

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

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2021

			ON AND AFFAIRS OF THE	σδνίλ	
NAIC			ny Code 72222 Employer's I		05-0340166
Organized under the Laws of		(Prior) Island	, State of Domicile or Port of E	ntry	RI
Country of Domicile			States of America		
-	Lit		[X] Fraternal Benefit Societies []		
Incorporated/Organized			•••		
Statutory Home Office				Lincoln, RI, US (
	100 Amica (Street and N	1	,(City o		untry and Zip Code)
Main Administrative Office			0 Amica Way		
	Lincoln, RI, US 02865-1156	(Stre	et and Number)	800-652-6	3422
(City or	Town, State, Country and Zip (Area Code) (Telep	hone Number)
Mail Address	P.O. Box 6008 (Street and Number or P			Providence, RI, US	02940-6008 Intry and Zip Code)
Primary Location of Books and	,	,	00 Amica Wav	TTOWN, State, Sol	
			et and Number)		
	Lincoln, RI, US 02865-1156 Town, State, Country and Zip (Code)	,(A	800-652-6 Area Code) (Telep	
Internet Website Address		w	w.amica.com		
	Michael	Lee Baker, Jr.		800-652	-6422-22365
clattery clatement contact		(Name)	y	(Area Code) (1	elephone Number)
	mbakerjr@amica.com (E-mail Address)		,,,	401-334-3 (FAX Num	
Chairman, President and Chief Executive Officer Senior Assistant Vice President and Secretary		y DiMuccio	DFFICERS Senior Vice President, Chief Financial Officer and Treasurer Actuary		James Parker Loring oodrow Michael Crouch
Super Fig Chung Serie	Nice President & Chief	Shiele Lerreine Com	OTHER panie, Vice President & Chief Life	loopifor App Ma	winen Senier Vice President & Concret
Susan Fie Chung, Senio Investmer Edmund Shallcross III, Senio	nt Officer	Shiela Lohanie Com	Actuary		rrison, Senior Vice President & General Counsel
Edmund Shalicross III, Senio Mana					
			RS OR TRUSTEES		
Jeffrey Pa Patricia Wals		Rober	II Janice Avery t Anthony DiMuccio		Debra Ann Canales Barry George Hittner
Michael Da Debra Ma			ald Keith Machtley ald Julian Reaves		Peter Michael Marino Diane Desmarais Souza
State of County of	Rhode Island Providence	— ss			
all of the herein described ass statement, together with related condition and affairs of the said in accordance with the NAIC A rules or regulations require d respectively. Furthermore, the exact copy (except for formattir to the enclosed statement. Robert Anthony D Chairman, President and Chie	ets were the absolute propert d exhibits, schedules and expla d reporting entity as of the repo- nnual Statement Instructions ifferences in reporting not re scope of this attestation by th ng differences due to electroni	y of the said reporting anations therein contair rting period stated abo and Accounting Practio lated to accounting p te described officers al c filing) of the enclosed	entity, free and clear from any liens ned, annexed or referred to, is a full a ve, and of its income and deductions ces and Procedures manual except ti ractices and procedures, according so includes the related correspondir I statement. The electronic filing may nne Ellen Casey Vice President and Secretary a. Is this an original filin	s or claims thereo and true statemen s therefrom for the to the extent that: g to the best of t ng electronic filing y be requested by 	that on the reporting period stated above, n, except as herein stated, and that this t of all the assets and liabilities and of the period ended, and have been completed (1) state law may differ; or, (2) that state heir information, knowledge and belief, with the NAIC, when required, that is an various regulators in lieu of or in addition James Parker Loring ce President, Chief Financial Officer and Treasurer Yes [X] No []
Subscribed and sworn to before 9th day of		ary, 2022	b. If no, 1. State the amendm		
			2. Date filed 3. Number of pages a		
Ann Marie Octeau Notary Public					
June 8, 2022					



DIRECT BUSINESS IN THE STATE OF Alabama NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Company Code 72222

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.						
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	221,552				221,552
	DIRECT DIVIDENDS TO					
	POLICYHOLDERS/REFUNDS TO MEMBERS					
Life ir	isurance:					
6.1						
6.2						
6.3						
	endowment or premium-paying period					
6.4	Other					
Annu						
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					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims					
14.		4 004				1.994
15.	Totals	337,802				337,802
	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 iroup and Individual)		Group		Industrial		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	2								2		
Settled during current year:											
18.1 By payment in full	2										
18.2 By payment on										,	
compromised claims											
compromised claims 18.3 Totals paid	2	313,000							2		
18.4 Reduction by compromise											
18.5 Amount rejected	_										
18.6 Total settlements	2										
19. Unpaid Dec. 31, current		,								,	
year (16+17-18.6)											
					No. of						
POLICY EXHIBIT					Policies						
20. In force December 31, prior											
vear				(a)							
21. Issued during year		12,276,000								12,276,000	
22 Other changes to in force											
(Net)	(10)	(800,000)							(10)	(680,000)	
23. In force December 31 of											
current year	258	88,636,000		(a)		120,000			258	88,756,000	

