums 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period 6.4 Other 6.5 Totals (Sum of Lines 6.1 to 6.4) Annuities: 7.1 Paid in cash or left on deposit 7.2 Applied to provide paid-up annuities 7.3 Other 7.4 Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits 10. Matured endowments 11. Annuity benefits 12. Surrender values and withdrawals for life contracts 13. Aggregate write-ins for miscellaneous direct claims and benefits paid 14. All other benefits, except accident and health 11,740										
POLICYHOLDERS/REFUNDS TO MEMBERS Life insurance: 6.1 Paid in cash or left on deposit 6.2 Applied to pay renewal premiums 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period 6.4 Other 6.5 Totals (Sum of Lines 6.1 to 6.4) Annuities: 7.1 Paid in cash or left on deposit 7.2 Applied to provide paid-up annuities 7.3 Other 7.4 Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits 10. Matured endowments 11. Annuity benefits 12. Surrender values and withdrawals for life contracts 13. Aggregate write-ins for miscellaneous direct claims and benefits paid 14. All other benefits, except accident and health 11.740	2,215,093		60,091		2,155,002	,	5.			
Life insurance: 6.1 Paid in cash or left on deposit 6.2 Applied to pay renewal premiums 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period 6.4 Other 6.5 Totals (Sum of Lines 6.1 to 6.4) Annuities: 7.1 Paid in cash or left on deposit 7.2 Applied to provide paid-up annuities 7.3 Other 7.4 Totals (Sum of Lines 7.1 to 7.3) 7.4 Totals (Sum of Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits 874,815 10. Matured endowments 11. Annuity benefits 11. Annuity benefits 41,616 12. Surrender values and withdrawals for life contracts 199,648 13. Aggregate write-ins for miscellaneous direct claims and benefits, except accident and health 11,740										
6.2 Applied to pay renewal premiums 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period 6.4 Other 6.5 Totals (Sum of Lines 6.1 to 6.4) Annutities: 7.1 Paid in cash or left on deposit 7.2 Applied to provide paid-up annuities 7.3 Other 7.4 Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits 10. Matured endowments 11. Annuity benefits 12. Surrender values and withdrawals for life contracts 13. Aggregate write-ins for miscellaneous direct claims and benefits paid 14. All other benefits, except accident and health 11,740							Life in			
6.2 Applied to pay renewal premiums 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period 6.4 Other 6.5 Totals (Sum of Lines 6.1 to 6.4) Annutities: 7.1 Paid in cash or left on deposit 7.2 Applied to provide paid-up annuities 7.3 Other 7.4 Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits 10. Matured endowments 11. Annuity benefits 12. Surrender values and withdrawals for life contracts 13. Aggregate write-ins for miscellaneous direct claims and benefits paid 14. All other benefits, except accident and health 11,740						Paid in cash or left on deposit	6.1			
endowment or premium-paying period 6.4 Other 6.5 Totals (Sum of Lines 6.1 to 6.4) Annuities: 7.1 Paid in cash or left on deposit 7.2 Applied to provide paid-up annuities 7.3 Other 7.4 Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits 10. Matured endowments 11. Annuity benefits 12. Surrender values and withdrawals for life contracts 13. Aggregate write-ins for miscellaneous direct claims and benefits, except accident and health 14. All other benefits, except accident and health 11,740							6.2			
6.4 Other 6.5 Totals (Sum of Lines 6.1 to 6.4) Annuities: 7.1 Paid in cash or left on deposit 7.2 Applied to provide paid-up annuities 7.3 Other 7.4 Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits						Applied to provide paid-up additions or shorten the endowment or premium-paying period	6.3			
Annuities: 7.1 Paid in cash or left on deposit 7.2 Applied to provide paid-up annuities 7.3 Other 7.4 Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits 10. Matured endowments 11. Annuity benefits 12. Surrender values and withdrawals for life contracts 13. Aggregate write-ins for miscellaneous direct claims and benefits paid 14. All other benefits, except accident and health 11,740						Other				
7.1 Paid in cash or left on deposit 7.2 Applied to provide paid-up annuities 7.3 Other 7.4 Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits 874,815 121,500 10. Matured endowments 11. Annuity benefits 12. Surrender values and withdrawals for life contracts 13. Aggregate write-ins for miscellaneous direct claims and benefits paid 14. All other benefits, except accident and health 11,740						Totals (Sum of Lines 6.1 to 6.4)	6.5			
7.2 Applied to provide paid-up annuities							Annui			
7.3 Other						Paid in cash or left on deposit	7.1			
7.4 Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits 874,815 121,500 10. Matured endowments 41,616 11. Annuity benefits 41,616 12. Surrender values and withdrawals for life contracts 199,648 13. Aggregate write-ins for miscellaneous direct claims and benefits paid 11,740 14. All other benefits, except accident and health 11,740						Applied to provide paid-up annuities	7.2			
7.4 Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits 874,815 121,500 10. Matured endowments 41,616 11. Annuity benefits 41,616 12. Surrender values and withdrawals for life contracts 199,648 13. Aggregate write-ins for miscellaneous direct claims and benefits paid 11,740 14. All other benefits, except accident and health 11,740						Other	7.3			
DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits						Totals (Sum of Lines 7.1 to 7.3)	7.4			
9. Death benefits 874,815 121,500 10. Matured endowments 41,616 12. Surrender values and withdrawals for life contracts 199,648 13. Aggregate write-ins for miscellaneous direct claims and benefits paid 11. All other benefits, except accident and health 11,740						Grand Totals (Lines 6.5 plus 7.4)	8.			
10. Matured endowments						DIRECT CLAIMS AND BENEFITS PAID				
10. Matured endowments	996,315		121,500		874,815	Death benefits	9.			
11. Annuity benefits 41,616 12. Surrender values and withdrawals for life contracts 199,648 13. Aggregate write-ins for miscellaneous direct claims and benefits paid 11,740 14. All other benefits, except accident and health 11,740							10.			
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	41,616						11.			
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	199,648				199,648	Surrender values and withdrawals for life contracts	12.			
, , , , , , , , , , , , , , , , , , , ,						Aggregate write-ins for miscellaneous direct claims	13.			
15. Totals 1,127,819 121,500	11,740				11,740	All other benefits, except accident and health	14.			
	1,249,319		121,500		1,127,819	Totals	15.			
DETAILS OF WRITE-INS						DETAILS OF WRITE-INS				
1301.							1301.			
1302.							1302.			
1303.							1303.			
1398. Summary of Line 13 from overflow page						. Summary of Line 13 from overflow page	1398.			
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)						. Totals (Lines 1301 thru 1303 plus 1398) (Line 13				

	0	rdinarv		redit Life and Individual)		Group	In	dustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND			No. of							
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year	1	500,000							1 .	500,000
17. Incurred during current year	4	775,000			1	121,500			5	896,500
Settled during current year:										
18.1 By payment in full	4	874.815			1	121.500			5	996.31
18.2 By payment on compromised claims										
18.3 Totals paid	4	874,815			1	121,500			5	996,315
18.4 Reduction by compromise	L L.						L L.			
18.5 Amount rejected									. [
18.6 Total settlements	4	874 815			1					
19. Unpaid Dec. 31. current										
year (16+17-18.6)	1	400, 185							1	400, 185
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	2 1/17	969 067 226		(a)		7 762 000			2 1/17	976 720 22
year21. Issued during year	220								228	876,729,236
00 046		95,065,257							228	95,065,25
22. Other changes to in force (Net)	(174)	(58,617,161)				54,100			(174)	(58,563,06
23. In force December 31 of current year	2.201	905.415.332		(a)		7.816.100			2.201	913.231.43

 current year
 2,201
 905,415,332
 (a)
 7,816,100
 2,201
 9

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

ACCIDENT AND HEALTH INSURANCE

	•	CODEN AND	IILALIII IIIOOI	MITOL		
		1	2	3	4	5
				Policyholder Dividends		
				Paid, Refunds to		
			Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only					
	All other (b)					
	Totals (sum of Lines 25.1 to 25.5)			· · · · · · · · · · · · · · · · · · ·		
∠0.	10tals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.0)	l	l			



DIRECT BUSINESS IN THE STATE OF Massachusetts

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE	NAIC Company Code 7222		
	DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.		12,180,339				13,029,069
2.		1,971,940				1,971,940
3.			XXX		XXX	
4.	F===	44 450 070		040.700		45.004.000
5.	Totals (Sum of Lines 1 to 4) DIRECT DIVIDENDS TO	14, 152, 279		848,730		15,001,009
Life in	POLICYHOLDERS/REFUNDS TO MEMBERS surrance:					
6.1	Paid in cash or left on deposit					
	Applied to pay renewal premiums					
	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4	Other					
	Totals (Sum of Lines 6.1 to 6.4)					
Annui						
7.1	Paid in cash or left on deposit					
7.3						
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	8,759,820		452,700		9,212,520
10.						
11.		2,934,517				2,934,517
12.		1,240,384				1,240,384
		27,692				27,692
15.	Totals	12,962,413		452,700		13,415,113
	DETAILS OF WRITE-INS					
1301.						
1302.						
1303.						
	Summary of Line 13 from overflow page					
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

	(Ordinary		redit Life and Individual)		Group	In	dustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND	-	_	No. of	•		•		-		
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year	6	715,874							6	715,87
year17. Incurred during current year	36	8,787,628			7	617,400			43	9,405,02
Settled during current year:										
18.1 By payment in full	36	8,759,820			5	452,700			41	9,212,52
18.2 By payment on compromised claims										
18.3 Totals paid	36	8,759,820			5	452,700			41	9,212,52
18.4 Reduction by compromise			L		L					
18.5 Amount rejected							L			
18.6 Total settlements	36	8.759.820			5	452.700			41	9,212,52
19. Unpaid Dec. 31, current		,,								, , , ,
year (16+17-18.6)	6	743,682			2	164,700			8	908,38
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior	12 026	E 750 500 007		(-)		112 050 600			12 026	E 067 470 40
year21. Issued during year	13,020	0,100,022,001		(a)		113,950,000			13,020	5,867,473,43
	917	402,505,882							917	462,565,88
22. Other changes to in force (Net)	(814)	(242,883,618)				8,162,500			(814)	(234,721,1
23. In force December 31 of current year	13.129	5.973.205.101		(a)		122.113.100			13.129	6.095.318.20

 current year
 13,129
 5,973,205,101
 (a)
 122,113,100
 13,129
 6,0

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

ACCIDENT AND HEALTH INSURANCE

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



DIRECT BUSINESS IN THE STATE OF Michigan

DURING THE YEAR 2019

2. Annuity considerations 4,200 3. Deposit-type contract funds XXX 4. Other considerations 5. Totals (Sum of Lines 1 to 4) 980,236 24,629 DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS	5 Total 1,000,665 4,200 4,200
AND ANNUITY CONSIDERATIONS Ordinary and Individual) Group Industrial	1,000,665
1. Life insurance 976,036 24,629 2. Annuity considerations 4,200 3. Deposit-type contract funds XXX XXX 4. Other considerations 5. Totals (Sum of Lines 1 to 4) 980,236 24,629 DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS	1,000,665
2. Annuity considerations 4,200 3. Deposit-type contract funds XXX 4. Other considerations 5. Totals (Sum of Lines 1 to 4) 980,236 24,629 DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS	4,200
3. Deposit-type contract funds	
4. Other considerations	
5. Totals (Sum of Lines 1 to 4) 980,236 24,629 DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS	1,004,865
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS	1,004,865
POLICYHOLDERS/REFUNDS TO MEMBERS	
Life insurance:	
6.1 Paid in cash or left on deposit	
6.2 Applied to pay renewal premiums	
6.3 Applied to provide paid-up additions or shorten the	
6.4 Other	
6.5 Totals (Sum of Lines 6.1 to 6.4)	
Annuities:	
7.1 Paid in cash or left on deposit	
7.2 Applied to provide paid-up annuities	
7.3 Other	
7.4 Totals (Sum of Lines 7.1 to 7.3)	
8. Grand Totals (Lines 6.5 plus 7.4)	
DIRECT CLAIMS AND BENEFITS PAID	
9. Death benefits	1,375,000
10. Matured endowments	
	7,917
12. Surrender values and withdrawals for life contracts 23,983	23,983
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	
14. All other benefits, except accident and health	
15. Totals 1,406,900	1,406,900
DETAILS OF WRITE-INS	
1301.	
1302.	
1303.	
1398. Summary of Line 13 from overflow page	
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	

	-) undin a m /	_	Credit Life		Craun	1	ndustrial		Total
		Ordinary		and Individual)		Group		ndustrial		
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND			No. of							
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year	4	1,375,000							4	1,375,000
Settled during current year:										
18.1 By payment in full	4	1,375,000							4	1,375,000
18.2 By payment on										
18.3 Totals paid	4	1,375,000							4	1,375,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	4	1,375,000							4	1,375,000
19. Unpaid Dec. 31, current year (16+17-18.6)										
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	1 , 168	474,269,683		(a)		3, 181, 300			1, 168	
21. Issued during year	73	31,265,000							73	31,265,000
22. Other changes to in force (Net)	(99)	(24,766,957)				(85,800)			(99)	(24,852,757)
23. In force December 31 of current year	1,142	480,767,726		(a)		3,095,500			1,142	483,863,226

(8	a) Includes Individual Credit Life I	nsurance pri	ior year \$, current	year \$	 			
	Includes Group Credit Life Insu	rance Loans	s less than or equ	ual to 60 month	ns at issue, pric	r year \$, CL	ırrent year \$	
	Loans greater than 60 months	at issue BUT	T NOT GREATE	R THAN 120 M	MONTHS, prior	year \$, CL	ırrent year \$	

ACCIDENT AND HEALTH INSURANCE

	•	ACCIDEIN AIND	IILALIII II100I	17-11-10-L		
		1	2	3	4	5
				Policyholder Dividends		
				Paid, Refunds to		
			Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only					
	All other (b)					
	Totals (sum of Lines 25.1 to 25.5)					
	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					



DIRECT BUSINESS IN THE STATE OF Minnesota

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE	NAIC Company Code 72222		
	·	1	2	3	4	5
	DIRECT PREMIUMS		Credit Life (Group			
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.		739,666		23,697		763,363
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.						
5.	Totals (Sum of Lines 1 to 4)	756,166		23,697		779,863
	DIRECT DIVIDENDS TO					
1 :6- :	POLICYHOLDERS/REFUNDS TO MEMBERS					
	surance:					
	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4	Other					
6.5	Totals (Sum of Lines 6.1 to 6.4)					
Annui						
	Paid in cash or left on deposit					
7.1	Applied to provide paid-up annuities					
7.3	Other					
	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
<u> </u>	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	815 000				815,000
10.	Matured endowments					013,000
	Annuity benefits					
12.		52,074				
	Aggregate write-ins for miscellaneous direct claims					
10.	and benefits paid					
14.	All other benefits, except accident and health					1,790
	Totals	869,464				869,464
	DETAILS OF WRITE-INS	- /				- ,
1301.						
1302.						
1303.						
1398.	Summary of Line 13 from overflow page					T
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13					
	above)					
_		Cradit Life	<u> </u>			

	C)rdinary	_	Credit Life and Individual)		Group	li	ndustrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4	5	6	7	8	9	10
MATURED ENDOWMENTS INCURRED	No. of Pols. & Certifs.	Amount	Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior										
year17. Incurred during current year Settled during current year:	3	815,000							3	815,000
18.1 By payment in full	3	815 000							3	815 000
18.2 By payment on compromised claims										
18.3 Totals paid	3	815,000							3	815,000
18.4 Reduction by compromise										
18.5 Amount rejected		045 000								045.000
18.6 Total settlements19. Unpaid Dec. 31, current year (16+17-18.6)	3	815,000							3	815,000
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	958	439 132 949		(a)		3 061 000			958	442,193,949
21. Issued during year	62			(a)						23,400,000
22. Other changes to in force (Net)		, ,				(712,500)				(26,417,440
23. In force December 31 of current year	969	436.828.009		(a)		2.348.500			969	439.176.509

 current year
 969
 436,828,009
 (a)
 2,348,500
 969
 436

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

ACCIDENT AND HEALTH INSURANCE

	•	CODEN AND	IILALIII IIIOOI	MITOL		
		1	2	3	4	5
				Policyholder Dividends		
				Paid, Refunds to		
			Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only					
	All other (b)					
	Totals (sum of Lines 25.1 to 25.5)			· · · · · · · · · · · · · · · · · · ·		
∠0.	10tals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.0)	l	l			



DIRECT BUSINESS IN THE STATE OF Mississippi

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE		NAIC Compa	ny Code 72222
	·	1	2	3	4	5
	DIRECT PREMIUMS		Credit Life (Group			
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.	Life insurance					93,304
2.	Annuity considerations					120
3.			XXX		XXX	
4.						
5.	Totals (Sum of Lines 1 to 4)	93,424				93,424
	DIRECT DIVIDENDS TO					
	POLICYHOLDERS/REFUNDS TO MEMBERS					
	surance:					
6.3	Applied to provide paid-up additions or shorten the					
6.4	endowment or premium-paying period Other					
6.5	Totals (Sum of Lines 6.1 to 6.4)					
Annui						
7.1	Paid in cash or left on deposit					
	Applied to provide paid-up annuities					
7.3						
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
<u> </u>	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	100 000				100 000
10.	Matured endowments	,				100,000
	Annuity benefits					
12.						
13.	Aggregate write-ins for miscellaneous direct claims					
	00 0					
14.						
15.	Totals	100,000				100,000
	DETAILS OF WRITE-INS					
1301.						
1302.						
1303.						
1398.	Summary of Line 13 from overflow page					
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13					
	above)					
		Credit Life				

	C	Ordinary		redit Life and Individual)		Group	Ir	ndustrial		Total
DIRECT DEATH BENEFITS AND MATURED	1 No. of	2	3 No. of Ind.Pols.	4	5	6	7 No. of	8	9 No. of	10
ENDOWMENTS INCURRED	Pols. & Certifs.	Amount	& Gr. Certifs.	Amount	No. of Certifs.	Amount	Pols. & Certifs.	Amount	Pols. & Certifs.	Amount
16. Unpaid December 31, prior	001101	7 1110 4111	00111101	7 1110 0111	00111101	7 11110 2111	00.1	711104111	0014.101	7 111104111
year										
17. Incurred during current year	1	100,000							. 1	100,000
Settled during current year: 18.1 By payment in full	1	100 000							1	100.000
18.2 By payment on										
compromised claims	1	100,000							1 .	100,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	1	100,000							1 .	100,000
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT 20. In force December 31, prior					No. of Policies					
vear	110	37 177 213		(a)					110	37, 177, 213
21. Issued during year	15	5,110,000		(~)						5,110,000
22. Other changes to in force (Net)										3,767,82
23. In force December 31 of current year	128	46.055.041		(a)					128	46.055.04

 current year
 128
 46,055,041
 (a)
 128
 4

 (a) Includes Individual Credit Life Insurance prior year \$

 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$

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

 current year \$
 current year \$
 current year \$

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

ACCIDENT AND HEALTH INSURANCE

	•		HEALIH MOOI	U 1110E		
		1	2	3	4	5
	·			Policyholder Dividends		
	ļ			Paid, Refunds to		
	ļ		Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only					
	All other (b)					
	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					



DIRECT BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2019

IAIC	Group Code 0028	IDERATIONS	ny Code 72222			
	·	1	2	3		
	DIRECT PREMIUMS			_		
	AND ANNUITY CONSIDERATIONS		,			
1.						
2.	_ :					
3.	- · · · · · · · · · · · · · · · · · · ·				XXX	
4.						
5.	Totals (Sum of Lines 1 to 4)	337,232				337,23
ifo ir	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS asurance:					
	Applied to provide paid-up additions or shorten the					
0.5						
6.4	Other					
6.5	Totals (Sum of Lines 6.1 to 6.4)					
	ities:					
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	250,801				250,80
10.	Matured endowments					
11.	Annuity benefits	30,700				30,70
12.	Surrender values and withdrawals for life contracts	5,125				5,12
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	286,626				286,62
	DETAILS OF WRITE-INS					
	·					
1302						
1303						
1398	. Summary of Line 13 from overflow page					
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

	0	rdinarv	_	redit Life and Individual)		Group		ndustrial		Total
DIRECT DEATH	1	2	(Group	and individual)	5	Group 6	7	8	9	10tai 10
BENEFITS AND	'	2	No. of	4	5	0	1	0	9	10
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year	2	250,860							2	250,860
17. Incurred during current year	1	25,000							1	25,000
Settled during current year:										
18.1 By payment in full	2	250,801							2	250,801
18.2 By payment on										
compromised claims										
18.3 Totals paid	2	250,801							2	250,801
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	2	250,801							2	250,801
19. Unpaid Dec. 31, current										
year (16+17-18.6)	1	25,059							1	25,059
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	453	157, 155, 778		(a)						157 , 155 , 778
21. Issued during year	41	16,720,000							41	16,720,000
22. Other changes to in force (Net)	(10)	(776,000)							(10)	(776,000)
23. In force December 31 of current year	484	173,099,778		(a)					484	173,099,778

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

ACCIDENT AND HEALTH INSURANCE

	•	CODEN AND	IILALIII IIIOOI	MITOL		
		1	2	3	4	5
				Policyholder Dividends		
				Paid, Refunds to		
			Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only					
	All other (b)					
	Totals (sum of Lines 25.1 to 25.5)			· · · · · · · · · · · · · · · · · · ·		
∠0.	10tals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.0)	l	l			



DIRECT BUSINESS IN THE STATE OF Montana NAIC Group Code വാള

DURING THE YEAR 2019

AIC	Group Code 0028	LI	FE INSURANCE		NAIC Compa	ny Code 72222
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life insurance	63,597		968		64,56
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	63,597		968		64,56
6.1	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS asurance: Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4	Other					
	· · · · · · · · · · · · · · · · · · ·					
Annui						
7.1						
	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
_	DIRECT CLAIMS AND BENEFITS PAID	0.040				
9.	Death benefits					8,24
10.	Matured endowments	57,136				
12.		1.086				57 , 10 1 , 00
	Aggregate write-ins for miscellaneous direct claims	,				1,00
14.						
15.		66.468				66.46
	DETAILS OF WRITE-INS	,				,
1302.	·					
1398 1398	0 (1) (0)					
	. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

		Ordinary	_	Credit Life and Individual)		Group	1	ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND MATURED ENDOWMENTS INCURRED	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior										
year										
17. Incurred during current year]	8,246							. 1	8,246
Settled during current year: 18.1 By payment in full		0.040								0.040
18.2 By payment on	l								I	8,246
compromised claims										
18.3 Totals paid	1	8.246							1	8.246
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	1	8,246							1	8,246
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	93	28,362,345		(a)		125,000			93	28,487,345
21. Issued during year	1	250 000		(a)		120,000			1	250.000
22. Other changes to in force (Net)									3	8,254
23. In force December 31 of current year	97	28.620.599		(a)		125.000			97	28.745.599

current year	5	20,020,000	(a)			120,000			0.	
(a) Includes Individual Credit Life In	nsurance p	orior year \$, current y	ear \$					
Includes Group Credit Life Insu	irance Loai	ns less than or equ	al to 60 month	s at issue, prior	r year \$, Cl	urrent year \$		
Loans greater than 60 months	at issue Bl	UT NOT GREATE	R THAN 120 M	ONTHS, prior y	year\$, Cl	urrent year \$		

ACCIDENT AND HEALTH INSURANCE

	•	CODEN AND	IILALIII IIIOOI	MITOL		
		1	2	3	4	5
				Policyholder Dividends		
				Paid, Refunds to		
			Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only					
	All other (b)					
	Totals (sum of Lines 25.1 to 25.5)			· · · · · · · · · · · · · · · · · · ·		
∠0.	10tals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.0)	l	l			



DIRECT BUSINESS IN THE STATE OF Nebraska

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE	E	NAIC Compa	any Code 72222
		1	2	3	4	5
	DIRECT PREMIUMS		Credit Life (Group	_		
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.		128,532				128,532
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.						
5.	Totals (Sum of Lines 1 to 4)	129,182				129, 182
	DIRECT DIVIDENDS TO					
1 :6- :	POLICYHOLDERS/REFUNDS TO MEMBERS					
	surance:					
	Applied to pay renewal premiums					
0.3	endowment or premium-paying period					
6.4	Other					
6.5	Totals (Sum of Lines 6.1 to 6.4)					
Annui						
	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
	Other					
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.		53				53
13.	Aggregate write-ins for miscellaneous direct claims					
1/1	and benefits paidAll other benefits, except accident and health					
	Totals	53				53
13.	DETAILS OF WRITE-INS	აა				33
1301						
1301.					†	
1302.						
1300	Summary of Line 13 from overflow page				†	
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13					
1000.	above)					
_	,	Cradit Life	+			

				redit Life						
	0	rdinary	(Group	(Group and Individual)		Group	li	ndustrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4	5	6	7	8	9	10
MATURED ENDOWMENTS INCURRED	No. of Pols. &	A 4	Ind.Pols. & Gr.	A	No. of	A	No. of Pols. &	A	No. of Pols. &	A
16. Unpaid December 31, prior	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior										
year21. Issued during year	177 16	68,818,000 8,040,000		(a)					177 16	68,818,00 8,040,00
22. Other changes to in force (Net)		(1,111,000)							(3)	(1,111,00
23. In force December 31 of current year	190	75,747,000		(a)					190	75,747,00

ı	our one your	100	10,111,000	(a)				.00	
((a) Includes Individual Credit Life I	nsurance p	rior year \$,	current year \$	 			
	Includes Group Credit Life Insu	ırance Loar	ns less than or equa	al to 60 months at iss	sue, prior year \$, C	urrent year \$		
	Loans greater than 60 months	at issue BU	IT NOT GREATER	THAN 120 MONTH	S, prior year \$, C	urrent year \$		

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
			Policyholder Dividends		
			Paid, Refunds to		
		Direct Premiums	Members or Credited		Direct Losses
	Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plant premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certification	ates (b)				
24.4 Medicare Title XVIII exempt from state	e taxes or fee				
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26 Totals (Lines 24 + 24 1 + 24 2 + 24 3 +	+ 24 4 + 25 6)				



DIRECT BUSINESS IN THE STATE OF Nevada

DURING THE YEAR 2019

NAIC Group Code 0028	LI	FE INSURANCE	NAIC Company Code 72222		
DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group 33.841	Industrial	Total
	328,815		,		362,65
•	18,886				18,88
		XXX		XXX	
5. Totals (Sum of Lines 1 to 4)	347.701		33.841		381.54
DIRECT DIVIDENDS TO	347,701		33,041		301,34
POLICYHOLDERS/REFUNDS TO MEMBERS Life insurance:					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	100 000				100.00
10. Matured endowments					100,00
11. Annuity benefits					20.43
	92,371				92.37
13. Aggregate write-ins for miscellaneous direct claims	92,071				32,01
44 AU 0 1 C0 1 11 10					
15. Totals	212.808				212.80
DETAILS OF WRITE-INS	,-,				_ :=,:-
1301					
1000					
1303					
1000 0 (11 40 (0					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					
	Credit Life	i			

)rdinarv	_	redit Life and Individual)		Group	Ir	ndustrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4	5	6	7	8	9	10
MATURED ENDOWMENTS INCURRED	No. of Pols. & Certifs.	Amount	Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior										
year	1	100,000							1	100,000
18.1 By payment in full 18.2 By payment on									1	100,000
compromised claims	1	100,000								100,000
18.4 Reduction by compromise										
18.6 Total settlements	1	100,000							1	100,000
POLICY EXHIBIT 20. In force December 31, prior					No. of Policies					
year	373	132,935,400		(a)		4,371,200			373	137,306,600
21. Issued during year	41	14,969,000		· ·			l I		41	14,969,000
22. Other changes to in force (Net)						400,100				(7,728,925
23. In force December 31 of current year	394	139,775,375		(a)		4,771,300			394	144,546,675

Includes Individual Credit Life Insurance prior year \$, current year \$		
Includes Group Credit Life Insurance Loans less than or			rent year \$
Loans greater than 60 months at issue BUT NOT GREA	ATER THAN 120 MONTHS, prior year \$, cur	rent year \$

ACCIDENT AND HEALTH INSURANCE

	•	CODEN AND	IILALIII IIIOOI	MITOL		
		1	2	3	4	5
				Policyholder Dividends		
				Paid, Refunds to		
			Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only					
	All other (b)					
	Totals (sum of Lines 25.1 to 25.5)			· · · · · · · · · · · · · · · · · · ·		
∠0.	10tals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.0)	l	l			



DIRECT BUSINESS IN THE STATE OF New Hampshire NAIC Group Code 0028

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE		NAIC Company Code 7222		
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total	
1.	Life insurance	2,732,358		115,771		2,848,129	
2.		1, 134,820				1, 134,820	
3.	Deposit-type contract funds		XXX		XXX		
4.	Other considerations						
5.	Totals (Sum of Lines 1 to 4)	3,867,178		115,771		3,982,949	
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS surance:						
6.1							
	Applied to provide paid-up additions or shorten the endowment or premium-paying period						
6.5	Other Totals (Sum of Lines 6.1 to 6.4)						
Annui							
7.1	Paid in cash or left on deposit						
	Applied to provide paid-up annuities						
7.3	Other						
7.4	T (O						
8.	Grand Totals (Lines 6.5 plus 7.4)						
<u> </u>	DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	518 668				518 668	
10.	Matured endowments					010,000	
11.							
12.		402,122				402,122	
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					,	
14.	All other benefits, except accident and health	10,815				10,815	
15.	Totals	1,504,719				1,504,719	
	DETAILS OF WRITE-INS						
1302.							
1303.							
	Summary of Line 13 from overflow page						
1399.	. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)						

	(Ordinary		Credit Life and Individual)		Group	Ir	ndustrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4	5	6	7	8	9	10
MATURED ENDOWMENTS INCURRED	No. of Pols. & Certifs.	Amount	Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior										
year17. Incurred during current year	10	674,000							10	674,000
Settled during current year: 18.1 By payment in full	7	518,668							7	518,668
18.2 By payment on compromised claims									<u>.</u>	
18.3 Totals paid	7	518,668								518,668
18.4 Reduction by compromise 18.5 Amount rejected										
18.6 Total settlements	7	518 668								518.668
19. Unpaid Dec. 31, current year (16+17-18.6)	3	155,332							3	155,332
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	3,347	1,092,504,971		(a)		15,225,700			3,347	1, 107, 730, 67 ⁻
21. Issued during year	175	66,560,143							175	66,560,140
22. Other changes to in force (Net)										(41, 176, 638
23. In force December 31 of	3.341	1.116.092.276		(a)		17.021.900			3.341	1.133.114.176

current year | 3,341 | 1,116,092,276 | (a) |
(a) Includes Individual Credit Life Insurance prior year \$, current year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$, current year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.. , current year \$

ACCIDENT AND HEALTH INSURANCE

	•	CODEN AND	IILALIII IIIOOI	MITOL		
		1	2	3	4	5
				Policyholder Dividends		
				Paid, Refunds to		
			Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only					
	All other (b)					
	Totals (sum of Lines 25.1 to 25.5)			· · · · · · · · · · · · · · · · · · ·		
∠0.	10tals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.0)	l	l			



DIRECT BUSINESS IN THE STATE OF New Jersey

DURING THE YEAR 2019

IAIC	Group Code 0028	LI	FE INSURANCE		NAIC Company Code 7222		
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4	5 Total	
1.		4,346,226					
2.		157.182					
3.					XXX	,	
4.							
5.	Totals (Sum of Lines 1 to 4)	4,503,408		89,875		4,593,28	
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Issurance: Paid in cash or left on deposit						
	Applied to pay reflewal premiums Applied to provide paid-up additions or shorten the endowment or premium-paying period						
6.4	Other						
	- · · · · - · · · · · · · · · · · · · ·						
Annui	•						
7.1	Paid in cash or left on deposit						
7.3	Other						
7.4	Totals (Sum of Lines 7.1 to 7.3)						
8.	Grand Totals (Lines 6.5 plus 7.4)						
	DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	2,004,143				2,004,14	
10.							
11.		391, 158				391, 15	
12.		244,458				244 , 45	
	All other benefits, except accident and health						
15.	Totals	2,656,235				2,656,23	
	DETAILS OF WRITE-INS						
1301.							
1302.							
1303.							
	Summary of Line 13 from overflow page						

	(Ordinary		Credit Life and Individual)		Group	Ir	ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND	-		No. of			-	-			
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year	2	300,427							2	300,42
17. Incurred during current year	12	3,556,000							12	3,556,000
Settled during current year:										
18.1 By payment in full	10	2.004.143							10	2.004.14
18.2 By payment on compromised claims										
18.3 Totals paid	10	2,004,143							10	2,004,140
18.4 Reduction by compromise			L		L					
18.5 Amount rejected	_									
18.6 Total settlements	10	2.004.143							10	2,004,143
19. Unpaid Dec. 31. current										
year (16+17-18.6)	4	1,852,284							4	1,852,284
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior	4 000	4 705 000 507				44 000 000			4 000	4 740 000 70
year	4,083	1,735,260,567		(a)		11,609,200				1,746,869,767
21. Issued during year	311	129,085,793	ļ						. 311	129,085,79
22. Other changes to in force (Net)	(269)	(83,547,509)				(1,317,000)			(269)	(84,864,50
23. In force December 31 of current year	4.125	1.780.798.851		(a)		10.292.200			4 . 125	1.791.091.05

 current year
 4,125
 1,780,798,851
 (a)
 10,292,200
 4,125
 1,7

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

ACCIDENT AND HEALTH INSURANCE

	/ (O O I D E I (I / (I I D		V		
	1	2	3	4	5
			Policyholder Dividends		
			Paid, Refunds to		
		Direct Premiums	Members or Credited		Direct Losses
	Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fe	96				
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25	i.6)				



DIRECT BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE		NAIC Comp	any Code 72222
		1	2	3	4	5
	DIRECT PREMIUMS	0 "	Credit Life (Group			-
_	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.		300,460		581		301,041
2.	Annuity considerations					6,500
3.	Deposit-type contract funds		XXX		XXX	
4.	F**					
5.	Totals (Sum of Lines 1 to 4)	306,960		581		307,541
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life in	surance:					
6.1	Paid in cash or left on deposit					
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4	Other					
6.5	Totals (Sum of Lines 6.1 to 6.4)					
Annui						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	500,000				500,000
10.	Matured endowments					
11.	Annuity benefits	59,438				59,438
12.	Surrender values and withdrawals for life contracts	2,441				2,441
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.						
15.	Totals	561,879				561,879
	DETAILS OF WRITE-INS	,				,
1301.						
1302.						
1303.						
1398.	Summary of Line 13 from overflow page					
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					
-						

	_			Credit Life						
	C	rdinary	(Group	and Individual)		Group	l:	ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND			No. of							
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
Unpaid December 31, prior										
year										
17. Incurred during current year	3	500,000							3	500,000
Settled during current year:										
18.1 By payment in full	3	500.000	L						3	500.000
18.2 By payment on		,								,
compromised claims										
compromised claims		500.000							3	500.000
18.4 Reduction by compromise		,								,
18.5 Amount rejected										
18.6 Total settlements	3	500,000							3	500.000
19. Unpaid Dec. 31. current										
year (16+17-18.6)										
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	334	101,553,444		(a)		75,000			334	101,628,444
21. Issued during year	13	4,750,000	L			, , , , , , , , , , , , , , , , , , ,			13	4,750,000
22. Other changes to in force										, - ,
(Net)	(20)	(4,423,963)							(20)	(4,423,963
23. In force December 31 of										
current year	327	101,879,481	1	(a)		75,000			327	101,954,48

L	ourront you.	-	,	(α)					
((a) Includes Individual Credit Life I	nsurance pr	rior year \$, current y	ear\$	 		
	Includes Group Credit Life Insu	ırance Loan	s less than or equ	al to 60 months	s at issue, prior	year \$, CI	urrent year \$	
	Loans greater than 60 months	at issue BU	T NOT GREATER	R THAN 120 M	ONTHS, prior y	ear\$, CI	urrent year \$	

ACCIDENT AND HEALTH INSURANCE

	=					
	_	1	2	3	4	5
				Policyholder Dividends		
				Paid, Refunds to		
			Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
25.4	Other accident only					
	All other (b)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26	Totals (Lines 24 + 24 1 + 24 2 + 24 3 + 24 4 + 25 6)					