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

ACCIDENT AND HEAT TH 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 P	olicies (b)					
	Employees Health Benefits Plan n (b)					
24.2 Credit (C	roup and Individual)					
24.3 Collectiv	ely renewable policies/certificates (b)					
24.4 Medicare	e Title XVIII exempt from state taxes or fee					
Other Inc	lividual Policies:					
25.1 Non-can	celable (b)					
25.2 Guarante	eed renewable (b)					
	ewable for stated reasons only (b)					
	cident only					
	(b)					
	um of Lines 25.1 to 25.5)					
26. Totals (L	ines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					



DIRECT BUSINESS IN THE STATE OF Alaska NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Comp ny Codo 70000

UNAIC						any coue rzzzz
	DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.	Life insurance					
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	55,906				55,906
	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					
6.5	Totals (Sum of Lines 6.1 to 6.4)					
Annui	ties:					
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					
1/	and benefits paid All other benefits, except accident and health					
	Totals					
15.	DETAILS OF WRITE-INS					
1201						
1301.				+	+	
1302.						
	Summary of Line 13 from overflow page					
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13					
1000.	above)					

	C	Ordinary		Credit Life and Individual)		Group	1	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
 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 18.3 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 20. In force December 31, prior year 21. Issued during year 22. Other changes to in force (Net) 23. In force December 31 of	3 (4)	1,400,000 (954,000)		(a)	No. of Policies					
current year	51	22,529,500		(a)					51	22,529,50

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

		1	2	3	4	5
		Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)					
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)					
	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	Arizona
NAIC Group Code	0028	

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Company Code 72222

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	1,214,533				1,325,817
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
	Totals (Sum of Lines 1 to 4)	1,266,333		111,284		1,377,617
	DIRECT DIVIDENDS TO	, ,		· · · ·		, ,
1	POLICYHOLDERS/REFUNDS TO MEMBERS					
Life ins	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)					
Annuiti						
	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	2,045,491				2,095,491
	Matured endowments					
	Annuity benefits					
	Surrender values and withdrawals for life contracts					
	Aggregate write-ins for miscellaneous direct claims					
	and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	2,144,109		50,000		2,194,109
1	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		_				
		Ordinary	1-	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								1	25,479
17. Incurred during current year	8	2,245,000			2				10	2,295,000
Settled during current year:										
18.1 By payment in full		2.045.491				50.000			9	2.095.491
18.2 By payment on		, , ,				,				,, .
compromised claims										
compromised claims 18.3 Totals paid	7	2.045.491			2	50.000			9	2.095.491
18.4 Reduction by compromise						· · · · · · · · · · · · · · · · · · ·				
18.5 Amount rejected										
18.6 Total settlements	7	2,045,491			2				9	2,095,491
19. Unpaid Dec. 31, current										
year (16+17-18.6)	2	224,988							2	224,988
					No. of					
POLICY EXHIBIT					Policies					
20 In force December 31 prior										
vear	1.301	496.720.865		(a)		10.263.200			1.301	506,984,065
21. Issued during year				()		, .,				31,977,000
00 Other shares to in famo										
(Net)	(69)	(10,245,558)				(365,900)			(69)	(10,611,458)
23. In force December 31 of										
current year	1,311	518,452,307		(a)		9,897,300			1,311	528,349,607

(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 \$

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)					
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)					

(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 NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Comp 70000

INAIC		L1			NAIC Comp	any coue rzzzz
	DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.	Life insurance	110,595		Gloup		110.595
2.	Annuity considerations					
3.	Deposit-type contract funds					,
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	117,595				117.595
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS	111,000				
	isurance:					
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)					
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					
13.	Aggregate write-ins for miscellaneous direct claims					
	and benefits paid					
	All other benefits, except accident and health					
15.						
4004	DETAILS OF WRITE-INS					
1301.						
1302.						
	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		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:										
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 20. In force December 31, prior					No. of Policies					
vear	117			(a)					117	
21. Issued during year	11								11	3,750,000
22. Other changes to in force (Net)									(5)	
23. In force December 31 of current year	123	56,373,950		(a)					123	56,373,950

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

		1	2	3	4	5
		Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)					
24.1						
24.2	Credit (Group and Individual)					
	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					
	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	California
NAIC Creating Conda	0000	

LIFE INSURANCE

DURING THE YEAR 2021 70000

NAIC	Group Code 0028	LI	FE INSURANCE		NAIC Company Code 72222		
		1	2	3	4	5	
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total	
1.		6,022,723					
2.	Annuity considerations						
3.	Deposit-type contract funds		XXX		XXX		
4.	Other considerations						
5.	Totals (Sum of Lines 1 to 4)	6,139,740		206,329		6,346,069	
	DIRECT DIVIDENDS TO						
Life in	POLICYHOLDERS/REFUNDS TO MEMBERS 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)						
Annui							
7.1	Paid in cash or left on deposit						
7.2							
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	1,878,436					
10.	Matured endowments						
11.	Annuity benefits						
12.	Surrender values and withdrawals for life contracts						
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid						
14.	All other benefits, except accident and health						
15.	Totals	2,622,191		150,000		2,772,191	
	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						
		Ordinary	1-	and Individual)	l	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	6								6	417,295
17. Incurred during current year		2,882,037			2				30	3,032,037
Settled during current year:										
18.1 By payment in full	.25	1.878.436			2	150.000			27	2.028.436
18.2 By payment on		, , ,				,				, , ,
compromised claims 18.3 Totals paid	25	1.878.436			2	150.000			27	2.028.436
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements		1,878,436			2					2,028,436
19. Unpaid Dec. 31, current										
year (16+17-18.6)	9	1,420,896							9	1,420,896
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
vear		3,348,631,992		(a)		19,028,800				3,367,660,792
21. Issued during year	313	229,280,000				. ,				229,280,000
22 Other changes to in force										
(Net)	(381)	(222,963,059)				(454,100)			(381)	(223,417,159)
23. In force December 31 of										
current year	5,434	3,354,948,933		(a)		18,574,700			5,434	3,373,523,633