DIRECT BUSINESS IN THE STATE OF New York

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE		NAIC Compa	ny Code 72222
	DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
1.	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group 274.841	Industrial	Total 8,264,074
1. 2.	Life insurance	7,989,233 545,020		,		
3.	_ :				XXX	343,020
3. 4.						
5.	Totals (Sum of Lines 1 to 4)	8,534,253		274.841		8.809.094
J.	DIRECT DIVIDENDS TO	0,334,233		274,041		0,000,004
Life in	POLICYHOLDERS/REFUNDS TO MEMBERS asurance:					
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4	Other					
	Totals (Sum of Lines 6.1 to 6.4)					
Annui						
7.1	Paid in cash or left on deposit					
7.3						
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits			123,400		5,312,853
10.						
11.		1,669,765				1,669,765
12. 13.	Aggregate write-ins for miscellaneous direct claims	902,621				902,621
11		40.701				40.704
	Totals	48,791 7,810,630				48,791
10.	DETAILS OF WRITE-INS	7,610,030		123,400		7,934,030
1201						
1301.						
1302.						
	Summary of Line 13 from overflow page					
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

		Ordinary		redit Life and Individual)		Group	In	dustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND	-	_	No. of	•		-	-	-		
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year	5	226,419							5	226,41
17. Incurred during current year	41	5,746,232			2	123,400			43	5,869,63
Settled during current year:										
18.1 By payment in full	43	5.189.453			2	123,400			45	5.312.85
18.2 By payment on compromised claims										
18.3 Totals paid	43	5,189,453			2	123,400			45	5,312,85
18.4 Reduction by compromise						, , , , , , , , , , , , , , , , , , ,				, ,
18.5 Amount rejected										
18.6 Total settlements	43	5.189.453			2					5,312,85
19. Unpaid Dec. 31. current										
year (16+17-18.6)	3	783, 198							3	783, 19
POLICY EXHIBIT					No. of Policies					
 In force December 31, prior year 	0 603	2 115 771 064		(a)		25 501 200			9 602	3, 151, 272, 26
year 21. Issued during year	0,093	200 272 000		(a)		33,301,200			544	
22 Other changes to in force										200,373,00
22. Other changes to in force (Net)	(637)	(162,795,594)				(1,196,000)			(637)	(163,991,59
23. In force December 31 of current year	8.600	3.153.348.470		(a)		34.305.200			8.600	3.187.653.67

 current year
 8,600
 3,153,348,470
 (a)
 34,305,200
 8,600
 3,1

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

ACCIDENT AND HEALTH INSURANCE

	•	ACCIDEIN AIND	IILALIII II100I	17-11-10-L		
		1	2	3	4	5
				Policyholder Dividends		
				Paid, Refunds to		
			Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only					
	All other (b)					
	Totals (sum of Lines 25.1 to 25.5)					
	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					



DIRECT BUSINESS IN THE STATE OF North Carolina 0028

DURING THE YEAR 2019

	Group Code 0028		FE INSURANCE			ny Code 72222
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.		4,267,637		72,484		4,340,121
2.	Annuity considerations					1,064,410
3.			XXX		XXX	
4.						
5.	Totals (Sum of Lines 1 to 4)	5,332,047		72,484		5,404,531
l ifo in	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS ISUITANCE:					
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4	Other					
6.5						
Annui	ties:					
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4						
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits			24,700		1,880,253
10.	Matured endowments					
11.	Annuity benefits					488,552
12.		531,248				531,248
		9,768				9,768
15.	Totals	2,885,121		24,700		2,909,821
	DETAILS OF WRITE-INS					
1301.						
1302.						
1303.						
	Summary of Line 13 from overflow page					
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

		Ordinary		Credit Life and Individual)		Group	Ir	ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND	•	-	No. of	•	ľ	Ü		ŭ	, and the second	
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year	1	100,031							1	100,03
17. Incurred during current year	24	2,428,961			1	24,700			25	2,453,66
Settled during current year:										
18.1 By payment in full	20	1,855,553			1	24,700			21	1,880,25
18.2 By payment on compromised claims										
18.3 Totals paid	20	1,855,553			1	24,700			21	1,880,253
18.4 Reduction by compromise										
18.5 Amount rejected	_									
18.6 Total settlements	20	1.855.553			1					1,880,253
19. Unpaid Dec. 31, current										
year (16+17-18.6)	5	673,439							5	673,439
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	5 060	1 964 202 101		(a)		0 465 700			5 060	1,873,858,80°
21. Issued during year	340	1/16 606 000		(a)					3,009	146,606,000
00 00 1 1 1 1									349	140,000,000
22. Other changes to in force (Net)	(282)	(51,971,694)				700,400			(282)	(51,271,294
23. In force December 31 of current year	5.136	1.959.027.407		(a)		10.166.100			5.136	1.969.193.50

current year | 5,136 | 1,959,027,407 | (a) |
(a) Includes Individual Credit Life Insurance prior year \$, current year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$, current year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.. , current year \$

ACCIDENT AND HEALTH INSURANCE

ACCIDENT AND HEALTH INCONANCE								
		1	2	3	4	5		
				Policyholder Dividends				
				Paid, Refunds to				
			Direct Premiums	Members or Credited		Direct Losses		
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred		
24.	Group Policies (b)							
24.1	Federal Employees Health Benefits Plan premium (b)							
24.2	Credit (Group and Individual)							
24.3	Collectively renewable policies/certificates (b)							
24.4	Medicare Title XVIII exempt from state taxes or fee							
	Other Individual Policies:							
25.1	Non-cancelable (b)							
	Guaranteed renewable (b)							
	Non-renewable for stated reasons only (b)							
	Other accident only							
	All other (b)							
	Totals (sum of Lines 25.1 to 25.5)			†				
				 				
20.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.0)							



DIRECT BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2019

NAIC Group Code 0028		LI	FE INSURANCE	NAIC Company Code 72222		
		1	2	3	4	5
	DIRECT PREMIUMS	-	Credit Life (Group	_		
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.		19,828				19,828
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.						
5.	Totals (Sum of Lines 1 to 4)	19,828				19,828
	DIRECT DIVIDENDS TO					
l ife in	POLICYHOLDERS/REFUNDS TO MEMBERS asurance:					
6.1	D					
6.3	Applied to provide paid-up additions or shorten the					
	endowment or premium-paying period					
6.4	Other					
6.5	Totals (Sum of Lines 6.1 to 6.4)					
Annui						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	4,258				4,258
13.	and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	4,258				4,258
	DETAILS OF WRITE-INS					
1301.						
1302.						
1303.						
1398.	Summary of Line 13 from overflow page					
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

	Ordinary		Credit Life (Group and Individual)		Croun		Industrial		Total	
DIRECT DEATH	1	2	(Group	and individual)	5	Group 6	7	8	9	10tai 10
BENEFITS AND	'	2	No. of	4	3	U	'	0	9	10
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on										
compromised claims	,									
18.3 Totals paid	٠									
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
DOLLOW EXCURIT					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior year	26	13 254 000		(a)					26	13,254,000
21. Issued during year	3	2,300,000							3	2,300,000
22. Other changes to in force										,,,
(Net)	(3)	(816,000)							(3)	(816,000)
23. In force December 31 of	26			()					26	14 720 000
current year	20	14,738,000		(a)					26	14,738,000

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

ACCIDENT AND HEALTH INSURANCE

ACCIDENT AND HEALTH INCONANCE								
		1	2	3	4	5		
				Policyholder Dividends				
				Paid, Refunds to				
			Direct Premiums	Members or Credited		Direct Losses		
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred		
24.	Group Policies (b)							
24.1	Federal Employees Health Benefits Plan premium (b)							
24.2	Credit (Group and Individual)							
24.3	Collectively renewable policies/certificates (b)							
24.4	Medicare Title XVIII exempt from state taxes or fee							
	Other Individual Policies:							
25.1	Non-cancelable (b)							
	Guaranteed renewable (b)							
	Non-renewable for stated reasons only (b)							
	Other accident only							
	All other (b)							
	Totals (sum of Lines 25.1 to 25.5)			†				
				 				
20.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.0)							



DIRECT BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2019

DIRECT PREMIUMS	1	2	3	4 .	ny Code 72222
	.	Credit Life (Group		4	5
AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
	1,286,321		•		1,336,061
	39,675				39,675
		XXX		XXX	
,	1,325,996		49,740		1,375,736
POLICYHOLDERS/REFUNDS TO MEMBERS urance:					
Applied to provide paid-up additions or shorten the					
Other					
Totals (Sum of Lines 6.1 to 6.4)					
es:					
Paid in cash or left on deposit					
	166,957				166,957
Annuity benefits	113,559				113,559
	278,298				278,298
and benefits paid					
	582,294				582,294
Totals (Lines 1301 thru 1303 plus 1398) (Line 13					
	Other considerations Totals (Sum of Lines 1 to 4) DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS urance: Paid in cash or left on deposit Applied to pay renewal premiums Applied to provide paid-up additions or shorten the endowment or premium-paying period Other Totals (Sum of Lines 6.1 to 6.4) es: Paid in cash or left on deposit Applied to provide paid-up annuities Other Totals (Sum of Lines 7.1 to 7.3) Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID Death benefits Matured endowments Annuity benefits Surrender values and withdrawals for life contracts Aggregate write-ins for miscellaneous direct claims and benefits paid All other benefits, except accident and health Totals DETAILS OF WRITE-INS Summary of Line 13 from overflow page	Other considerations Totals (Sum of Lines 1 to 4) DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS urance: Paid in cash or left on deposit Applied to pay renewal premiums Applied to provide paid-up additions or shorten the endowment or premium-paying period Other Totals (Sum of Lines 6.1 to 6.4) Bes: Paid in cash or left on deposit Applied to provide paid-up annuities Other Totals (Sum of Lines 7.1 to 7.3) Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID Death benefits Annuity benefits Surrender values and withdrawals for life contracts Angregate write-ins for miscellaneous direct claims and benefits paid All other benefits, except accident and health Totals DETAILS OF WRITE-INS Summary of Line 13 from overflow page Totals (Lines 1301 thru 1303 plus 1398) (Line 13	Other considerations Totals (Sum of Lines 1 to 4) DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS urance: Paid in cash or left on deposit Applied to provide paid-up additions or shorten the endowment or premium-paying period Other Totals (Sum of Lines 6.1 to 6.4) as: Paid in cash or left on deposit Applied to provide paid-up annuities Other Totals (Sum of Lines 7.1 to 7.3) Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID Death benefits Matured endowments Annuity benefits Surrender values and withdrawals for life contracts Aggregate write-ins for miscellaneous direct claims and benefits paid All other benefits, except accident and health Totals (Lines 13 from overflow page Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	Other considerations Totals (Sum of Lines 1 to 4) DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Urance: Paid in cash or left on deposit Applied to pay renewal premiums Applied to provide paid-up additions or shorten the endowment or premium-paying period Other. Totals (Sum of Lines 6.1 to 6.4) ss: Paid in cash or left on deposit Applied to provide paid-up annutities Other Totals (Sum of Lines 7.1 to 7.3) Grand Totals (Lines 7.1 to 7.3) Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID Death benefits Matured endowments Annuity benefits Surrender values and withdrawals for life contracts Aggregate write-ins for miscellaneous direct claims and benefits paid All other benefits, except accident and health Totals DETAILS OF WRITE-INS Summary of Line 13 from overflow page Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	Other considerations

		Ordinary		Credit Life and Individual)		Group		ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND MATURED ENDOWMENTS INCURRED	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior	Ocitiis.	Amount	Ocitiis.	Amount	Octuis.	Amount	Ociuis.	Amount	Certiis.	Amount
year										
17. Incurred during current year	4	222,000							4	222,000
Settled during current year:										
18.1 By payment in full	2	166,957							2	166,95
18.2 By payment on										
compromised claims 18.3 Totals paid	2	166,957							2	166,95
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	2	166,957							2	166,957
19. Unpaid Dec. 31, current year (16+17-18.6)	2	55,043							2	55,043
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	1 /00	502 025 000		(a)		6 424 000			1 400	598,449,900
year21. Issued during year	126	52 640 000		(a)		0,424,900			1,499	596,449,900
22. Other changes to in force (Net)						837 , 100				(25,337,660
23. In force December 31 of current year	1.526	618.490.240		(a)		7.262.000			1.526	625.752.240

current year 1,526 618,490,240 (a) Includes Individual Credit Life Insurance prior year \$. current vear \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$, current year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.. , current year \$

ACCIDENT AND HEALTH INSURANCE

	/ (O O I D E I (I / (I I D		V		
	1	2	3	4	5
			Policyholder Dividends		
			Paid, Refunds to		
		Direct Premiums	Members or Credited		Direct Losses
	Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fe	96				
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25	i.6)				

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



DIRECT BUSINESS IN THE STATE OF Oklahoma

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCI	<u> </u>	NAIC Compa	any Code 72222
		1	2	3	4	5
	DIRECT PREMIUMS		Credit Life (Group			
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.	Life insurance	178,069			-	178,069
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.						
5.	Totals (Sum of Lines 1 to 4)	178,069				178,069
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life ir	surance:					
	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4	Other					
6.5	Totals (Sum of Lines 6.1 to 6.4)					
Annu						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits	26,639				26,639
12.	Surrender values and withdrawals for life contracts	6,250				6,250
	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	32,889				32,889
	DETAILS OF WRITE-INS					
1301						
1302						
1303						
1398	Summary of Line 13 from overflow page					
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

				Credit Life						
	0	rdinary	(Group	and Individual)		Group	li	ndustrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4	5	6	7	8	9	10
MATURED ENDOWMENTS INCURRED	No. of Pols. & Certifs.	Amount	Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior	Ocitiis.	7 tillourit	OCITIIS.	Amount	OCITIIS.	Amount	OCITIIS.	7 tillourit	Ocitiis.	Tillount
year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior	005	75 400 400							005	75 400 40
year	205	75, 122, 126		(a)					205	75 , 122 , 12
21. Issued during year	23	8,950,000							23	8,950,00
	(10)	(2,244,000)							(10)	(2,244,00
23. In force December 31 of current year	218	81,828,126		(a)					218	81,828,12

L	ourront you.		, ,	(α)					
((a) Includes Individual Credit Life I	nsurance pr	rior year \$, current	year \$	 		
	Includes Group Credit Life Insu	rance Loan	s less than or equ	al to 60 month	hs at issue, prio	r year \$, C	urrent year \$	
	Loans greater than 60 months	at issue BU	T NOT GREATER	R THAN 120 N	MONTHS, prior	year \$, C	urrent year \$	

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
			Policyholder Dividends		
			Paid, Refunds to		
		Direct Premiums	Members or Credited		Direct Losses
	Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plant premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certification	ates (b)				
24.4 Medicare Title XVIII exempt from state	e taxes or fee				
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26 Totals (Lines 24 + 24 1 + 24 2 + 24 3 +	+ 24 4 + 25 6)				

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



DIRECT BUSINESS IN THE STATE OF Oregon

DURING THE YEAR 2019

	Group Code 0028	1 7				ny Code 72222
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life insurance	957.045	and marriadary	42.127	madona.	999.17
2.		51.749		, ,		51.74
3.	_ 1					.,
4.						
5.	Totals (Sum of Lines 1 to 4)	1,008,794		42,127		1,050,92
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Insurance: Paid in cash or left on deposit					
	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4						
6.5	T (0					
Annu	ities:					
7.1						
7.2						
7.3						
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	822,093				822,09
10.						
11.		10,288				10,28
12.		77 , 138				77 , 13
13.	and benefits paid					
		17,991				17,99
15.	Totals	927,510				927,51
	DETAILS OF WRITE-INS					
1302						
1303						
1398	. Summary of Line 13 from overflow page					
1399	. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

<u> </u>				Credit Life	1					
	C	Ordinary	_	and Individual)		Group	l l	ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND			No. of							
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior	_								_	
year	2	113, 177							2	113, 17
17. Incurred during current year	12	708,916							12	708,91
Settled during current year:										
18.1 By payment in full	14	822,093							14	822,09
18.2 By payment on										
compromised claims 18.3 Totals paid	14	822,093							14	822,09
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	14	822.093							14	822.09
19. Unpaid Dec. 31, current year (16+17-18.6)		,								,
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior										
year	1,221	492, 130, 559		(a)		5,441,500			1,221	497,572,05
21. Issued during year	89	39,380,000							89	39,380,00
22. Other changes to in force (Net)	(78)	(16,279,482)				527,200			(78)	(15,752,28
23. In force December 31 of current year	1,232	515,231,077		(a)		5,968,700			1,232	521, 199, 77

ouricit your	.,	0.0,201,077	(a)			0,000,100			.,	
(a) Includes Individual Credit Life In	nsurance p	orior year \$, current y	ear \$				•	
Includes Group Credit Life Insu	irance Loai	ns less than or equ	al to 60 month	hs at issue, prior	r year \$, CI	urrent year \$		
Loans greater than 60 months	at issue Bl	UT NOT GREATER	R THAN 120 N	MONTHS, prior y	year\$, CI	urrent year \$		

ACCIDENT AND HEALTH INSURANCE

	-	CODEN AND	IILALIII IIIOOI	MITOL		
		1	2	3	4	5
				Policyholder Dividends		
				Paid, Refunds to		
			Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only					
	All other (b)					
	Totals (sum of Lines 25.1 to 25.5)			· · · · · · · · · · · · · · · · · · ·		
∠0.	10tals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.0)	l	l			



DIRECT BUSINESS IN THE STATE OF Pennsylvania

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE		NAIC Compa	ny Code 72222
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life insurance	3.008.501	and individual)	20.040	iliuusillai	3.090.714
2.		210,876		, , ,		210,876
3.		210,070				210,070
4.						
5.	Totals (Sum of Lines 1 to 4)	3,219,377		82,213		3,301,590
	DIRECT DIVIDENDS TO	0,210,011		02,210		0,001,000
Life ir	POLICYHOLDERS/REFUNDS TO MEMBERS asurance:					
6.1	Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
	Totals (Sum of Lines 6.1 to 6.4)					
Annu						
7.1	Paid in cash or left on deposit					
	· · · · · · · · · · · · · · · · · · ·					
7.3						
7.4						
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					803,022
10.	Matured endowments					
11.		427,967				427,967
12.		222,480				222,480
13.						
		3,598				3,598
15.	Totals	1,457,067				1,457,067
	DETAILS OF WRITE-INS					
1301	·					
1302						
1303	·					
1398	. Summary of Line 13 from overflow page					
1399	. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

		Ordinary		Credit Life and Individual)		Group	Ir	ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND		_	No. of	•		Ü	•	· ·		
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year	1	25,022							1	25,022
17. Incurred during current year	10	778,000							10	778,000
Settled during current year:										
18.1 By payment in full	11	803.022							11	803,022
18.2 By payment on										,
compromised claims 18.3 Totals paid	11	803.022							11	803,022
18.4 Reduction by compromise		<i>'</i>								,
18.5 Amount rejected										
18.6 Total settlements	11	803 022								.803,022
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior					FUIICIES					
year	3 018	1 153 739 042		(a)		10,619,400			3 018	1, 164, 358, 442
21. Issued during year	168	57 804 000		(a)					400	57,804,000
22. Other changes to in force (Net)										
23. In force December 31 of current year	2.992	1.158.591.027		(a)		11.383.300			2.992	1.169.974.327

current year	_,00_	1,100,001,021	(a)			11,000,000			-,00-	.,.
(a) Includes Individual Credit Life In	nsurance p	orior year \$, current y	/ear \$					
Includes Group Credit Life Insu	rance Loa	ns less than or equa	al to 60 month	is at issue, prior	year \$, Cl	urrent year \$		
Loans greater than 60 months	at issue Bl	UT NOT GREATER	R THAN 120 M	IONTHS, prior y	/ear\$, Cl	urrent year \$		

ACCIDENT AND HEALTH INSURANCE

	-	CODEN AND	IILALIII IIIOOI	MITOL		
		1	2	3	4	5
				Policyholder Dividends		
				Paid, Refunds to		
			Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only					
	All other (b)					
	Totals (sum of Lines 25.1 to 25.5)			· · · · · · · · · · · · · · · · · · ·		
∠0.	10tals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.0)	l	l			



DIRECT BUSINESS IN THE STATE OF Rhode Island

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE		NAIC Compa	ny Code 72222
	DIRECT PREMIUMS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4	5 Total
1.	AND ANNUITY CONSIDERATIONS Life insurance	7,245,530		0.000.445	Industrial	9,253,94
1. 2.						
3.	,	1,438,415 696,145	XXX		XXX	
3. 4	- · · · · · · · · · · · · · · · · · · ·					*
4. 5.	Totals (Sum of Lines 1 to 4)	9,380,090		2,008,415		11,388,50
٥.	DIRECT DIVIDENDS TO	9,300,030		2,000,413		11,300,30
l ifa im	POLICYHOLDERS/REFUNDS TO MEMBERS asurance:					
	B					
	Applied to provide paid-up additions or shorten the					
	endowment or premium-paying period					
	- · · · · - · · · · · · · · · · · · · ·					
O.5 Annui	,					
7.1						
7.1	Applied to provide paid-up annuities					
7.3						
7.4						
7. 4 8.	Grand Totals (Lines 6.5 plus 7.4)					
0.	DIRECT CLAIMS AND BENEFITS PAID					
9	Death benefits	2 612 601		1 700 600		E 402 20
10.		· · · ·				
11.		7,886,247				7,886,24
12.		1,970,167				, ,
13.						
14.		50,858				50,85
	Totals	13.519.953		1,790,600		15,310,55
	DETAILS OF WRITE-INS	.0,0.0,000		.,.55,550		.5,510,00
1301.						
1302						
1303.						
1398.	Summary of Line 13 from overflow page					
	. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

		\ P	_	Credit Life		0				T
		Ordinary		and Individual)		Group	_	ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND			No. of							
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior		700 040			_	400, 400			_	040 740
year	4	/82,312			3	130,400				912,712
17. Incurred during current year	37	5, 169, 842			11	2,030,300			48	7,200,142
Settled during current year:										
18.1 By payment in full	37	3,612,681			11	1,790,600			48	5,403,281
18.2 By payment on										
compromised claims	,									
18.3 Totals paid	37	3.612.681			11	1.790.600			48	5.403.281
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	37	3,612,681			11	1,790,600			48	5,403,281
19. Unpaid Dec. 31, current										
year (16+17-18.6)	4	2,339,473			3	370,100			7	2,709,573
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	9,226	2,676,585,855		(a)	1	281,710,500			9,227	2,958,296,355
21. Issued during year	538	175,832,326								
22. Other changes to in force (Net)	(581)	(143.561.337)				345.500			(581)	(143,215,837)
23. In force December 31 of										
current year	9,183	2,708,856,844		(a)	1	282,056,000			9,184	2,990,912,844

ACCIDENT AND HEALTH INSURANCE

	-	CODEN AND	IILALIII IIIOOI	MITOL		
		1	2	3	4	5
				Policyholder Dividends		
				Paid, Refunds to		
			Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only					
	All other (b)					
	Totals (sum of Lines 25.1 to 25.5)			· · · · · · · · · · · · · · · · · · ·		
∠0.	10tals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.0)	l	l			



DIRECT BUSINESS IN THE STATE OF South Carolina

DURING THE YEAR 2019 NAIC Company Code

NAIC	Group Code 0028	LI	FE INSURANCE		NAIC Compa	ny Code 72222
	DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.		1,032,068		65,165		1,097,233
2.	_ : :	294,513				294,513
3.		I I	XXX		XXX	
4.						
5.	Totals (Sum of Lines 1 to 4)	1,326,581		65,165		1,391,746
	POLICYHOLDERS/REFUNDS TO MEMBERS Insurance:					
	Applied to pay renewal premiums					
	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4	Other					
	Totals (Sum of Lines 6.1 to 6.4)					
Annui						
7.1						
7.2	11 1 1					
7.3						
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits			24,800		143, 124
10.						
11.		1, 125,082				1, 125, 082
12.		48,391				48,39
13.						
	All other benefits, except accident and health	85				8
15.	Totals	1,291,882		24,800		1,316,68
	DETAILS OF WRITE-INS					
1301.						
1302.	·					
1303.						
1398.						
1399.	. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

		Ordinary		Credit Life and Individual)		Group	li	ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND	•	-	No. of	•	ľ	Ü		ŭ		.0
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year	1	8 , 186							1	
17. Incurred during current year	3	120 , 138			1	24,800			4	144,938
Settled during current year:										
18.1 By payment in full	3	118.324			1	24.800			4	143.124
18.2 By payment on										•
compromised claims		118.324			1	24,800			4	143.124
18.4 Reduction by compromise		, -				,				
18.5 Amount rejected										
18.6 Total settlements	3	118.324			1	24.800			4	143, 124
19. Unpaid Dec. 31, current		, -				,				,
year (16+17-18.6)	1	10,000							1	10,000
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior	4 000	040 500 000				0 440 400			4 000	055 005 707
year	1,068	346,583,393		(a)		8,442,400			1,068	355,025,793
21. Issued during year	101	29,203,205							101	29,203,205
22. Other changes to in force (Net)	(47)	(862,585)				1,026,100			(47)	163,51
23. In force December 31 of current year	1.122	374.924.013		(a)		9.468.500			1.122	384.392.51

current year 1,122 374,924,013 (a) Includes Individual Credit Life Insurance prior year \$. current vear \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$, current year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.. , current year \$

ACCIDENT AND HEALTH INSURANCE

	-	CODEN AND	IILALIII IIIOOI	MITOL		
		1	2	3	4	5
				Policyholder Dividends		
				Paid, Refunds to		
			Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only					
	All other (b)					
	Totals (sum of Lines 25.1 to 25.5)			· · · · · · · · · · · · · · · · · · ·		
∠0.	10tals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.0)	l	l			

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



DIRECT BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2019

IAIC Group Code 0028					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
Life insurance	33,115				33,11
		XXX		XXX	
				ļ	
5. Totals (Sum of Lines 1 to 4)	33,115				33,11
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Life insurance: 6.1 Paid in cash or left on deposit					
				<u> </u>	
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
0 =					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits					
10. Matured endowments					
44 4 11 1 61					
	12,107				12,10
				ļ	
15. Totals	12,107				12,10
DETAILS OF WRITE-INS					
1301.				ļ	
1302.					
				 	
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					
	Credit Life				

		Ordinary	_	redit Life and Individual)		Group		ndustrial		Total
DIRECT DEATH BENEFITS AND MATURED	1 No. of	2	3 No. of Ind.Pols.	4	5	6	7 No. of	8	9 No. of	10
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior									1	
year	31	17,205,862		(a)					31	17,205,80
21. Issued during year	3	330,000							3	330,00
22. Other changes to in force (Net)									2	1, 136, 0
23. In force December 31 of current year	36	18.671.862		(a)					36	18.671.8

 current year
 36
 18,671,862
 (a)
 36

 (a) Includes Individual Credit Life Insurance prior year \$
 , current year \$

 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$
 , current year \$

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

ACCIDENT AND HEALTH INSURANCE

	•	ACCIDEIN AIND	IILALIII II100I	17-11-10-L		
		1	2	3	4	5
				Policyholder Dividends		
				Paid, Refunds to		
			Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only					
	All other (b)					
	Totals (sum of Lines 25.1 to 25.5)					
	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					



DIRECT BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE		NAIC Company Code 72222			
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total		
1.	Life insurance	812,015		27,661		839,670		
2.	Annuity considerations	41,000				41,00		
3.	Deposit-type contract funds		XXX		XXX			
4.	Other considerations							
5.	Totals (Sum of Lines 1 to 4)	853,015		27,661		880,670		
	POLICYHOLDERS/REFUNDS TO MEMBERS surance:							
6.1								
	Applied to provide paid-up additions or shorten the endowment or premium-paying period							
6.5	T (0							
Annui	, ,							
7.1	Paid in cash or left on deposit							
7.2								
7.3								
7.4	Totals (Sum of Lines 7.1 to 7.3)							
8.	Grand Totals (Lines 6.5 plus 7.4)							
	DIRECT CLAIMS AND BENEFITS PAID							
9.	Death benefits	615,000				615,00		
10.								
11.	Annuity benefits	43,907				43,90		
12.	Surrender values and withdrawals for life contracts	43,046				43,040		
13.								
	All other benefits, except accident and health	747				74		
15.	Totals	702,700				702,700		
	DETAILS OF WRITE-INS							
1301.								
1302.								
1303.								
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)							
			-					

		Ordinary	_	Credit Life and Individual)		Group		ndustrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4	5	6	7	8	9	10
MATURED ENDOWMENTS INCURRED	No. of Pols. & Certifs.	Amount	Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year										
Incurred during current year Settled during current year:	3	615,000							3	615,000
18.1 By payment in full	3	615,000							3	615,000
18.2 By payment on compromised claims	,									
18.4 Reduction by compromise										615,000
18.5 Amount rejected	·	615 000							_	615.000
19. Unpaid Dec. 31, current year (16+17-18.6)		010,000								013,000
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	911	346,818,415		(a)		3,653,700				350,472,115
21. Issued during year	82	33, 196, 047							82	33, 196, 047
22. Other changes to in force (Net)	(42)	(13,321,006)				(1,153,400)				(14,474,406)
23. In force December 31 of current year	951	366,693,456		(a)		2,500,300			951	369, 193, 756

ACCIDENT AND HEALTH INSURANCE

	-	CODEN AND	IILALIII IIIOOI	MITOL		
		1	2	3	4	5
				Policyholder Dividends		
				Paid, Refunds to		
			Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only					
	All other (b)					
	Totals (sum of Lines 25.1 to 25.5)			· · · · · · · · · · · · · · · · · · ·		
∠0.	10tals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.0)	l	l			



DIRECT BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE		NAIC Compa	ny Code 72222
		1	2	3	4	5
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1.	Life insurance	9,550,593		272,788		9,823,381
2.	Annuity considerations	1,507,706				1,507,706
3.			XXX		XXX	
4.						
5.	Totals (Sum of Lines 1 to 4)	11,058,299		272,788		11,331,087
Life in	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS isurance:					
	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4	Other					
	,					
Annui						
7.1						
7.3						
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits			59,200		6,438,577
10.						
11.		378,691				378,691
12.		397,038				397,038
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.		10,763				10,763
15.	Totals	7,165,869		59,200		7,225,069
	DETAILS OF WRITE-INS					
1301.						
1302.						
1303.						
1398.	Summary of Line 13 from overflow page					
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

	-	Ordinary		Credit Life and Individual)		Group		ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND		_	No. of			· ·	'	Ü		10
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year	4	2,311,791							4	2,311,791
17. Incurred during current year	33	5,673,957			2	97,200			35	5,771,157
Settled during current year:										
18.1 By payment in full	33	6.379.377			1	59.200			34	6.438.577
18.2 By payment on										, , ,
compromised claims	33	6,379,377			1	59,200			34	6,438,577
18.4 Reduction by compromise										
18.5 Amount rejected	_									
18.6 Total settlements	33	6.379.377			1	59.200				6,438,577
19. Unpaid Dec. 31, current		, , , , , , , , , , , , , , , , , , , ,								
year (16+17-18.6)	4	1,606,371			1	38,000			5	1,644,371
POLICY EXHIBIT 20. In force December 31, prior					No. of Policies					
year	10 143	4 379 981 339		(a)		35,563,700			10 143	4,415,545,039
21. Issued during year	960	433 100 000		(α)					960	433, 100,000
22. Other changes to in force (Net)						3,337,300				(237,475,348)
23. In force December 31 of current year	10.384	4.572.268.691		(a)		38.901.000			10.384	4.611.169.691

current year	10,001	1,012,200,001	(a)			00,001,000			10,001	٠,٠
(a) Includes Individual Credit Life In	nsurance p	orior year \$, current y	ear\$				•	
Includes Group Credit Life Insu	rance Loai	ns less than or equa	al to 60 months	s at issue, prior	year \$, Cl	ırrent year \$		
Loans greater than 60 months	at issue Bl	JT NOT GREATER	THAN 120 M	ONTHS, prior y	/ear\$, Cl	ırrent year \$		

ACCIDENT AND HEALTH INSURANCE

	-	CODEN AND	IILALIII IIIOOI	MITOL		
		1	2	3	4	5
				Policyholder Dividends		
				Paid, Refunds to		
			Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only					
	All other (b)					
	Totals (sum of Lines 25.1 to 25.5)			· · · · · · · · · · · · · · · · · · ·		
∠0.	10tals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.0)	l	l			



DIRECT BUSINESS IN THE STATE OF Utah

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE		NAIC Comp	any Code 72222
		1	2	3	4	5
	DIRECT PREMIUMS		Credit Life (Group	_		
<u></u>	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.		247,332		606		247,938
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.	Test					
5.	Totals (Sum of Lines 1 to 4)	247,332		606		247,938
	DIRECT DIVIDENDS TO					
	POLICYHOLDERS/REFUNDS TO MEMBERS					
	surance:					
6.3	Applied to provide paid-up additions or shorten the					
	endowment or premium-paying period					
0.4	Other					
	· · · · · · · · · · · · · · · · · · ·					
Annui						
7.1	Paid in cash or left on deposit					
	Applied to provide paid-up annuities					
7.3	Other					
	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits	3,404				3,404
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	3,404				3,404
	DETAILS OF WRITE-INS	- /				- ,
1301.						
1302						
1303						
1398	Summary of Line 13 from overflow page					<u></u>
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13					
. 300.	above)					
	· · · · · · · · · · · · · · · · · · ·			L		
		Credit Life		[<u></u>

	C	Ordinary		Credit Life and Individual)		Group	-	ndustrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4	5	6	7	8	9	10
MATURED ENDOWMENTS	No. of Pols. &		Ind.Pols. & Gr.		No. of		No. of Pols. &		No. of Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims	,									
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior										
vear	299	143,897,286		(a)		78,300			299	143,975,58
21. Issued during year	34	17,979,000							34	17,979,00
22. Other changes to in force (Net)		3,710,635				82,300				3,792,9
23. In force December 31 of current year	322	165.586.921		(a)		160.600			322	165.747.5

 current year
 322
 165,586,921
 (a)
 160,600
 322
 1

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

ACCIDENT AND HEALTH INSURANCE

	•		HEALIH MOOI	U 1110 E		
		1	2	3	4	5
	·			Policyholder Dividends		
				Paid, Refunds to		
			Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only					
	All other (b)					
	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					



DIRECT BUSINESS IN THE STATE OF Vermont

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE		NAIC Compa	ny Code 72222
	DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
4	AND ANNUITY CONSIDERATIONS	Ordinary 422.357	and Individual)	Group 194	Industrial	Total 422.551
1. 2.	Life insurance	, , , ,				,
2. 3.	,	15,489				15,489
3. 4.			XXX		XXX	
4. 5.	Totals (Sum of Lines 1 to 4)	437.846		194		400.040
ა.	DIRECT DIVIDENDS TO	437,840		194		438,040
Life in	POLICYHOLDERS/REFUNDS TO MEMBERS isurance:					
6.1	Paid in cash or left on deposit					
	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4	Other					
6.5	Totals (Sum of Lines 6.1 to 6.4)					
Annui						
7.1	Paid in cash or left on deposit					
7.3						
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	87				87
10.						
11.	Annuity benefits	77,294				77,294
12.		411,896				411,896
		154				154
15.	Totals	489,431				489,431
	DETAILS OF WRITE-INS					
1301.						
1302.						
1303.						
	Summary of Line 13 from overflow page					
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

	C	Ordinary		Credit Life and Individual)		Group	Ir	ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND			No. of							
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year	1	10,087								10,087
17. Incurred during current year	(1)	(10,000)							(1)	(10,000
Settled during current year:										
18.1 By payment in full		87								87
18.2 By payment on										
compromised claims		87								87
18.4 Reduction by compromise							L			
18.5 Amount rejected	_									
18.6 Total settlements		87								87
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior										
year	530	185,816,464		(a)		25,000			530	185,841,464
21. Issued during year	15	4,675,000					ļ		15	4,675,000
22. Other changes to in force (Net)	(30)	(10,845,118)							(30)	(10,845,11
23. In force December 31 of	515	179.646.346		(a)		25.000			515	179.671.34

 current year
 515
 179,646,346
 (a)
 25,000
 515
 1

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

ACCIDENT AND HEALTH INSURANCE

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



DIRECT BUSINESS IN THE STATE OF Virginia

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE		NAIC Compa	ny Code 72222
	DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.	Life insurance	2,045,851		29,942		2,075,793
2.	Annuity considerations	141,530				141,530
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	2,187,381		29,942		2,217,323
	DIRECT DIVIDENDS TO					
l ifo ir	POLICYHOLDERS/REFUNDS TO MEMBERS asurance:					
	D 111 1 1 0 1					
	Applied to pay renewal premiums					
6.3	endowment or premium-paying period					
6.4						
-	= · · · · = · · · · · · · · · · · · · ·					
Annu	,					
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	715.091				715,091
10.						
11.	Annuity benefits					567.919
12.		292,034				292,034
13.	Aggregate write-ins for miscellaneous direct claims					,
14.	All other benefits, except accident and health	696				696
15.	Totals	1,575,740				1,575,740
	DETAILS OF WRITE-INS					
1301	·					
1302						
1303						
1398						
1399	. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