(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 HEAT TH INSURANCE

	ACCIDENT AND	HEALTH INSU	RANCE		
	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)					
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)					
(b) For health business on indicated lines report: Number	of porcons insured und	PBO managed care	products	and numbe	r of persons

(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 Colorado NAIC Group Code 0020

LIFE INSURANCE

DURING THE YEAR 2021 70000

NAIC	AIC 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.		2,269,173		,			
2.							
3.			XXX		XXX		
4.	Other considerations						
5.	Totals (Sum of Lines 1 to 4)	2,283,146		64,097		2,347,243	
	DIRECT DIVIDENDS TO						
	POLICYHOLDERS/REFUNDS TO MEMBERS						
Life ir	nsurance:						
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							
8.	Grand Totals (Lines 6.5 plus 7.4)						
	DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	409 483				409 483	
10.	Matured endowments						
11.						96.353	
12.							
	Aggregate write-ins for miscellaneous direct claims						
10.							
14.							
15.	Totals	543.545				543,545	
	DETAILS OF WRITE-INS	,				,	
1301	·						
1302							
1303	·						
1308	Summary of Line 13 from overflow page						
	. Totals (Lines 1301 thru 1303 plus 1398) (Line 13						
1099	above)						

				Credit Life		<u>^</u>				-
	(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										
year										
17. Incurred during current year	4	409,483							4	409,483
Settled during current year:										
18.1 By payment in full	4								4	
18.2 By payment on										*
compromised claims										
compromised claims 18.3 Totals paid	4	409.483							4	
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	4	409,483								409,483
19. Unpaid Dec. 31. current										
year (16+17-18.6)										
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year		1,112,786,478		(a)						1,118,697,878
21. Issued during year	162	91,118,000		()					162	91,118,000
22 Other changes to in force										,,
(Net)	(171)	(61,015,265)							(171)	(60,056,865)
23. In force December 31 of										. , . , . ,
current year	2,414	1,142,889,213		(a)		6,869,800			2,414	1,149,759,013
a) Includes Individual Credit Life I	nsurance p	rior vear \$			vear \$					

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

ACCIDENT AND HEAT TH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	Birootti formanio	Edition	on Biroot Buoinooo	Biroot Lobood 1 ald	indunidu
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 Connecticut NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Company Code 72222

NAIC C	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
	Life insurance					
2.	Annuity considerations					618,884
	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	9,115,084		341,135		9,456,219
	DIRECT DIVIDENDS TO					
	POLICYHOLDERS/REFUNDS TO MEMBERS					
Life ins	urance:					
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)					
Annuiti						
	Paid in cash or left on deposit					
	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					
	Matured endowments					
	Annuity benefits					1.467.898
	Surrender values and withdrawals for life contracts					
	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
	Totals	7,681,772				7,681,772
	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)					

	C	Ordinary		Credit Life and Individual)		Group		ndustrial		Total
DIRECT DEATH	1	2	<u>(Gioup</u> 3	2 4	5	6 GIOUP	7	8	9	10
BENEFITS AND	1	2	No. of	4	Э	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		1,429,701								1,429,701
17. Incurred during current year	29	5 369 755							29	5,369,755
Settled during current year:									_ _	
18.1 By payment in full	27	5 050 985							27	
18.2 By payment on	<u>-</u> -									
compromised claims										
18.3 Totals paid	27	5,050,985							27	5,050,985
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current										, ,
year (16+17-18.6)	7	1,748,471							7	1,748,471
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	9, 143	3,793,778,394		(a)					9, 143	3,826,886,194
21. Issued during year										
22 Other changes to in force										
(Net)	(548)	(194,716,403)				(838,200)			(548)	(195,554,603)
23. In force December 31 of	0 070	0 705 700 001				00,000,000			0.070	0 000 000 501
current year (a) Includes Individual Credit Life I	9,073	3,795,732,991		(a)		32,269,600			9,073	3,828,002,591

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

..... , current year \$

ACCIDENT AND HEAT TH 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 P	olicies (b)					
	Employees Health Benefits Plan n (b)					
24.2 Credit (C	roup and Individual)					
24.3 Collectiv	ely renewable policies/certificates (b)					
24.4 Medicare	e Title XVIII exempt from state taxes or fee					
Other Inc	lividual Policies:					
25.1 Non-can	celable (b)					
25.2 Guarante	eed renewable (b)					
	ewable for stated reasons only (b)					
	cident only					
	(b)					
	um of Lines 25.1 to 25.5)					
26. Totals (L	ines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					



DIRECT BUSINESS IN THE STATE OF Delaware NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Comp ny Codo 70000