			(Credit Life	l					
	C	Ordinary		and Individual)		Group	li	ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND			No. of							
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior		00.000							_	00.00
year	1	66,300							1	66,300
17. Incurred during current year	8	648,791							8	648,79
Settled during current year:										
18.1 By payment in full	9	715,091							9	715,09
18.2 By payment on										
compromised claims	. 9	715.091							.9	715,09
18.4 Reduction by compromise										., .
18.5 Amount rejected										
18.6 Total settlements	9	715 091							9	715,09
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior										
year	2,113	960, 151, 280		(a)		3,867,600				964,018,880
21. Issued during year	131	81,792,000							131	81,792,000
22. Other changes to in force (Net)	(109)	(30,064,010)				29,400			(109)	(30,034,61
23. In force December 31 of current year	2,135	1,011,879,270		(a)		3,897,000			2,135	1,015,776,27

	carrerre year	-,	., , ,	(α)		-,,			-,	- , -
(a	a) Includes Individual Credit Life I	nsurance p	rior year \$, current year \$					
	Includes Group Credit Life Insu	ırance Loaı	ns less than or equ	al to 60 months	at issue, prior year	\$, C	urrent year \$		
	Loans greater than 60 months	at issue Bl	JT NOT GREATER	R THAN 120 MC	ONTHS, prior year \$, C	urrent year \$		

ACCIDENT AND HEALTH INSURANCE

	/ (O O I D E I (I / (I I D		V		
	1	2	3	4	5
			Policyholder Dividends		
			Paid, Refunds to		
		Direct Premiums	Members or Credited		Direct Losses
	Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fe	96				
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25	i.6)				

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



DIRECT BUSINESS IN THE STATE OF Washington

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE		NAIC Compa	ny Code 72222
	DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.		2,148,497		•		2,249,605
2.	_ :	672,929				672,929
3.			XXX		XXX	
4.						
5.	Totals (Sum of Lines 1 to 4)	2,821,426		101,108		2,922,534
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS INSURINCE:					
	Applied to pay renewal premiums					
	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4	Other					
	Totals (Sum of Lines 6.1 to 6.4)					
Annui						
7.1						
7.3						
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
_	DIRECT CLAIMS AND BENEFITS PAID	007.474				007.47
9.	Death benefits					
10.		892				89
11.	Annuity benefits	70 , 163				70 , 16
12. 13.	Aggregate write-ins for miscellaneous direct claims	69,396				69,39
14.		5,386				5,38
	Totals	373,011				373.01
	DETAILS OF WRITE-INS	373,011				370,01
1301						
1302						
1303.						
1398						
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

		Ordinary		Credit Life and Individual)		Group	lı lı	ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND	·	_	No. of	•		· ·		· ·		
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year	2	70 , 174							2	70, 174
17. Incurred during current year	5	165,529							5	165,529
Settled during current year:										
18.1 By payment in full	6	227.174							6	227.174
18.2 By payment on										,
compromised claims	. 6	227.174							6	227 , 174
18.4 Reduction by compromise		,								,
18.5 Amount rejected										
18.6 Total settlements	6	227 174							6	227 . 174
19. Unpaid Dec. 31, current										
year (16+17-18.6)	1	8,529							1	8,529
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior	0.540	4 000 040 000				40 004 704			0.547	4 000 000 040
year	2,516								2,51/	1,093,308,019
21. Issued during year	226	11/,917,846							226	117,917,846
22. Other changes to in force (Net)	(122)	(31,493,812)				637,000			(122)	(30,856,812
23. In force December 31 of current year	2.620	1.166.670.322		(a)	1	13.698.731			2.621	1.180.369.05

 current year
 2,620
 1,166,670,322
 (a)
 1
 13,698,731
 2,621
 1,1

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

 , current year \$

 , current year \$

ACCIDENT AND HEALTH INSURANCE

	-	CODEN AND	IILALIII IIIOOI	MITOL		
		1	2	3	4	5
				Policyholder Dividends		
				Paid, Refunds to		
			Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only					
	All other (b)					
	Totals (sum of Lines 25.1 to 25.5)			· · · · · · · · · · · · · · · · · · ·		
∠0.	10tals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.0)	l	l			



DIRECT BUSINESS IN THE STATE OF West Virginia

DURING THE YEAR 2019

IAIC	Group Code 0028	LI	FE INSURANCE		NAIC Compa	ny Code 72222
		1	2	3	4	5
	DIRECT PREMIUMS	0 "	Credit Life (Group			
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.		103,209				103,20
2.	_ :	5,900				5,90
3.						
4. 5.	Totals (Sum of Lines 1 to 4)	100 100				100 10
Э.	DIRECT DIVIDENDS TO	109,109				109,10
	POLICYHOLDERS/REFUNDS TO MEMBERS					
_ife ir	surance:					
	Paid in cash or left on deposit					
	Applied to pay renewal premiums					
	Applied to provide paid-up additions or shorten the					
	endowment or premium-paying period					
6.4	Other					
	Totals (Sum of Lines 6.1 to 6.4)					
4nnui						
	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					100,000
10.	Matured endowments				ļ	
	Annuity benefits	21,038				
12.		5,222				5,22
13.	Aggregate write-ins for miscellaneous direct claims					
1/	and benefits paidAll other benefits, except accident and health					
	Totals	126.260			<u></u>	126.26
10.	DETAILS OF WRITE-INS	120,200				120,20
1201						
					 	
1302. 1303					†	
1300. 1308	Summary of Line 13 from overflow page				†	
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13				}	
1000.	above)					

				redit Life						
	C	rdinary	(Group	and Individual)		Group	li li	ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND			No. of							
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year		400.000								400.000
17. Incurred during current year		100,000							1	100,000
Settled during current year:										
18.1 By payment in full	1 .	100,000							1	100,000
18.2 By payment on										
compromised claims	·									
18.3 Totals paid									1	100,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	1	100,000							1	100,000
19. Unpaid Dec. 31, current										
year (16+17-18.6)										
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	123	39,695,893		(a)					123	
21. Issued during year	6	1,527,000							6	1,527,000
22. Other changes to in force	(10)	/ /							(10)	
(Net)	(12)	(4, 198, 893)							(12)	(4, 198, 893
23. In force December 31 of	447	07 004 000							447	07.004.004
current year	117	37,024,000		(a)					117	37,024,000

L	ourront you.		** , -= - ,	(α)						
((a) Includes Individual Credit Life I	nsurance p	rior year \$, current	year \$	 		•	
	Includes Group Credit Life Insu	rance Loar	ns less than or equ	al to 60 month	ns at issue, prio	r year \$, C	urrent year \$		
	Loans greater than 60 months	at issue BU	IT NOT GREATER	R THAN 120 M	MONTHS, prior	year \$, C	urrent year \$		

ACCIDENT AND HEALTH INSURANCE

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



DIRECT BUSINESS IN THE STATE OF Wisconsin

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE	NAIC Company Code 72222		
	DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.		512,026		•		530 , 180
2.		5,167				5 , 167
3.					XXX	
4.						FOE 047
5.	Totals (Sum of Lines 1 to 4) DIRECT DIVIDENDS TO	517, 193		18,154		535,347
	POLICYHOLDERS/REFUNDS TO MEMBERS surrance:					
	Applied to pay renewal premiums					
	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4	Other					
	Totals (Sum of Lines 6.1 to 6.4)					
Annui						
7.1						
7.3						
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
_	DIRECT CLAIMS AND BENEFITS PAID	405 000				
9.	Death benefits	,				405,000
10.						
11.	Annuity benefits	6,215				6,215
12. 13.	Aggregate write-ins for miscellaneous direct claims	24,021				24,021
11						
	All other benefits, except accident and health	405 000				405.000
15.	DETAILS OF WRITE-INS	435,236				435,236
1204						
1307.						
1302.						
1303.						
					······	
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

	C)rdinary		Credit Life and Individual)		Group	li	ndustrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4	5	6	7	8	9	10
MATURED ENDOWMENTS INCURRED	No. of Pols. & Certifs.	Amount	Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior										
year17. Incurred during current year Settled during current year:	3	405,000							3	405,000
18.1 By payment in full	3	405 000							3	405 000
18 2 By payment on										
compromised claims	3	405,000							3	405,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	3	405,000							3	405,000
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	729	289 560 077		(a)		2 344 900			729	291,904,977
21. Issued during year	53	18.196.664		(ω)						
22. Other changes to in force (Net)						(112,500)				(16,171,568
23. In force December 31 of current year	739	291.697.673		(a)		2.232.400			739	293.930.07

 current year
 739
 291,697,673
 (a)
 2,232,400
 739
 2

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

ACCIDENT AND HEALTH INSURANCE

	-	CODEN AND	IILALIII IIIOOI	MITOL		
		1	2	3	4	5
				Policyholder Dividends		
				Paid, Refunds to		
			Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only					
	All other (b)					
	Totals (sum of Lines 25.1 to 25.5)			· · · · · · · · · · · · · · · · · · ·		
∠0.	10tals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.0)	l	l			



DIRECT BUSINESS IN THE STATE OF Wyoming

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE	E	NAIC Compa	any Code 72222
		1	2	3	4	5
	DIRECT PREMIUMS		Credit Life (Group	_		
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.		43,512				43,512
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.						
5.	Totals (Sum of Lines 1 to 4)	43,512				43,512
	DIRECT DIVIDENDS TO					
Life in	POLICYHOLDERS/REFUNDS TO MEMBERS surrance:					
6.1	Paid in cash or left on deposit					
	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the					
	endowment or premium-paying period					
6.4	Other					
	Totals (Sum of Lines 6.1 to 6.4)					
Annui						
7.1	Paid in cash or left on deposit					
	Applied to provide paid-up annuities					
7.3	Other					
	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
9.	DIRECT CLAIMS AND BENEFITS PAID Death benefits					
10.	Matured endowments					
	Annuity benefits					001
12.		10 100				
	Aggregate write-ins for miscellaneous direct claims	10,403				10,40ა
	and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	11,304				11,304
	DETAILS OF WRITE-INS					
1301.						
1302.						
1303.						
1398.	Summary of Line 13 from overflow page					
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					
	<u> </u>	Crodit Life	1			

				redit Life						
	0	rdinary	(Group	and Individual)		Group	li li	ndustrial		Total
DIRECT DEATH BENEFITS AND	1	2	No. of	4	5	6	7	8	9	10
MATURED ENDOWMENTS INCURRED	No. of Pols. & Certifs.	Amount	Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior	Ceruis.	Amount	Ceruis.	Amount	Ceruis.	Amount	Ceruis.	Amount	Ceruis.	Amount
year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior		04 000 -0-							F.	04 000 =0
year21. Issued during year	51 . 4	21,239,597		(a)					51 4	21,239,59 730,00
22. Other changes to in force (Net)	(6)	(1,533,943)							(6)	(1,533,94
23. In force December 31 of current year	49	20,435,654		(a)					49	20,435,65

_	ourrorn your		,,	(α)					
(a	a) Includes Individual Credit Life In	nsurance p	orior year \$, current	year \$	 		
	Includes Group Credit Life Insu	rance Loa	ns less than or equ	ual to 60 month	hs at issue, pric	r year \$, C	urrent year \$	
	Loans greater than 60 months	at issue Bl	JT NOT GREATE	R THAN 120 N	MONTHS, prior	year \$, C	urrent year \$	

ACCIDENT AND HEALTH INSURANCE

	/ (O O I D E I (I / (I I D		V		
	1	2	3	4	5
			Policyholder Dividends		
			Paid, Refunds to		
		Direct Premiums	Members or Credited		Direct Losses
	Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fe	96				
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25	i.6)				



DIRECT BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2019

NAIC	Group Code 0028	LI	FE INSURANCE	NAIC Company Code 72222		
	DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.		97,623,682		5,182,633		102,806,315
2.		12,034,707				12,034,707
3.		696 , 145	XXX		XXX	696 , 145
4.						
5.	Totals (Sum of Lines 1 to 4)	110,354,534		5,182,633		115,537,167
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS INSURANCE:					
	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
O.5 Annui	Totals (Sum of Lines 6.1 to 6.4)					
7.1						
7.3						
7.4						
8.	Grand Totals (Lines 6.5 plus 7.4)					
0.	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	EU 040 034		2 220 000		E4 270 024
10.		892		, ,		
11.		22,090,405				22,090,405
12.	, , , , , , , , , , , , , , , , , , , ,	12,532,123				12,532,123
13.	Aggregate write-ins for miscellaneous direct claims	12,002,120				, ,
14.		326,712				326.712
15.	Totals	85.891.066		3,338,900		89,229,966
	DETAILS OF WRITE-INS	,,,		-,,		,,000
1301.	·					
1302						
1303.						
	0 (1) 40 (
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

	(Ordinary		Credit Life and Individual)		Group		ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND	•	-	No. of	•		· ·	·	ŭ		
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year	50	7,563,838			3	130 , 400			53	7,694,238
17. Incurred during current year	359	53,817,276			39	4,050,100			398	57,867,376
Settled during current year:										
18.1 By payment in full	351	50,940,934			31	3,338,900			382	54,279,834
18.2 By payment on										
compromised claims	351	50,940,934			31	3,338,900			382	54,279,834
18.4 Reduction by compromise										
18.5 Amount rejected	_									
18.6 Total settlements	351	50 940 934			31	3 338 900				54 279 834
19. Unpaid Dec. 31, current										., ,
year (16+17-18.6)	58	10,440,180			11	841,600			69	11,281,780
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior					_					
year	107 , 755									43,421,811,832
21. Issued during year	7,884	3,359,270,983							7,884	3,359,270,983
22. Other changes to in force (Net)	(6,664)	(1,859,573,137)				17,623,300			(6,664)	(1,841,949,837
23. In force December 31 of current year	108.975	44.223.729.947		(a)	2	715.403.031			108.977	44.939.132.978

 current year
 108,975
 44,223,729,947
 (a)
 2
 715,403,031
 108,977
 44,9

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

ACCIDENT AND HEALTH INSURANCE

	•		HEALIH MOOI	U 1110 E		
		1	2	3	4	5
	·			Policyholder Dividends		
				Paid, Refunds to		
			Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only					
	All other (b)					
	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

INTEREST MAINTENANCE RESERVE

		1 Amount
1.	Reserve as of December 31, Prior Year	8,851,572
2.	Current year's realized pre-tax capital gains/(losses) of \$6,148,045 transferred into the reserve net of taxes of \$1,291,090	4,856,955
3.	Adjustment for current year's liability gains/(losses) released from the reserve	
4.	Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3)	13,708,527
5.	Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)	2,069,409
6.	Reserve as of December 31, current year (Line 4 minus Line 5)	11,639,118

AMORTIZATION

		1	2	3	4
	Year of Amortization	Reserve as of December 31, Prior Year	Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	Balance Before Reduction for Current Year's Amortization (Cols. 1 + 2 + 3)
1.	2019	1,680,168	389,241		2,069,409
2.	2020	1,234,527	595,991		1,830,518
3.	2021	1,008,387	376,320		1,384,707
4.	2022	871,403	351,788		1,223,191
5.	2023	817,316	328,405		1,145,721
6.	2024	742,101	303,258		1,045,359
7.	2025	611,042	272,951		883,993
8.	2026	472,788	242,899		715,687
9.	2027	338,383	209,831		548,214
10.	2028	192 , 179	174,889		367,068
11.	2029	128,988	138,436		267,424
12.	2030	104,461	120,722		225 , 183
13.	2031	69,246	118,288		187,534
14.	2032	64,913	117,579		182,492
15.	2033	74,701	114,360		189,061
16.	2034	76,796	114,657		191,453
17.	2035	72,024	110,202		182,226
18.	2036	67,111	105,240		172,351
19.	2037	58,851	101,304		160 , 155
20.	2038	47,046	95,768		142,814
21.	2039	35,444	90,221		125,665
22.	2040	27,741	81,654		109,395
23.	2041	19,533	72,673		92,206
24.	2042		60,046		73,392
25.	2043	·	49,625		59,715
26.	2044	7,129	38,016		45,145
27.	2045	4,329	29,115		33,444
28.	2046	1,529	23, 173		24,702
29.	2047	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	16.637		16,637
30.	2048		10,101		10 , 101
31.	2049 and Later		3,565		3,565
32.	Total (Lines 1 to 31)	8,851,572	4,856,955		13,708,527

ASSET VALUATION RESERVE

		Default Component			Equity Component		
	1	2	3	4	5 Real Estate and	6	7
	Other Than Mortgage Loans	Mortgage Loans	Total (Cols. 1 + 2)	Common Stock	Other Invested Assets	Total (Cols. 4 + 5)	Total Amount (Cols. 3 + 6)
Reserve as of December 31, prior year	2,765,162	534,909	3,300,071	3,581,091	7,984,389	11,565,480	14,865,552
Realized capital gains/(losses) net of taxes - General Account				3,206,268	1,005,263	4,211,531	4,211,531
Realized capital gains/(losses) net of taxes - Separate Accounts	·						
Unrealized capital gains/(losses) net of deferred taxes - General Account				5,849,429	(664,367)	5, 185, 062	5, 185,062
Unrealized capital gains/(losses) net of deferred taxes - Separate Accounts							
Capital gains credited/(losses charged) to contract benefits, payments or reserves							
7. Basic contribution	526,780	198,886	725,666				725,666
8. Accumulated balances (Lines 1 through 5 - 6 + 7)	3,291,942	733,795	4,025,737	12,636,788	8,325,285	20,962,073	24,987,810
9. Maximum reserve	3,051,413	856,861	3,908,274	6,279,422	11,154,211	17,433,634	21,341,907
10. Reserve objective	1,643,945	658,443	2,302,388	6,275,700	11,154,211	17,429,912	19,732,299
11. 20% of (Line 10 - Line 8)	(329,599)	(15,070)	(344,670)	(1,272,217)	565,785	(706,432)	(1,051,102)
12. Balance before transfers (Lines 8 + 11)	2,962,342	718,725	3,681,067	11,364,570	8,891,071	20,255,641	23,936,708
13. Transfers				(2,263,140)	2,263,140		
14. Voluntary contribution							
15. Adjustment down to maximum/up to zero				(2,822,008)		(2,822,008)	(2,822,008)
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	2,962,342	718,725	3,681,067	6,279,422	11, 154, 211	17,433,633	21,114,700

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

	ı					OWN ONEN						_
			1	2	3	4		Contribution	Reserv	e Objective		m Reserve
Line	NAIC			Reclassify		Balance for	5	6	7	8	9	10
Num-	Desig-		Book/Adjusted	Reclassify Related Party	Add Third Party	AVR Reserve Calculations		A 4		A 4		A 4
ber	nation		Carrying Value	Encumbrances	Encumbrances	(Cols. 1 + 2 + 3)	Factor	Amount (Cols.4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
Dei	Hation	LONG-TERM BONDS	Carrying value	Liteuribrances	Liteuribrances	(COIS. 1 + 2 + 3)	Facioi	(COIS.4 X 3)	Factor	(COIS. 4 X 7)	Facioi	(COIS. 4 X 9)
1		Exempt Obligations	347,424,068	XXX	XXX	347,424,068	0.0000		0.0000		0.0000	
1.		1 0	504,077,171	XXX	XXX	504,077,171	0.0005	252,039	0.0016	806,523	0.0033	1,663,455
2.	1	Highest Quality	130,470,319			130,470,319	0.0021	252,039	0.0064	835,010	0.0106	1,882,985
3.	2	High Quality	130,470,319	XXX	XXX	130,470,319	0.0021	2/3,900	0.0263		0.0376	1,362,963
4.	3	Medium Quality		XXX	XXX							
5.	4	Low Quality		XXX	XXX		0.0245		0.0572		0.0817	
6.	5	Lower Quality		XXX	XXX		0.0630		0.1128		0.1880	
7.	6	In or Near Default		XXX	XXX		0.0000		0.2370		0.2370	
8.		Total Unrated Multi-class Securities Acquired by Conversion	221 271 552	XXX	XXX	224 274 572	XXX		XXX		XXX	
9.		Total Long-Term Bonds (Sum of Lines 1 through 8)	981,971,558	XXX	XXX	981,971,558	XXX	526,026	XXX	1,641,534	XXX	3,046,440
		PREFERRED STOCK					0.0005		0 0040		0.0000	
10.	1	Highest Quality		XXX	XXX		0.0005		0.0016		0.0033	
11.	2	High Quality		XXX	XXX		0.0021		0.0064		0.0106	
12.	3	Medium Quality		XXX	XXX		0.0099		0.0263		0.0376	
13.	4	Low Quality		XXX	XXX		0.0245		0.0572		0.0817	
14.	5	Lower Quality		XXX	XXX		0.0630		0.1128		0.1880	
15.	6	In or Near Default		XXX	XXX		0.0000		0.2370		0.2370	
16.		Affiliated Life with AVR		XXX	XXX		0.0000		0.0000		0.0000	
17.		Total Preferred Stocks (Sum of Lines 10 through 16)		XXX	XXX		XXX		XXX		XXX	
		SHORT - TERM BONDS										
18.		Exempt Obligations		XXX	XXX		0.000		0.000		0.000	
19.	1	Highest Quality	1,506,868	XXX	XXX	1,506,868	0.0005	753	0.0016	2,411	0.0033	4,973
20.	2	High Quality		XXX	XXX		0.0021		0.0064		0.0106	
21.	3	Medium Quality		XXX	XXX		0.0099		0.0263		0.0376	
22.	4	Low Quality		XXX	XXX		0.0245		0.0572		0.0817	
23.	5	Lower Quality		XXX	XXX		0.0630		0.1128		0.1880	
24.	6	In or Near Default		XXX	XXX		0.0000		0.2370		0.2370	
25.		Total Short - Term Bonds (Sum of Lines 18 through 24)	1,506,868	XXX	XXX	1,506,868	XXX	753	XXX	2,411	XXX	4,973
		DERIVATIVE INSTRUMENTS					Ì					
26.		Exchange Traded		XXX	XXX		0.0005		0.0016		0.0033	
27.	1	Highest Quality		XXX	XXX		0.0005		0.0016		0.0033	
28.	2	High Quality		XXX	XXX		0.0021		0.0064		0.0106	
29.	3	Medium Quality		XXX	XXX		0.0099		0.0263		0.0376	
30.	4	Low Quality		XXX	XXX		0.0245		0.0572		0.0817	
31.	5	Lower Quality		XXX	XXX		0.0630		0.1128		0.1880	
32.	6	In or Near Default		XXX	XXX		0.0000		0.2370		0.2370	
33.	_	Total Derivative Instruments		XXX	XXX		XXX		XXX		XXX	
34.		Total (Lines 9 + 17 + 25 + 33)	983,478,426	XXX	XXX	983,478,426	XXX	526,780	XXX	1,643,945	XXX	3,051,413

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

			1	2	3	4	Basic Co	ontribution	Reserve	Objective	Maximur	n Reserve
Line Num-	NAIC Desig-		Book/Adjusted	Reclassify Related Party	Add Third Party	Balance for AVR Reserve Calculations	5	6 Amount	7	8 Amount	9	10 Amount
ber	nation	Description	Carrying Value	Encumbrances	Encumbrances	(Cols. 1 + 2 + 3)	Factor	(Cols.4 x 5)	Factor	(Cols. 4 x 7)	Factor	(Cols. 4 x 9)
		MORTGAGE LOANS										
		In Good Standing:										
35.		Farm Mortgages - CM1 - Highest Quality			XXX		0.0011		0.0057		0.0074	
36.		Farm Mortgages - CM2 - High Quality			XXX		0.0040		0.0114		0.0149	
37.		Farm Mortgages - CM3 - Medium Quality			XXX		0.0069		0.0200		0.0257	
38.		Farm Mortgages - CM4 - Low Medium Quality			XXX		0.0120		0.0343		0.0428	
39.		Farm Mortgages - CM5 - Low Quality			XXX		0.0183		0.0486		0.0628	
40.		Residential Mortgages - Insured or Guaranteed			XXX		0.0003		0.0007		0.0011	
41.		Residential Mortgages - All Other			XXX		0.0015		0.0034		0.0046	
42.		Commercial Mortgages - Insured or Guaranteed			XXX		0.0003		0.007		0.0011	
43.		Commercial Mortgages - All Other - CM1 - Highest Quality	35, 131, 317		XXX	35, 131, 317	0.0011	38,644	0.0057	200,249	0.0074	259,972
44.		Commercial Mortgages - All Other - CM2 - High Quality	32,306,685		XXX	32,306,685	0.0040	129,227	0.0114	368,296	0.0149	481,370
45.		Commercial Mortgages - All Other - CM3 - Medium Quality	4,494,920		XXX	4,494,920	0.0069	31,015	0.0200	89,898	0.0257	115,519
46.		Commercial Mortgages - All Other - CM4 - Low Medium			2004		0.0400		0.0040		0.0400	
		Quality			XXX		0.0120		0.0343		0.0428	
47.		Commercial Mortgages - All Other - CM5 - Low Quality			XXX		0.0183		0.0486		0.0628	
		Overdue, Not in Process:					0.0400		0.0000		0.4074	
48.		Farm Mortgages			XXX		0.0480		0.0868		0.1371	
49.		Residential Mortgages - Insured or Guaranteed			XXX		0.0006		0.0014		0.0023	
50.		Residential Mortgages - All Other			XXX		0.0029		0.0066		0.0103	
51.		Commercial Mortgages - Insured or Guaranteed			XXX		0.0006		0.0014		0.0023	
52.		Commercial Mortgages - All Other			XXX		0.0480		0.0868		0 . 1371	
		In Process of Foreclosure:										
53.		Farm Mortgages			XXX		0.0000		0.1942		0.1942	
54.		Residential Mortgages - Insured or Guaranteed			XXX		0.0000		0.0046		0.0046	
55.		Residential Mortgages - All Other			XXX		0.0000		0.0149		0.0149	
56.		Commercial Mortgages - Insured or Guaranteed			XXX		0.0000		0.0046		0.0046	
57.		Commercial Mortgages - All Other			XXX		0.0000		0.1942		0.1942	
58.		Total Schedule B Mortgages (Sum of Lines 35 through 57)	71,932,922		XXX	71,932,922	XXX	198,886	XXX	658,443	XXX	856,86
59.		Schedule DA Mortgages			XXX		0.0034		0.0114		0.0149	
60.		Total Mortgage Loans on Real Estate (Lines 58 + 59)	71,932,922		XXX	71,932,922	XXX	198,886	XXX	658,443	XXX	856,86

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

			1	2	3			ontribution	Reserve	Obiective	Maximur	n Reserve
Line Num-	Desig-		Book/Adjusted	Reclassify Related Party	Add Third Party	Balance for AVR Reserve Calculations	5	6 Amount	7	8 Amount	9	10 Amount
ber	nation	Description	Carrying Value	Encumbrances	Encumbrances	(Cols. 1 + 2 + 3)	Factor	(Cols.4 x 5)	Factor	(Cols. 4 x 7)	Factor	(Cols. 4 x 9)
		COMMON STOCK										
1.		Unaffiliated - Public	54,186,634	XXX	XXX	54 , 186 , 634	0.000		0.1157 (a)	6,269,394	0.1157 (a)	6,269,394
2.		Unaffiliated - Private		XXX	XXX		0.000		0.1945		0.1945	
3.		Federal Home Loan Bank	1,033,900	XXX	XXX	1,033,900	0.000		0.0061	6,307	0.0097	10,029
4.		Affiliated - Life with AVR		XXX	XXX		0.000		0.0000		0.000	
		Affiliated - Investment Subsidiary:										
5.		Fixed Income - Exempt Obligations					XXX		XXX		XXX	
6.		Fixed Income - Highest Quality					XXX		XXX		XXX	
7.		Fixed Income - High Quality					XXX		XXX		XXX	
8.		Fixed Income - Medium Quality					XXX		XXX		XXX	
9.		Fixed Income - Low Quality					XXX		XXX		XXX	
10.		Fixed Income - Lower Quality					XXX		XXX		XXX	
11.		Fixed Income - In/Near Default					XXX		XXX		XXX	
12.		Unaffiliated Common Stock - Public					0.000		0.1157 (a)		0.1157 (a)	
13.		Unaffiliated Common Stock - Private					0.000		0.1945		0.1945	
14.		Real Estate					(b)		(b)		(b)	
15.		Affiliated - Certain Other (See SVO Purposes and Procedures Manual)		xxx	xxx		0.0000		0.1580		0.1580	
16.		Affiliated - All Other		XXX	XXX		0.0000		0.1945		0.1945	
17.		Total Common Stock (Sum of Lines 1 through 16)	55,220,534			55,220,534	XXX		XXX	6,275,700	XXX	6,279,422
		REAL ESTATE										
18.		Home Office Property (General Account only)					0.000		0.0912		0.0912	
19.		Investment Properties					0.000		0.0912		0.0912	
20.		Properties Acquired in Satisfaction of Debt					0.0000		0.1337		0.1337	
21.		Total Real Estate (Sum of Lines 18 through 20)					XXX		XXX		XXX	
		OTHER INVESTED ASSETS INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS										
22.		Exempt Obligations		XXX	XXX		0.000		0.0000		0.000	
23.	1	Highest Quality		XXX	XXX		0.005		0.0016		0.0033	
24.	2	High Quality		XXX	XXX		0.0021		0.0064		0.0106	
25.	3	Medium Quality		XXX	XXX		0.0099		0.0263		0.0376	
26.	4	Low Quality		XXX	XXX		0.0245		0.0572		0.0817	
27.	5	Lower Quality		XXX	XXX		0.0630		0.1128		0.1880	
28.	6	In or Near Default		XXX	XXX		0.0000		0.2370		0.2370	
29.		Total with Bond Characteristics (Sum of Lines 22 through 28)		XXX	XXX		XXX		XXX		XXX	

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

			EQUIT	AND OTH	EL IIAAES	DIED AGG	E I CON					
			1	2	3	4	Basic C	Contribution	Reserv	e Objective	Maximu	m Reserve
						Balance for	5	6	7	8	9	10
Line				Reclassify		AVR Reserve						
Num-			Book/Adjusted	Related Party	Add Third Party	Calculations		Amount	_	Amount		Amount
ber	nation	Description	Carrying Value	Encumbrances	Encumbrances	(Cols. 1 + 2 + 3)	Factor	(Cols.4 x 5)	Factor	(Cols. 4 x 7)	Factor	(Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS										
		OF PREFERRED STOCKS										
30.	1	Highest Quality		XXX	XXX		0.0005		0.0016		0.0033	
31.	2	High Quality		XXX	XXX		0.0021		0.0064		0.0106	
32.	3	Medium Quality		XXX	XXX		0.0099		0.0263		0.0376	
33.	4	Low Quality		XXX	XXX		0.0245		0.0572		0.0817	
34.	5	Lower Quality		XXX	XXX		0.0630		0.1128		0.1880	
35.	6	In or Near Default		XXX	XXX		0.0000		0.2370		0.2370	
36.		Affiliated Life with AVR		XXX	XXX		0.0000		0.0000		0.0000	
37.		Total with Preferred Stock Characteristics (Sum of Lines 30										
		through 36)		XXX	XXX		XXX		XXX		XXX	
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS										
		OF MORTGAGE LOANS										
		In Good Standing Affiliated:										
38.		Mortgages - CM1 - Highest Quality			XXX		0.0011		0.0057		0.0074	
39.		Mortgages - CM2 - High Quality			XXX		0.0040		0.0114		0.0149	
40.		Mortgages - CM3 - Medium Quality			XXX		0.0069		0.0200		0.0257	
41.		Mortgages - CM4 - Low Medium Quality			XXX		0.0120		0.0343		0.0428	
42.		Mortgages - CM5 - Low Quality			XXX		0.0183		0.0486		0.0628	
43.		Residential Mortgages - Insured or Guaranteed			XXX		0.0003		0.007		0.0011	
44.		Residential Mortgages - All Other		XXX	XXX		0.0015		0.0034		0.0046	
45.		Commercial Mortgages - Insured or Guaranteed			XXX		0.0003		0.0007		0.0011	
		Overdue. Not in Process Affiliated:										
46.		Farm Mortgages			XXX		0.0480		0.0868		0.1371	
47.		Residential Mortgages - Insured or Guaranteed			XXX		0.0006		0.0014		0.0023	
48.		Residential Mortgages - All Other			XXX		0.0029		0.0066		0.0103	
49.		Commercial Mortgages - Insured or Guaranteed			XXX		0.0006		0.0014		0.0023	
50.		Commercial Mortgages - All Other			XXX		0.0480		0.0868		0.1371	
		In Process of Foreclosure Affiliated:										
51.		Farm Mortgages			XXX		0.0000		0.1942		0.1942	
52.		Residential Mortgages - Insured or Guaranteed			XXX		0.0000		0.0046		0.0046	
53.		Residential Mortgages - All Other			XXX		0.0000		0.0149		0.0149	
54.		Commercial Mortgages - Insured or Guaranteed			XXX		0.0000		0.0046		0.0046	
55.		Commercial Mortgages - All Other			XXX		0.0000		0.1942		0.1942	
56.		Total Affiliated (Sum of Lines 38 through 55)			XXX		XXX		XXX		XXX	
57.		Unaffiliated - In Good Standing With Covenants			XXX		(c)		(c)		(c)	
58.		Unaffiliated - In Good Standing With Covenants Unaffiliated - In Good Standing Defeased With Government					(C)		(C)		(0)	
56.		Securities			XXX		0.0011		0.0057		0.0074	
59.		Unaffiliated - In Good Standing Primarily Senior			XXX		0.0040		0.0114		0.0149	
60.		Unaffiliated - In Good Standing All Other			XXX		0.0069		0.0200		0.0257	
61.		Unaffiliated - In Good Standing All Other			XXX		0.0480		0.0868		0.1371	
62.		Unaffiliated - In Process of Foreclosure			XXX		0.0000		0.1942		0.1942	
63.		Total Unaffiliated (Sum of Lines 57 through 62)			XXX		XXX		XXX		XXX	
64.		Total with Mortgage Loan Characteristics (Lines 56 + 63)			XXX		XXX		XXX		XXX	

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

			1	2	3	4	Basic Co	ontribution	Reserv	e Objective	Maximur	n Reserve
Line	NAIC			Reclassify		Balance for AVR Reserve	5	6	7	8	9	10
Num-	Desig-		Book/Adjusted	Related Party	Add Third Party	Calculations		Amount		Amount		Amount
ber	nation	Description	Carrying Value	Encumbrances	Encumbrances	(Cols. 1 + 2 + 3)	Factor	(Cols.4 x 5)	Factor	(Cols. 4 x 7)	Factor	(Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS										
		OF COMMON STOCK					0.0000		0.4500		0.4500	
65.		Unaffiliated Public		XXX	XXX		0.0000		0.1580 (a)		0.1580 (a)	
66.		Unaffiliated Private		XXX	XXX		0.0000		0.1945		0.1945	
67.		Affiliated Life with AVR		XXX	XXX		0.000.		0.0000		0.0000	
68.		Affiliated Certain Other (See SVO Purposes & Procedures		2007	2004		0.0000		0.1580		0.4500	
		Manual)		XXX	XXX						0.1580	
69.		Affiliated Other - All Other		XXX	XXX		0.0000		0.1945		0.1945	
70.		Total with Common Stock Characteristics (Sum of Lines 65		100/	2007		2007		2007		2007	
		through 69) INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS		XXX	XXX		XXX		XXX		XXX	
		OF REAL ESTATE										
		-					0.0000		0.0040		0.0040	
71.		Home Office Property (General Account only)					0.0000		0.0912		0.0912	
72.		Investment Properties					0.0000		0.0912		0.0912	
73		Properties Acquired in Satisfaction of Debt					0.0000		0.1337		0.1337	
74.		Total with Real Estate Characteristics (Sum of Lines 71 through 73)					xxx		xxx		XXX	
		LOW INCOME HOUSING TAX CREDIT INVESTMENTS										
75.		Guaranteed Federal Low Income Housing Tax Credit					0.0003		0.006		0.0010	
76.		Non-guaranteed Federal Low Income Housing Tax Credit					0.0063		0.0120		0.0190	
77.		Guaranteed State Low Income Housing Tax Credit					0.0003		0.0006		0.0010	
78.		Non-guaranteed State Low Income Housing Tax Credit					0.0063		0.0120		0.0190	
79.		All Other Low Income Housing Tax Credit					0.0273		0.0600		0.0975	
80.		Total LIHTC (Sum of Lines 75 through 79)					XXX		XXX		XXX	
		ALL OTHER INVESTMENTS										
81.		NAIC 1 Working Capital Finance Investments		XXX			0.000		0.0042		0.0042	
82.		NAIC 2 Working Capital Finance Investments		XXX			0.000		0.0137		0.0137	
83.		Other Invested Assets - Schedule BA	70,596,274	XXX		70,596,274	0.0000		0.1580	11, 154, 211	0.1580	11, 154, 21
84.		Other Short-Term Invested Assets - Schedule DA	, ,	XXX			0.0000		0.1580	, ,	0.1580	. ,
85.		Total All Other (Sum of Lines 81, 82, 83 and 84)	70,596,274	XXX		70,596,274	XXX		XXX	11, 154, 211	XXX	11, 154, 21
86.		Total Other Invested Assets - Schedules BA & DA (Sum of Lines 29, 37, 64, 70, 74, 80 and 85)	70,596,274	, , , , ,		70,596,274	XXX		XXX	11,154,211	XXX	11, 154, 21