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.							
2.							
3.			XXX		XXX		
4.							
5.	Totals (Sum of Lines 1 to 4)	285,819		596		286,415	
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
	isurance:						
6.1	· · · · · · · · · · · · · · · · · · ·						
	Applied to provide paid-up additions or shorten the endowment or premium-paying period						
6.4	Other						
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						
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid						
14.	All other benefits, except accident and health						
15.	Totals	57,659				57,659	
	DETAILS OF WRITE-INS						
1301.							
1302							
1303.							
1398.							
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)						

	C	Ordinary		Credit Life and Individual)		Group	1	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:	2								2	
18.1 By payment in full	2								2	
18.2 By payment on compromised claims18.3 Totals paid										
18.3 Totals paid	2								2	
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	2								2	
19. Unpaid Dec. 31, current year (16+17-18.6)										
					No. of					
POLICY EXHIBIT 20. In force December 31, prior					Policies					
year				(a)						
21. Issued during year									35	
22. Other changes to in force (Net)	(10)	(2,863,869)							(10)	(2,863,869)
23. In force December 31 of current year	308	113,264,310		(a)		160,100			308	113,424,410

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

ACCIDENT AND HEAT TH INCLIDANCE

	1	2	3	4	5
			Policyholder Dividends		
		Direct Premiums	Paid, Refunds to 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)					

For health business on indicated lines report: Number of persons ins insured under indemnity only products ured under PPO managed care produ and number of persons



DIRECT BUSINESS IN THE STATE OF District of Columbia NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Company Code 72222

2.	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS Life insurance	1 Ordinary	2 Credit Life (Group	3	4	5
2.	AND ANNUITY CONSIDERATIONS	Ordinany				
2.	Life insurance	Uruinary	and Individual)	Group	Industrial	Total
				4 700		
3.	Annuity considerations					
	Deposit-type contract funds	, ,	XXX		XXX	·····
4.	Other considerations					
	Totals (Sum of Lines 1 to 4)	374,894		1,736		376,630
	DIRECT DIVIDENDS TO					
	POLICYHOLDERS/REFUNDS TO MEMBERS					
	urance:					
6.3	Applied to provide paid-up additions or shorten the					
C 4	endowment or premium-paying period					
	Other					
	· · · · · · · · · · · · · · · · · · ·					
Annuiti						
	Paid in cash or left on deposit					
	Applied to provide paid-up annuities					
	Other					
	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
•	DIRECT CLAIMS AND BENEFITS PAID					
	Death benefits					
	Matured endowments					
	Annuity benefits					
13.	Aggregate write-ins for miscellaneous direct claims					
1/						
	Totals	83.588				83,588
-	DETAILS OF WRITE-INS	00,000				00,000
1307.						
1302.						
1308	Summary of Line 13 from overflow page					
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13					
1399.	above)					

)rdinon(Credit Life and Individual)		Croup	le le	ductrial		Total
	, (Drdinary	1-	/		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 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	1									
Settled during current year:										
18.1 By payment in full	1									
18.2 By payment on										
compromised claims										
compromised claims 18.3 Totals paid	1									
18.4 Reduction by compromise		, 								· · · · · · · · · · · · · · · · · · ·
18.5 Amount rejected										
18.6 Total settlements	1	25.000								25,000
19. Unpaid Dec. 31, current										,
year (16+17-18.6)										
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	244	163, 102, 759		(a)		55.000			244	
21. Issued during year	24	16.525.000		、 /						16,525,000
22 Other changes to in force										
(Net)	(19)	(9,806,917)							(19)	(9,793,817)
23. In force December 31 of		., ,-,								
current year	249	169,820,842		(a)		68,100			249	169,888,942
(a) Includes Individual Credit Life I	nsurance p	rior vear \$			vear \$					

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 HEAT TH INCLIDANCE

	1	2	3	4	5
			Policyholder Dividends		
		Direct Premiums	Paid, Refunds to 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)					

red under PPO manage For health business on indicated lines report: Number of persor insured under indemnity only products d care produ . and num ber of persons



DIRECT BUSINESS IN THE STATE OF Florida NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Company Code 72222

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.						5,920,151	
2.	Annuity considerations						
3.	Deposit-type contract funds				XXX		
4.	Other considerations						
5.	Totals (Sum of Lines 1 to 4)	6,337,739		317,953		6,655,692	
	DIRECT DIVIDENDS TO	, ,		, , , , , , , , , , , , , , , , , , ,		, ,	
	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						
	Other						
	Totals (Sum of Lines 6.1 to 6.4)						
Annu							
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	4.367.900		493,500		4,861,400	
10.	Matured endowments						
11.							
12.	Surrender values and withdrawals for life contracts	585 649					
13.	Aggregate write-ins for miscellaneous direct claims						
	and benefits paid						
14.	All other benefits, except accident and health						
15.	Totals	6,022,641		493,500		6,516,141	
	DETAILS OF WRITE-INS						
1301	·						
1302							
1398	. Summary of Line 13 from overflow page						
	. Totals (Lines 1301 thru 1303 plus 1398) (Line 13			[
	above)						

	C	Ordinary		Credit Life and Individual)		Group	h	ndustrial		Total
DIRECT DEATH	1	2	3	4 and individual)	5	6	7	8	9	10
BENEFITS AND	1	2	No. of	7	5	0	'	0	5	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	6				1				7	
year		4,558,638			6				40	4,860,038
Settled during current year:										
18.1 By payment in full		4,367,900			6				41	
18.2 By payment on compromised claims										
18.3 Totals paid	35	4.367.900			6	493.500				4,861,400
18.4 Reduction by compromise		,,								, ,
18.5 Amount rejected	_									
18.6 Total settlements	35	4.367.900			6	493.500				4,861,400
19. Unpaid Dec. 31, current year (16+17-18.6)	5	371,141			1	125,000			6	496,141
,	-	. ,			No. of	- /				- ,
POLICY EXHIBIT					Policies					
20. In force December 31, prior					1 0110100					
year		1,942,045,214		(a)					6,113	1,971,393,614
21. Issued during year		139, 150, 486								139, 150, 486
22 Other changes to in force										
(Net)	(300)	(57,393,543)				(2,862,900)			(300)	(60,256,443)
23. In force December 31 of										
current year	6,114	2,023,802,157		(a)		26,485,500			6,114	2,050,287,657

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

..... , current year \$

ACCIDENT AND HEAT TH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	Billotti folilidillo	Edition		Direct Lobood F did	incariou
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	Georgia
NAIC Group Code	0028	

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Company Code 72222

Group Code 0028	LI	FE INSURANCE		NAIC Company Code 72222		
	1	2	3	4	5	
DIRECT PREMIUMS						
				Industrial	Total	
					4,709,360	
Annuity considerations						
		XXX		XXX		
Other considerations						
Totals (Sum of Lines 1 to 4)	4,753,715		115,745		4,869,460	
DIRECT DIVIDENDS TO						
POLICYHOLDERS/REFUNDS TO MEMBERS						
isurance:						
Paid in cash or left on deposit						
Applied to pay renewal premiums						
Applied to provide paid-up additions or shorten the						
· · · · · · · · · · · · · · · · · · ·						
ities:						
Paid in cash or left on deposit						
Applied to provide paid-up annuities						
Other						
Grand Totals (Lines 6.5 plus 7.4)						
DIRECT CLAIMS AND BENEFITS PAID						
Death benefits	2.385.972		240,900		2,626,872	
Annuity benefits	441 401				441 401	
All other benefits, except accident and health						
Totals	2,903,517		240,900		3,144,417	
DETAILS OF WRITE-INS						
Summary of Line 13 from overflow page						
above)						
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS Life insurance Annuity considerations Annuity considerations Deposit-type contract funds Other considerations Totals (Sum of Lines 1 to 4) DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS nsurance: 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) ities: Paid in cash or left on deposit Applied to provide paid-up annuities Other Totals (Sum of Lines 6.1 to 6.4) ities: 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 heal	DIRECT PREMIUMS 1 AND ANNUITY CONSIDERATIONS Ordinary Life insurance .4,593,615 Annuity considerations .160,100 Deposit-type contract funds	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS 1 2 Credit Life (Group and Individual) Life insurance 4,593,615 Annuity considerations 160,100 Deposit-type contract funds 160,100 Other considerations 160,100 Totals (Sum of Lines 1 to 4) 4,753,715 DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Isurance: Paid in cash or left on deposit Applied to pay renewal premiums Applied to pay renewal premiums 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) ities: 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 Anuity benefits All other benefits paid All other benefits, except accident and health	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS 1 Credit Life (Group and Individual) 3 Life insurance 4,533,615	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS 1 2 Ordinary 3 and Individual 4 Industrial Life insurance 4,593,615	

	C	Ordinary		Credit Life and Individual)		Group		ndustrial		Total
DIRECT DEATH	1	2	3	4 and individual)	5	6	7	8	9	10
BENEFITS AND	1	2	No. of	4	э	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								7 thount	Cortilo.	Anodin
year	4	240.506			2	240.900				
17. Incurred during current year	17	2 786 000								
Settled during current year:		,,_,								
18.1 By payment in full	17	2 385 972			2	240 900			19	2 626 872
18.2 By payment on										
compromised claims										
18.3 Totals paid	17	2,385,972			2				19	2,626,872
18.4 Reduction by compromise										
18.5 Amount rejected	_									
18.6 Total settlements	17				2				19	
19. Unpaid Dec. 31, current	4	640,534							4	640,534
year (16+17-18.6)	4	040,334							4	040,334
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior year	5 000	1 007 000 710		(a)		10 674 700			5 099	1 009 494 412
21. Issued during year	5,000	227 044 000		(a)					505	
22 Other changes to in force										
(Net)	(343)	(106,261,723)				(25,600)			(343)	(106,287,323)
23. In force December 31 of										
current year	5,280	2,109,491,989		(a)		10,649,100			5,280	2,120,141,089

(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 HEAT TH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	Birootti formanio	Edition	on Biroot Buoinooo	Biroot Lobood 1 ald	indunidu
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 Hawaii NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Company Code 72222