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

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

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

ASSET VALUATION RESERVE

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

1	2	3	4	5	6	7	8	9
				NAIC Designation or Other Description of Asset		AVR	AVR	AVR Maximum Reserve
RSAT Number	Туре	CUSIP	Description of Asset(s)	Other Description of Asset	Value of Asset	Basic Contribution	Reserve Objective	Maximum Reserve
		-						
		<u> </u>						
0500000 T-4-I								
0599999 - Total								

SCHEDULE F

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

1	2	3	4	s and all other contr	6	7	8
		State of	Year of				
0 , ,	01.	Residence	Claim for		A 15:1	Amount Resisted	
Contract Numbers	Claim Numbers	of Claimant	Death or Disability	Amount Claimed	Amount Paid During the Year	Dec. 31 of Current Year	Why Compromised or Resisted
Numbers	Numbers	Olaimant	Disability	7 tillount Olalinea	Burning the Tear	Ourient real	This claim has been closed and no
1-000277515	02017-0289	GA	2017	100,000			payment has been made.
				ŕ			This claim has been closed and no
1-000270035	02018-0236	MA	2018	250,000			payment has been made.
0199999. Death 0	Claims - Ordinary			350,000			XXX
0599999. Death 0	Claims - Disposed	Of		350,000			XXX
	nal Accidental Dea	th Benefits Cla	aims -				
Dispos			_				XXX
	ty Benefits Claims						XXX
2099999. Mature	d Endowments Cla es with Life Continç	ims - Disposed	Disposed				XXX
Of	es with the Conting	gency Claims -	- Disposed				xxx
	Disposed of During	Current Year		350,000			XXX
2000000: 0:4	Disposed of Barris]		****			Company claims no liability under the
1-000229670	02015-0064	CO	2015	500,000		500,000	terms of the contract.
	Claims - Ordinary			500,000		500,000	XXX
	Claims - Resisted			500,000		500,000	XXX
3699999. Addition	nal Accidental Dea	th Benefits Cla	aims -	·			
Resiste							XXX
	ity Benefits Claims						XXX
	d Endowments Cla						XXX
	es with Life Conting		s - Resisted	500.000		500.000	XXX
5299999. Claims	Resisted During C	urrent Year		500,000		500,000	XXX
5399999 - Totals				850,000		500,000	XXX
				555,550		555,300	

Schedule H - Part 1 - Analysis of Underwriting Operations

NONE

Schedule H - Part 2 - Reserves and Liabilities

NONE

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

NONE

Schedule H - Part 4 - Reinsurance

NONE

Schedule H - Part 5 - Health Claims

NONE

Schedule S - Part 1 - Section 1

NONE

Schedule S - Part 1 - Section 2

NONE

SCHEDULE S - PART 2

Reinsurance Recoverable on Paid and Unpaid Losses Listed by Reinsuring Company as of December 31, Current Year NAIC Domiciliary Company Effective Paid Losses Code Number Date Name of Company Jurisdiction **Unpaid Losses** 0399999. Total Life and Annuity - U.S. Affiliates 0699999. Total Life and Annuity - Non-U.S. Affiliates 0799999. Total Life and Annuity - Affiliates ..58-0828824 ..58-0828824 ..10/11/2013 ..09/01/2015 Munich American Reassurance Company Munich American Reassurance Company ...51,000 .253,750 ..66346 ..66346 .122,500 RGA Reinsurance Company
Scor Global Life Americas Reinsurance Company
Scor Global Life Americas Reinsurance Company
Scor Global Life Americas Reinsurance Company 93572 43-1235868 09/01/2015 MO 75.000 371.250 ..04/01/2004 ...05/01/2009 .196,050 .106,875 64688 75-6020048 DF 416 900 .64688 .75-6020048 DE. DE. .879,000 64688 75-6020048 10/31/2011 .200.000 ..75-6020048 ..13-3126819 ..10/10/2013 ... Scor Global Life Americas Reinsurance Company Scor Global Life USA Reinsurance Company ...51,000 .290,000 64688 97071 _240,000 DE. Swiss Re Life & Health America, Inc. .1,600,000175,100 82627 06-0839705 01/01/1996 MO .06/15/2000 ...06-0839705 ..07/10/2010 MO. .25.500 .82627 .38.125 82627 06-0839705 05/13/2013 MO 2.500 ...41-1760577 ...08/01/2008 .293,000 .66133 22,500 0899999. Life and Annuity - U.S. Non-Affiliates 1099999. Total Life and Annuity - Non-Affiliates 1,051,050 1,051,050 4,409,000 4,409,000 1199999. Total Life and Annuity 1,051,050 4,409,000 1499999. Total Accident and Health - U.S. Affiliates 1799999. Total Accident and Health - Non-U.S. Affiliates 1899999. Total Accident and Health - Affiliates 2199999. Total Accident and Health - Non-Affiliates 2299999. Total Accident and Health 2399999. Total U.S. (Sum of 0399999, 0899999, 1499999 and 1999999) 1,051,050 4,409,000 2499999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999 and 2099999)

9999999 Totals - Life, Annuity and Accident and Health

1,051,050

4,409,000

SCHEDULE S - PART 3 - SECTION 1

		Reinsu	rance Ceded Life Insurance, Annuities, Deposit Funds	and Other Lia	bilities Without	Life or Disabil	ity Contingencies,	and Related Ben	efits Listed by Re	einsuring Compa	ny as of Decem	ber 31, Current	Year	
1	2	3	4	5	6	7	1 8	Reserve Cre		11	Outstanding S		14	15
	_		·	Domi-		·		9	10		12	13	1	
NAIC				ciliary	Type of	Type of		· ·	. •			.0	Modified	Funds Withheld
Company	ID	Effective		Juris-	Reinsurance	Business	Amount in Force						Coinsurance	Under
Code	Number	Date	Name of Company	diction	Ceded	Ceded	at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Reserve	Coinsurance
0399999.			uthorized U.S. Affiliates	4.04.0.1	00000	0000	at End of Toda	Guiront Four	1 1101 1 001		ounon rou		11000.10	- Comountaines
			uthorized Non-U.S. Affiliates											+
0799999			uthorized Affiliates											+
82627			Swiss Re Life & Health America, Inc.	MO	YRT/I	OI	3,923,186	81,647	69,917	57,080				-
82627			Swiss Re Life & Health America, Inc.	MO	YRT/I	OL.	631,000	347	375	6,682				
82627			Swiss Re Life & Health America, Inc.	MO	CO/I	OL.	275,000	17,142	10,298	14.226				
82627			Swiss Re Life & Health America, Inc.	MO	YRT/I	OL.	1,025,000	16,431	10,765	17.984				
82627			Swiss Re Life & Health America, Inc.	MO	YRT/I	0L		1.890	1.730	6,862				
82627			Swiss Re Life & Health America, Inc.	MO	YRT/I	OL.	11,472,000		93,020	(1,226)				
82627			Swiss Re Life & Health America, Inc.	MO		OL.	500,000	6.813	6.234	5.996				
82627			Swiss Re Life & Health America, Inc.	MO		0L	33,691,000	231.879	254,202	498.589				
82627			Swiss Re Life & Health America, Inc.	MO		OL.	550,000	17,541	15,756	6,739				
82627			Swiss Re Life & Health America, Inc.	MO	CO/I	0L	21,100,000	95,681	115,039	161,638				
82627			Swiss Re Life & Health America, Inc.	MO	CO/I	0L	1,534,046,809	5.743.326	6,029,789	1,775,660				
82627			Swiss Re Life & Health America, Inc.	MO		XXXL	1,732,109,254	17,562,834	18,010,175	2,889,564				
82627			Swiss Re Life & Health America, Inc.	MO		OL	50,000	5,499	4,945	2,888				
82627			Swiss Re Life & Health America, Inc.	MO	YRT/I	OL	,	1,885	2,013	6,859				
82627			Swiss Re Life & Health America, Inc.	MO	YRT/I	OL		28,675	29,377	14,910				
82627	06-0839705		Swiss Re Life & Health America, Inc.	MO		XXXL	201, 184, 400	3,489,304	3,399,978	368,311				
82627	06-0839705	.07/10/2010	Swiss Re Life & Health America, Inc.	MO		XXXL	1,481,393,833	24,981,929	21,929,476	2,417,085				
82627	06-0839705		Swiss Re Life & Health America, Inc.	MO	YRT/I	OL	35,628,500	88,846	43,023	646,872				***************************************
82627	06-0839705	_05/13/2013	Swiss Re Life & Health America, Inc.	MO	YRT/I	OL	3,067,500	7,247	5,838	12,291				
65676	35-0472300		Lincoln National Life Insurance Company	IN	YRT/I	OL	8,111,053	11,447	10,618	56,775				
66133	41-1760577	08/01/2008	Wilton Reassurance Company	MN		XXXL	634,464,015	11,615,298	11, 178, 957	1, 199, 497				
16535			Zurich American Insurance Company	NY	CAT/G	OL				31,250				
66346			Munich American Reassurance Company	GA	YRT/G	0L	128,513,900			347,379				
66346			Munich American Reassurance Company	GA	CAT/G	DL				50,000				
66346			Munich American Reassurance Company	GA	CO/I	XXXL	1, 134,527, 164	15,984,312	13,220,544	1,732,200				
66346			Munich American Reassurance Company	GA	CO/I	XXXL	2,458,664,624	15,212,554	9,713,849	3,847,528				
93572			RGA Reinsurance Company	MO	CO/I	XXXL_	2,102,845,805	13,796,291	8,709,468	3,783,945				
64688			Scor Global Life Americas Reinsurance Company	DE	00/I	XXXL	4,715,659,327	56,922,437	58,750,552	8,377,059				
64688			Scor Global Life Americas Reinsurance Company		0/I	XXXL	2,599,323,800	48,421,492	45,653,856	4,865,374				
64688	75–6020048	.10/31/2011	Scor Global Life Americas Reinsurance Company	DE	0/I	XXXL	2,078,267,826	35,212,972	31,216,499	3,201,257				
64688			Scor Global Life Americas Reinsurance Company	DE	00/I	XXXL	1,480,625,532	18,506,993	15,414,722	2,264,013				
64688			Scor Global Life Americas Reinsurance Company	DE	YRT/I	OL	27,468,000	29,089	28, 112	314				
97071			Scor Global Life USA Reinsurance Company	DE	CO/I	XXXL	2,814,256,713	17,557,545	11,262,988	4,394,317				
			zed U.S. Non-Affiliates				25,243,457,941	285,727,476	255, 192, 115	43,059,918				
			uthorized Non-Affiliates				25,243,457,941	285,727,476	255, 192, 115	43,059,918				
	Total General						25,243,457,941	285,727,476	255, 192, 115	43,059,918				
			nauthorized U.S. Affiliates											
			nauthorized Non-U.S. Affiliates											
1899999.	Total General	Account - U	nauthorized Affiliates											
			nauthorized Non-Affiliates											
2299999.	Total General	Account Una	authorized											
25 ₉₉₉₉₉ .	Total General	Account - Ce	ertified U.S. Affiliates											
2899999.	Total General	Account - Ce	ertified Non-U.S. Affiliates					İ						
2999999.	Total General	Account - Ce	ertified Affiliates											
			ertified Non-Affiliates											
	Total General													
			thorized, Unauthorized and Certified				25,243,457,941	285.727.476	255, 192, 115	43.059.918				
			Authorized U.S. Affiliates				20,2.0,.0.,011	250,121,110	200, 102, 110	.5,555,010				
			Authorized Non-U.S. Affiliates											+
			Authorized Norro.s. Anniates Authorized Affiliates											+
			Authorized Non-Affiliates				1							+
	Total Separate													+
4099999.	rotal Separat	e accounts A	AUUTOTIZEU				1							

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	2	3	4	5	6	7	8	Reserve Cr	edit Taken	11	Outstanding S	Surplus Relief	14	15
				Domi-				9	10		12	13		
NAIC				ciliary	Type of	Type of							Modified	Funds Withheld
Company	ID	Effective		Juris-	Reinsurance	Business	Amount in Force						Coinsurance	Under
Code	Number	Date	Name of Company	diction	Ceded	Ceded	at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Reserve	Coinsurance
4899999.	Total Separate	e Accounts -	Unauthorized U.S. Affiliates											
5199999.	Total Separate	e Accounts -	Unauthorized Non-U.S. Affiliates											
5299999.	Total Separate	e Accounts -	Unauthorized Affiliates											
5599999.	Total Separate	e Accounts -	Unauthorized Non-Affiliates											
5699999.	Total Separate	e Accounts L	Inauthorized											
5999999.	Total Separate	e Accounts -	Certified U.S. Affiliates											
6299999.	Total Separate	e Accounts -	Certified Non-U.S. Affiliates											
6399999.	Total Separate	e Accounts -	Certified Affiliates											
6699999.	Total Separate	e Accounts -	Certified Non-Affiliates											
6799999.	Total Separate	e Accounts C	Certified											
6899999.	Total Separate	e Accounts A	Authorized, Unauthorized and Certified											
6999999.	Total U.S. (Su	m of 039999	9, 0899999, 1499999, 1999999, 2599999, 3099999, 3799999, 4299	999, 48999	99, 5399999, 599	9999 and								
	6499999)						25,243,457,941	285,727,476	255, 192, 115	43,059,918				
7099999.	Total Non-U.S	. (Sum of 06	99999, 0999999, 1799999, 2099999, 2899999, 3199999, 4099999,	4399999, 5	199999, 549999 9	, 6299999 and				·				
	6599999)													
9999999 -	Totals						25,243,457,941	285,727,476	255, 192, 115	43,059,918				

Schedule S - Part 3 - Section 2

NONE

Schedule S - Part 4

NONE

Schedule S - Part 4 - Bank Footnote

NONE

Schedule S - Part 5

NONE

Schedule S - Part 5 - Bank Footnote

NONE

SCHEDULE S - PART 6

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

			Omitted)		4	
		1 2019	2 2018	3 2017	4 2016	5 2015
	A. OPERATIONS ITEMS					
1.	Premiums and annuity considerations for life and accident and health contracts	43,060	40,903	38,577	36,210	34,539
2.	Commissions and reinsurance expense allowances	11,276	11,075	10,984	10,294	9,848
3.	Contract claims	24,986	22,207	15,044	17,963	15,280
4.	Surrender benefits and withdrawals for life contracts					
5.	Dividends to policyholders and refunds to members					
6.	Reserve adjustments on reinsurance ceded					
7.	Increase in aggregate reserve for life and accident and health contracts	30,535	28,569	26,543	24,113	18,196
	B. BALANCE SHEET ITEMS					
8.	Premiums and annuity considerations for life and accident and health contracts deferred and uncollected	4,292	4,077	3,649	3,579	4,468
9.	Aggregate reserves for life and accident and health contracts	285,727	255 , 192	226,624	200,081	175,968
10.	Liability for deposit-type contracts					
11.	Contract claims unpaid	4,649	3,854	5,575	1,966	3, 124
12.	Amounts recoverable on reinsurance	1,051	3,856	1,035	628	1,563
13.	Experience rating refunds due or unpaid		284	12	213	
14.	Policyholders' dividends and refunds to members (not included in Line 10)					
15.	Commissions and reinsurance expense allowances due	1,098	1,051	1,007	1,042	1,162
16.	Unauthorized reinsurance offset					
17.	Offset for reinsurance with Certified Reinsurers					
	C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
18.	Funds deposited by and withheld from (F)					
19.	Letters of credit (L)					
20.	Trust agreements (T)					
21.	Other (O)					
	D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
22.	Multiple Beneficiary Trust					
23.	Funds deposited by and withheld from (F)					
24.	Letters of credit (L)					
25.	Trust agreements (T)					
26.	Other (O)					

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)	1,276,017,973		1,276,017,973
2.	Reinsurance (Line 16)	2,148,640	(2,148,640)	
3.	Premiums and considerations (Line 15)	33,568,791	4,292,349	37,861,140
4.	Net credit for ceded reinsurance	xxx	288,232,767	288,232,767
5.	All other admitted assets (balance)	49,483,550		49,483,550
6.	Total assets excluding Separate Accounts (Line 26)	1,361,218,954	290,376,476	1,651,595,430
7.	Separate Account assets (Line 27)			
8.	Total assets (Line 28)	1,361,218,954	290,376,476	1,651,595,430
	LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9.	Contract reserves (Lines 1 and 2)	773,783,740	285,727,476	1,059,511,216
10.	Liability for deposit-type contracts (Line 3)	117,619,485		117,619,485
11.	Claim reserves (Line 4)	8,280,902	4,649,000	12,929,902
12.	Policyholder dividends/member refunds/reserves (Lines 5 through 7)			
13.	Premium & annuity considerations received in advance (Line 8)	225,970		225,970
14.	Other contract liabilities (Line 9)	11,639,118		11,639,118
15.	Reinsurance in unauthorized companies (Line 24.02 minus inset amount)			
16.	Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount)			
17.	Reinsurance with Certified Reinsurers (Line 24.02 inset amount)			
18.	Funds held under reinsurance treaties with Certified Reinsurers (Line 24.03 inset amount)			
19.	All other liabilities (balance)	111,531,028		111,531,028
20.	Total liabilities excluding Separate Accounts (Line 26)	1,023,080,243	290,376,476	1,313,456,719
21.	Separate Account liabilities (Line 27)			
22.	Total liabilities (Line 28)	1,023,080,243	290,376,476	1,313,456,719
23.	Capital & surplus (Line 38)	338, 138, 711	XXX	338, 138, 711
24.	Total liabilities, capital & surplus (Line 39)	1,361,218,954	290,376,476	1,651,595,430
	NET CREDIT FOR CEDED REINSURANCE			
25.	Contract reserves	285,727,476		
26.	Claim reserves	4,649,000		
27.	Policyholder dividends/reserves			
28.	Premium & annuity considerations received in advance			
29.	Liability for deposit-type contracts			
30.	Other contract liabilities			
31.	Reinsurance ceded assets			
32.	Other ceded reinsurance recoverables			
33.	Total ceded reinsurance recoverables			
34.	Premiums and considerations			
35.	Reinsurance in unauthorized companies			
36.	Funds held under reinsurance treaties with unauthorized reinsurers			
37.	Reinsurance with Certified Reinsurers			
38.	Funds held under reinsurance treaties with Certified Reinsurers			
39.	Other ceded reinsurance payables/offsets			
39. 40.	Other ceded reinsurance payable/offsets			
	rotar deget religionarioe payabie/0115815	- 7, 232, 343		