		1	2 Cradit Life (Craun	3	4	5
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1.		39.924	,	1.681	industriai	41.605
1. 2.	Life insurance	, -				
2. 3.			XXX		XXX	
4.	Other considerations					
 5.	Totals (Sum of Lines 1 to 4)	39,924		1.681		41.605
0.	DIRECT DIVIDENDS TO	00,024		1,001		1,000
	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)					
Annuit						
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.						
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims					
	All other benefits, except accident and health	0 500				
15.	Totals DETAILS OF WRITE-INS	2,599				2,599
4004						
1301.						
1302.						
1303.						
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

compromised claims				0	Credit Life						
BENEFITS AND MATURED ENDOWMENTS INCURRED No. of Pols. & Certifs. No. of Ind.Pols. Certifs. No. of Ind.Pols. Certifs. No. of Pols. & Certifs. No. of Policies No. of Policies <td></td> <td>(</td> <td>Ordinary</td> <td>(Group</td> <td>and Individual)</td> <td></td> <td>Group</td> <td></td> <td>ndustrial</td> <td></td> <td>Total</td>		(Ordinary	(Group	and Individual)		Group		ndustrial		Total
MATURED ENDOWMENTS INCURRED yearNo. of Pols. & Certifs.No. of & Gr. & Gr.No. of & Gr. & Gr.No. of Pols. & Certifs.No. of Pols. & AmountNo. of Pols. & Certifs.No. of Pols. & AmountNo. of Pols. & Certifs.No. of Pols. & AmountNo. of Pols. & Certifs.No. of PoliciesNo. of PoliciesNo. of PoliciesNo. of PoliciesNo. of PoliciesNo. of PoliciesNo. of PoliciesNo. of PoliciesN	DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
ENDOWMENTS INCURREDPols. & Certifs.Pols. & Certifs.<	BENEFITS AND			No. of							
INCURREDCertifs.Amount<	MATURED	No. of		Ind.Pols.				No. of		No. of	
16. Unpaid December 31, prior year 00 mon 00 mon<		Pols. &		& Gr.		No. of		Pols. &		Pols. &	
year	_	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
17. Incurred during current year Settled during current year:	16. Unpaid December 31, prior										
Settled during current year:											
18.1 By payment in full	3										
18.2 By payment on compromised claims											
18.2 By payment on compromised claims	18.1 By payment in full										
18.3 Totals paid	18.2 By payment on										
18.4 Reduction by compromise											
18.5 Amount rejected 18.6 Total settlements 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6) POLICY EXHIBIT 16,557,370 20. In force December 31, prior year 45 11. S,480,329 16,557,370 (a) 155,000 (b) 16,577,370 (a) 155,000 (b) 11 5,480,329 (c)	18.3 Totals paid										
18.5 Amount rejected 18.6 Total settlements 18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6) POLICY EXHIBIT 16,557,370 20. In force December 31, prior year 45 11. S,480,329 16,557,370 (a) 155,000 (b) 16,577,370 (a) 155,000 (b) 11 5,480,329 (c)	18.4 Reduction by compromise										
18.6 Total settlements 19. Unpaid Dec. 31, current year (16+17-18.6) Image: settlements in the settlement is the	18.5 Amount rejected										
19. Unpaid Dec. 31, current year (16+17-18.6) No. of Policies No. of Policies 20. In force December 31, prior year	18.6 Total settlements										
POLICY EXHIBIT	19. Unpaid Dec. 31, current										
POLICY EXHIBIT Policies 20. In force December 31, prior year	year (16+17-18.6)										
20. In force December 31, prior year						No. of					
year	POLICY EXHIBIT					Policies					
21. Issued during year	20. In force December 31, prior										
21. Issued during year	year	45			(a)					45	
(Net)	21. Issued during year										
(Net)	22. Other changes to in force										
	(Net)	11	5,480,329				(5,000)			11	5,475,329
	23. In force December 31 of		00.007.000				450.000			50	00 407 000
current year 56 22,037,699 (a) 150,000 56 22,187,699			, ,		· /		150,000			56	22,187,699

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

ACCIDENT AND HEAT TH INCLIDANCE

		1	2	3	4	5
		Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)					
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)					
	Totals (sum of Lines 25.1 to 25.5)					
	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

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



DIRECT BUSINESS IN THE STATE OF Idaho NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Comp ny Codo 70000

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.	Annuity considerations					
3.					XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	224,001		11,201		235,202
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life ir	isurance:					
6.1	· · · · · · · · · · · · · · · · · · ·					
6.3	endowment or premium-paying period					
6.4						
6.5	Totals (Sum of Lines 6.1 to 6.4)					
Annu	ities:					
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					
10.	Matured endowments					
11.						
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	10,467				10,467
	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)					
1303 1398	Summary of Line 13 from overflow page Totals (Lines 1301 thru 1303 plus 1398) (Line 13					

	0	Ordinary		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 17. 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										
18.4 Reduction by compromise 18.5 Amount rejected 18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)									-	
POLICY EXHIBIT 20. In force December 31, prior					No. of Policies					
year				(a)						106,830,911
21. Issued during year		13,555,000		· <i>·</i>					26	
22. Other changes to in force (Net)		3,904,574							(3)	4,264,474
23. In force December 31 of current year	351	123,257,485		(a)		1,392,900			351	124,650,385