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

			Allocated by C	States and Territ		iness Only		
		•	1	2	3 Disability	4 Long-Term	5	6
			Life	Annuities	Income	Care	Denesit Time	
	States, Etc.		(Group and Individual)	(Group and Individual)	(Group and Individual)	(Group and Individual)	Deposit-Type Contracts	Totals
1.	Alabama	AL	183,745	7,000				190,745
2.	Alaska	AK	38,726					38,726
3.	Arizona	ΑZ	1, 198, 943	106,581				1,305,524
4.	Arkansas	AR	108,845	9,750				118,595
5.	California	CA	5,869,193	246,611				6,115,804
6.	Colorado		2,050,891	163,824				2,214,715
7.	Connecticut		8,649,025	494 , 174				9, 143, 199
8.	Delaware	DE	236 , 188	600				236,788
9.	District of Columbia	DC	274 , 196					274 , 196
10.	Florida		5,462,728	553,824				6,016,552
11.	Georgia		3,979,738	263,413				4,243,151
12.	Hawaii		34,670					34,670
13.	Idaho		197,351					197,351
14.	Illinois		1,672,468	58,082				1,730,550
15.	Indiana		545,763	17,994				563,757
16. 17.	lowa Kansas		171, 106	613,531				784.637
17. 18.	Kentucky		353,333	10,000				000 000
18.	Louisiana		294,289	10,000				363,333
20.	Maine			83,705				975,868
21.	Maryland		2, 164, 946	50, 147				2,215,093
22.	Massachusetts		13,029,069	1,971,940				15,001,009
23.	Michigan		1,000,665	4,200				1,004,865
24.	Minnesota		763,363	16,500				779,863
25.	Mississippi	MS	93,304	120				93,424
26.	Missouri		337,038	194				337,232
27.	Montana	MT	64,565					64,565
28.	Nebraska	NE	128,532	650				129 , 182
29.	Nevada	NV	362,656	18,886				381,542
30.	New Hampshire	NH	2,848,129	1,134,820				3,982,949
31.	New Jersey		4,436,101	157, 182				4,593,283
32.	New Mexico	NM	301,041	6,500				307,541
33.	New York	NY	8,264,074	545,020				8,809,094
34.	North Carolina		4,340,121	1,064,410				5,404,531
35.	North Dakota		19,828					19,828
36.	Ohio		1,336,061	39,675				1,375,736
37.	Oklahoma		178,069					178,069
38.	Oregon		999, 172	51,749				1,050,921
39.	Pennsylvania		9,253,945	1,438,415			696,145	11,388,505
40. 41.	Rhode Island		1,097,233	294,513			,	1,391,746
42.	South Dakota		33,115	294,510				33,115
43.	Tennessee		839,676	41,000				
44.	Texas		9,823,381	1,507,706				11,331,087
45.	Utah		247,938	,. ,				247,938
46.	Vermont		422,551	15,489				438,040
47.	Virginia	VA	2,075,793	141,530				2,217,323
48.	Washington	WA	2,249,605	672,929				2,922,534
49.	West Virginia	WV	103,209	5,900				109,109
50.	Wisconsin		530 , 180	5, 167				535,347
51.	Wyoming	WY	43,512					43,512
52.	American Samoa	AS						
53.	Guam	GU						
54.	Puerto Rico	PR						
55.	U.S. Virgin Islands							
56.	Northern Mariana Islands							
57.	Canada							
58.	Aggregate Other Alien	OT	400 000 045	40 004 707				445 507 407
59.	Total		102,806,315	12,034,707		<u> </u>	696,145	115,537,167

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Type	If		ļ,	
											of Control	Control		ļ ļ	
											(Ownership,	is		ls an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
0028	Amica Mutual Insurance Company		05-0348344				Amica Mutual Insurance Company	RI	UDP					N	
0028	Amica Mutual Insurance Company	72222	05-0340166				Amica Life Insurance Company	RI	RE	Amica Mutual Insurance Company	Ownership	100.000	Amica Mutual Insurance Company	N	
		40007	00 0445500				Amica Property and Casualty Insurance					400.000		l !	
0028	Amica Mutual Insurance Company	12287	26-0115568				CompanyAmica General Agency, LLC.	RI	IA	Amica Mutual Insurance Company	Ownership	100.000	Amica Mutual Insurance Company	. N	
	Amica Mutual Insurance Company	00000	05-0430401				Amica General Agency, LLC.	ні	NI A	Amica Mutual Insurance Company	Ownership	100.000	Amica Mutual Insurance Company	N	
														-	
												· -			

	-					
Asterisk			Ēχ	(L) =	n	
	 	.				

SCHEDULE Y

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

					110110 11					
1 2 3	4	5	6	7 Income/	8	9	10	11	12	13
			Purchases, Sales or Exchanges of Loans, Securities,	(Disbursements) Incurred in Connection with Guarantees or		Income/ (Disbursements)		Any Other Material Activity Not in the		Reinsurance Recoverable/ (Payable) on
NAIC			Real Estate,	Undertakings for	Management	Incurred Under		Ordinary Course of		Losses and/or
Company ID Names of Insurers and Parent, Code Number Subsidiaries or Affiliates	Shareholder	Capital Contributions	Mortgage Loans or	the Benefit of any Affiliate(s)	Agreements and	Reinsurance	*	the Insurer's Business	T-4-1-	Reserve Credit
	Dividends		Other Investments	Affiliate(s)	Service Contracts	Agreements		Business	Totals	Taken/(Liability)
19976 05-0348344 Amica Mutual Insurance Company	11,000,000	(25,000,000)			9,072,276	(8,808,947)			(13,736,671)	(74,752,049)
72222 05-0340166 Amica Life Insurance Company		25,000,000			1,849,690				26,849,690	
12287 26-0115568 Amica Property and Casualty Insurance Company					(9, 145, 179)	8,808,947			(336,232)	74,752,049
	(11,000,000)				(1,776,787)				(12,776,787)	
								†		
	-									
9999999 Control Totals							XXX			

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

	_	Responses
1.	MARCH FILING 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
5.	APRIL FILING Will Management's Discussion and Analysis be filed by April 1?	YES
6.	Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies)	YES
7.	Will the Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit (if required) be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies)	YES
8.	Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
9.	JUNE FILING Will an audited financial report be filed by June 1?	YES
0.		
10.	Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES
11.	Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1?	YES
	owing supplemental reports are required to be filed as part of your annual statement filling if your company is engaged in the type of business	
	ment. However, in the event that your company does not transact the type of business for which the special report must be filed, your response 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	
filed for	whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions. MARCH FILING	
12.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? (Not applicable to fraternal benefit societies)	NO
13.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
14.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
15.	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
16.	Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	YES
17.	Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?	YES
18.	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
19.	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
20.	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
21.	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
22.	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
23.	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
24.	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
25.	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
26.	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

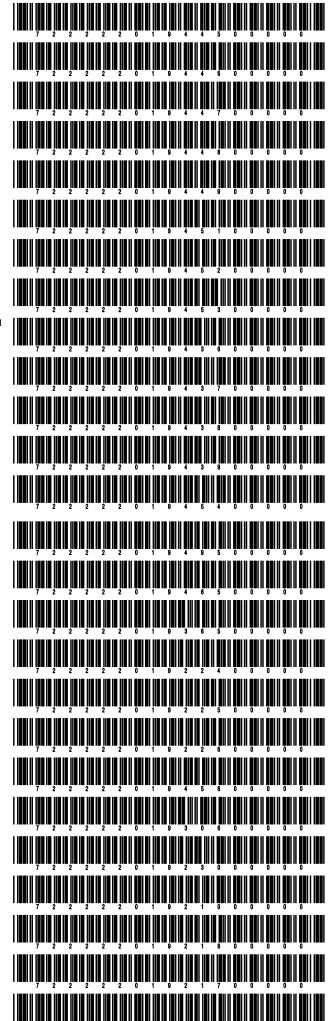
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

21.	and electronically with the NAIC by March 1?		NO
28.	Will the actuarial opinion required by the Modified Guaranteed Annuity Model ReNAIC by March 1?		NO
29.	Will the Actuarial Certifications Related to Hedging required by Actuarial Guideli NAIC by March 1?	ne XLIII be filed with the state of domicile and electronically with the	NO NO
30.	Will the Financial Officer Certification Related to Clearly Defined Hedging Strate domicile and electronically with the NAIC by March 1?		NO
31.	Will the Management Certification That the Valuation Reflects Management's In domicile and electronically with the NAIC by March 1?		NO
32.	Will the Actuarial Certification Related to the Reserves required by Actuarial Gui NAIC by March 1?	·	NO
33.	Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities b March 1?	e filed with the state of domicile and electronically with the NAIC by	NO
34. 35.	Will the Worker's Compensation Carve-Out Supplement be filed by March 1? (N Will Supplemental Schedule O be filed with the state of domicile and the NAIC between the compensation of the NAIC between the compensation of the com	**	NO NO
36.	Will the Medicare Part D Coverage Supplement be filed with the state of domicil		NO
37.	Will an approval from the reporting entity's state of domicile for relief related to the electronically with the NAIC by March 1?		NO
38.	Will an approval from the reporting entity's state of domicile for relief related to the electronically with the NAIC by March 1?	he one-year cooling off period for independent CPA be filed	NO
39.	Will an approval from the reporting entity's state of domicile for relief related to the NAIC by March 1?		NO
40.	Will the VM-20 Reserves Supplement be filed with the state of domicile and the APRIL FILII		NO
41.	Will the confidential Regulatory Asset Adequacy Issues Summary (RAAIS) requi		
42.	April 1?		YES NO
43.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile ar		NO
44.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?		NO
45.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the sta	· .	NO
46.	Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense April 1?		NO
47.	Will the confidential Actuarial Memorandum required by Actuarial Guideline XXX	, ·	YES
48. 49.	Will the Supplemental Term and Universal Life Insurance Reinsurance Exhibit b Will the Variable Annuities Supplement be filed with the state of domicile and the	e NAIC by April 1?	YES NO
50.	AUGUST FIL Will Management's Report of Internal Control Over Financial Reporting be filed v Explanations:		SEE EXPLANAT
15. 18. 19. 20. 21. 22. 23. 24. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 42. 43. 44. 45. 46. 49. 50.	Not Required		
12.	Bar Codes: SIS Stockholder Information Supplement [Document Identifier 420]		
13.	Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]		
14.	Trusteed Surplus Statement [Document Identifier 490]		
15.	Participating Opinion for Exhibit 5 [Document Identifier 371]		
18.	Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit [Document Identifier 443]		

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

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

- 20. Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 445]
- 21. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 446]
- Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI [Document Identifier 447]
- Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI [Document Identifier 448]
- Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) [Document Identifier 449]
- C-3 RBC Certifications Required Under C-3 Phase II [Document Identifier 451]
- Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities [Document Identifier 452]
- 28. Modified Guaranteed Annuity Model Regulation [Document Identifier 453]
- Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII [Document Identifier 436]
- Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII [Document Identifier 437]
- 31. Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII [Document Identifier 438]
- Actuarial Certification Related to the Reserves required by Actuarial Guideline XLIII [Document Identifier 439]
- 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]
- 34. Workers' Compensation Carve-Out Supplement [Document Identifier 495]
- 35. Supplemental Schedule O [Document Identifier 465]
- 36. Medicare Part D Coverage Supplement [Document Identifier 365]
- Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]
- Relief from the one-year cooling off period for independent CPA [Document Identifier 225]
- 39. Relief from the Requirements for Audit Committees [Document Identifier 226]
- 40. VM-20 Reserves Supplement [Document Identifier 456]
- 42. Long-Term Care Experience Reporting Forms [Document Identifier 306]
- 43. Credit Insurance Experience Exhibit [Document Identifier 230]
- 44. Accident and Health Policy Experience Exhibit [Document Identifier 210]
- 45. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]
- 46. Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217]
- 49. Variable Annuities Supplement [Document Identifier 286]



OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Assets Line 25

			Current Year				
		1	1 2 3				
				Net Admitted Assets	Net Admitted		
		Assets	Nonadmitted Assets	(Cols. 1 - 2)	Assets		
2504.	Prepaid retired life expense				70,588		
	Retired life overfunded asset				(70,588)		
2506.	Miscellaneous receivable	36,734	36,734				
2597.	Summary of remaining write-ins for Line 25 from overflow page	36,734	36,734				

Additional Write-ins for Liabilities Line 25

		1	2
		Current Year	Prior Year
2504.	Post retirement medical transition liability (SSAP92)		4,718,176
2597.	Summary of remaining write-ins for Line 25 from overflow page		4,718,176

Additional Write-ins for Summary of Operations Line 53

, taantion	al White-ins for Guithmary of Operations Line 60	4	0
		1	2
		Current Year	Prior Year
5304.	Change in retiree medical benefit liability	381,259	1,621,501
5305.	Correction of an error	(242,080)	
5306.	Compensated absences accrual	(844,000)	
5397.	Summary of remaining write-ins for Line 53 from overflow page	(704,821)	1,621,501

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK

Analysis of Increase in Reserves During The Year	7.1
Analysis of Operations By Lines of Business	6
Asset Valuation Reserve Default Component	
Asset Valuation Reserve Equity	32
Asset Valuation Reserve Replications (Synthetic) Assets	35
Asset Valuation Reserve	29
Assets	2
Cash Flow	5
Exhibit 1 - Part 1 - Premiums and Annuity Considerations for Life and Accident and Health Contracts	9
Exhibit 1 - Part 2 - Dividends and Coupons Applied, Reinsurance Commissions and Expense	10
Exhibit 2 - General Expenses	11
Exhibit 3 - Taxes, Licenses and Fees (Excluding Federal Income Taxes)	11
Exhibit 4 - Dividends or Refunds	11
Exhibit 5 - Aggregate Reserve for Life Contracts	12
Exhibit 5 - Interrogatories	13
Exhibit 5A - Changes in Bases of Valuation During The Year	13
Exhibit 6 - Aggregate Reserves for Accident and Health Contracts	
Exhibit 7 - Deposit-Type Contracts	
Exhibit 8 - Claims for Life and Accident and Health Contracts - Part 1	
Exhibit 8 - Claims for Life and Accident and Health Contracts - Part 2	
Exhibit of Capital Gains (Losses)	
Exhibit of Life Insurance	
Exhibit of Net Investment Income	
Exhibit of Nonadmitted Assets	
Exhibit of Number of Policies, Contracts, Certificates, Income Payable and Account Values	
Five-Year Historical Data	
Form for Calculating the Interest Maintenance Reserve (IMR)	
General Interrogatories	
Jurat Page	
Liabilities, Surplus and Other Funds	
Life Insurance (State Page)	
Notes To Financial Statements	
Overflow Page For Write-ins	
Schedule A - Part 1	
Schedule A - Part 2	
Schedule A - Part 3	
Schedule A - Verification Between Years	
Schedule B - Part 1	
Schedule B - Part 2	
Schedule B - Part 3	
Schedule B - Verification Between Years	
Schedule BA - Part 1	
Schedule BA - Part 2	
Schedule BA - Part 3	
Schedule BA - Verification Between Years	
Schedule D - Part 1	
Schedule D - Part 1A - Section 1	
Schedule D - Part 1A - Section 2	
Schedule D - Part 2 - Section 1	
Schedule D - Part 2 - Section 2	
Schedule D - Part 3	
Schedule D - Part 4	
Schedule D - Part 5	E15
Schedule D - Part 6 - Section 1	E16
Schedule D - Part 6 - Section 2	E16
Schedule D - Summary By Country	SI04
Schedule D - Verification Between Years	SI03
Schedule DA - Part 1	E17
Schedule DA - Verification Between Years	

ANNUAL STATEMENT BLANK (Continued)

Schedule DB - Part A - Section 1	E18
Schedule DB - Part A - Section 2	E19
Schedule DB - Part A - Verification Between Years	SI11
Schedule DB - Part B - Section 1	E20
Schedule DB - Part B - Section 2	E21
Schedule DB - Part B - Verification Between Years	SI11
Schedule DB - Part C - Section 1	SI12
Schedule DB - Part C - Section 2	SI13
Schedule DB - Part D - Section 1	E22
Schedule DB - Part D - Section 2	E23
Schedule DB - Part E	E24
Schedule DB - Verification	SI14
Schedule DL - Part 1	E25
Schedule DL - Part 2	E26
Schedule E - Part 1 - Cash	E27
Schedule E - Part 2 - Cash Equivalents	E28
Schedule E - Part 2 - Verification Between Years	SI15
Schedule E - Part 3 - Special Deposits	E29
Schedule F	36
Schedule H - Accident and Health Exhibit - Part 1	37
Schedule H - Part 2, Part 3 and Part 4	38
Schedule H - Part 5 - Health Claims	39
Schedule S - Part 1 - Section 1	40
Schedule S - Part 1 - Section 2	41
Schedule S - Part 2	42
Schedule S - Part 3 - Section 1	43
Schedule S - Part 3 - Section 2	44
Schedule S - Part 4	45
Schedule S - Part 5	46
Schedule S - Part 6	47
Schedule S - Part 7	48
Schedule T - Part 2 Interstate Compact	50
Schedule T - Premiums and Annuity Considerations	49
Schedule Y - Information Concerning Activities of Insurer Members of a Holding Company Group	51
Schedule Y - Part 1A - Detail of Insurance Holding Company System	52
Schedule Y - Part 2 - Summary of Insurer's Transactions With Any Affiliates	
Summary Investment Schedule	SI01
Summary of Operations	
Supplemental Exhibits and Schedules Interrogatories	