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

ACCIDENT AND HEAT THINGUDANCE

		1	2	3 Policyholder Dividends Paid, Refunds to	4	5
			Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24. (Group Policies (b)					
	Federal Employees Health Benefits Plan premium (b)					
	Credit (Group and Individual)					
24.3 (Collectively renewable policies/certificates (b)					
24.4 I	Medicare Title XVIII exempt from state taxes or fee					
(Other Individual Policies:					
25.1 I	Non-cancelable (b)					
	Guaranteed renewable (b)					
25.3 I	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)					

eport: Number of persons in d care produ insured under indemnity only products



DIRECT BUSINESS IN THE STATE OF Illinois NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Company Code 72222

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	1,653,858				1,719,054
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX			
4.	Other considerations					
	Totals (Sum of Lines 1 to 4)	1,702,337		65,196		1,767,533
	DIRECT DIVIDENDS TO					
	POLICYHOLDERS/REFUNDS TO MEMBERS					
Life ins	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)					
Annuiti						
	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	.666,605				.666,605
10.	Matured endowments	<i>'</i>				, ,
11.	Annuity benefits	214,948				
		.34,982				
13.	Aggregate write-ins for miscellaneous direct claims					
14.	All other benefits, except accident and health					
15.	Totals	916,535				916,535
	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)					

	<u> </u>)	-			Group	1.	a du atri a l		Total
		Ordinary	1-1	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										
17. Incurred during current year	8								8	
Settled during current year:										
18.1 By payment in full	5								5	
18.2 By payment on		,								,
compromised claims										
compromised claims 18.3 Totals paid	5	666.605							5	
18.4 Reduction by compromise		, ,								
18.5 Amount rejected										
18.6 Total settlements										.666,605
19. Unpaid Dec. 31, current										
year (16+17-18.6)	3	156,395							3	156,395
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	1.609	802.337.838		(a)		6.213.700			1,609	
21. Issued during year		46,740,000		(\$\$)						
22 Other changes to in force										
(Net)	(104)	(44,479,962)							(104)	(45,334,862)
23. In force December 31 of										
current year	1,599	804,597,876		(a)		5,358,800			1,599	809,956,676

(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 HEAT TH INCHDANCE

		1	2	3	4	5
			Direct Premiums	Policyholder Dividends Paid, Refunds to Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24. Grou	up Policies (b)					
24.1 Fede	eral Employees Health Benefits Plan mium (b)					
24.2 Cred	lit (Group and Individual)					
24.3 Colle	ectively renewable policies/certificates (b)					
24.4 Medi	icare Title XVIII exempt from state taxes or fee					
Othe	er Individual Policies:					
25.1 Non-	-cancelable (b)					
	ranteed renewable (b)					
25.3 Non-	-renewable for stated reasons only (b)					
	er accident only					
	ther (b)					
	Is (sum of Lines 25.1 to 25.5)					
	ls (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					



DIRECT BUSINESS IN THE STATE OF Indiana NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Company Code 72222

Group Code 0028	LI	FE INSURANCE		NAIC Compa	ny Code 72222
	1	2 Credit Life (Group	3	4	5
AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
Life insurance			50 705		
Annuity considerations					
		XXX		XXX	· · · · · · · · · · · · · · · · · · ·
Totals (Sum of Lines 1 to 4)	557,594		50,785		608,379
	,				,
Other					
Totals (Sum of Lines 6.1 to 6.4)					
Applied to provide paid-up annuities					
Totals (Sum of Lines 7.1 to 7.3)					
Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
Death benefits	1,925,841				1,925,841
Matured endowments					
Annuity benefits					
Surrender values and withdrawals for life contracts					
All other benefits, except accident and health					
Totals	2,018,994				2,018,994
DETAILS OF WRITE-INS					
. Summary of Line 13 from overflow page					
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS Life insurance Annuity considerations Annuity considerations Deposit-type contract funds Other considerations Totals (Sum of Lines 1 to 4) DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS nsurance: 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 Other Totals (Sum of Lines 6.1 to 6.4) ities: Paid in cash or left on deposit Applied to provide paid-up annuities Other Other Totals (Sum of Lines 6.1 to 6.4) ities: Paid in cash or left on deposit Applied to provide paid-up annuities Other 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 Annuity benefits All other benefits, except accident and health Totals DFAILS OF WRITE-INS DETAILS OF WRITE-INS Summary of Line 13 from overflow page Summary of Line 13 from overflow pa	DIRECT PREMIUMS 1 AND ANNUITY CONSIDERATIONS Ordinary Life insurance .549,894 Annuity considerations .7,700 Deposit-type contract funds	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS 1 2 Credit Life (Group and Individual) Credit Life (Group and Individual) Life insurance 549,894 Annuity considerations 7,700 Deposit-type contract funds 7,700 Other considerations 7,700 Totals (Sum of Lines 1 to 4) 557,594 DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS nsurance: Paid in cash or left on deposit Applied to pay renewal premiums Applied to pay renewal premiums. Applied to pay renewal premiums. Applied to pay renewal premium-paying period Other Totals (Sum of Lines 6.1 to 6.4) ittes: 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 Annuity benefits All other benefits paid All other benefits paid All other benefits paid All other benefits paid All other benefits, exce	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS 1 Credit Life (Group and Individual) 3 Life insurance 549,894	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS 1 2 Credit Life (Group and Individual) 3 Group 4 Industrial Life insurance 549,894

	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	1,575,841							1	1,575,841
17. Incurred during current year	3								3	
Settled during current year:										
18.1 By payment in full	4	1,925,841							4	1,925,841
18.2 By payment on										, ,
compromised claims 18.3 Totals paid	4	1 925 841							4	1.925.841
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	4	1,925,841							4	1,925,841
19. Unpaid Dec. 31, current year (16+17-18.6)		, ,								, ,
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
vear				(a)		4,683,700			675	
21. Issued during year										
22. Other changes to in force (Net)									(40)	(11,833,517)
23. In force December 31 of current year	678	292,908,332		(a)		4,913,000			678	297,821,332

(a) Ind

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

ACCIDENT AND HEAT TH INSURANCE

	1	2	3	4	5
		Direct Premiums	Policyholder Dividends Paid, Refunds to 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 Iowa NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Company Code 72222

						11 0000 12222
		1	2	3	4	5
	DIRECT PREMIUMS		Credit Life (Group			
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.						
2.						
3.			XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	129,703				129,703
	DIRECT DIVIDENDS TO					
	POLICYHOLDERS/REFUNDS TO MEMBERS					
	surance:					
6.2						
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4	Other					
6.5						
Annuit						
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.						7.369
12.	Surrender values and withdrawals for life contracts					,
13.	Aggregate write-ins for miscellaneous direct claims					
14.	All other benefits, except accident and health					
15.	Totals	7,369				7,369
	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
	, C		· ·						-	
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. &	A 1
	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	185	75.494.519		(a)						
21. Issued during year	22	10,555,000		(<i>)</i>						10,555,000
22 Other changes to in force										,,.
(Net)	(10)	(4,023,519)							(10)	(4,023,519)
23. In force December 31 of		., ,- ,,							. ,	., ,,
current year	197	82,026,000		(a)					197	82,026,000

(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 \$

	-		2	2	1	5
			2 Direct Premiums	Policyholder Dividends Paid, Refunds to Members or Credited	4	o Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
	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)					

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE AMICA LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Kansas

LIFE INSURANCE

DURING THE YEAR 2021

NAIC					NAIC Compa	any Coue 12222
		1	2	3	4	5
	DIRECT PREMIUMS		Credit Life (Group			
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.					!	
2.	-					
3.			XXX			
5.	Totals (Sum of Lines 1 to 4)	174,928				174,928
	DIRECT DIVIDENDS TO					
	POLICYHOLDERS/REFUNDS TO MEMBERS					
	surance:					
6.1						
6.3	Applied to provide paid-up additions or shorten the					
	endowment or premium-paying period					
					·	
Annuit						
7.1						
					I	
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1,000,000				1,000,000
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims					
15.	Totals	1,013,398				1,013,398
	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					

	C	Ordinary		Credit Life and Individual)		Group		ndustrial		Total
DIRECT DEATH	1	2	(Group 3		5	6 GIOUP	7	8	9	10
BENEFITS AND	I	Z	No. of	4	5	0	'	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	1	1,000,000							1	1,000,000
Settled during current year:										
18.1 By payment in full	1								1	
18.2 By payment on										
compromised claims 18.3 Totals paid	1	1,000,000							1	1,000,000
18.4 Reduction by compromise										, , ,
18.5 Amount rejected										
18.6 Total settlements	1	1,000,000							1	1,000,000
19. Unpaid Dec. 31, current year (16+17-18.6)		, ,								, ,
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year				(a)					247	
year	11	4,475,000							11	4,475,000
22 Other changes to inforce										
(Net)	(14)	(3,870,000)							(14)	(3,870,000)
23. In force December 31 of	044	102 044 052							044	102 044 052
current year	244	103,044,953		(a)	I				244	103,044,953

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

, current year \$

ACCIDENT AND HEALTH INSURANCE 1 2 3 4 5 Policyholder Dividends Paid, Refunds to Members or Credited Direct Losses **Direct Premiums** Direct Premiums on Direct Business Direct Losses Paid Earned Incurred 24 Group Policies (b) 24.1 Federal Employees Health Benefits Plan 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) (b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons -----



DIRECT BUSINESS IN THE STATE OF Kentucky NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Com av Cada 70000

UNAIC						any Goue 12222
	DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.						
2.						
3.			XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	395,489		2,123		397,612
	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						
6.5	· · · · · · · · · · · · · · · · · · ·					
Annui						
7.1						
7.2						
7.3						
7.4						
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					
10.						
11.	Annuity benefits					
12.						14 ,985
	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	15,110				15,110
	DETAILS OF WRITE-INS					
1301.						
1302.						
1303.						
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

	C	Ordinary		credit Life and Individual)		Group		ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6 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 Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims18.3 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 20. In force December 31, prior					No. of Policies					
year	442	148,650,995		(a)		195.800			442	
21. Issued during year		12,425,000		(<i>)</i>						
22. Other changes to in force (Net)									(20)	
23. In force December 31 of current year	443	153,023,736		(a)		25,000			443	153,048,736

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

ACCIDENT AND HEAT TH INCHDANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	Direct Freihliums	Laineu	OII Direct Dusiness	Direct Losses Faiu	incurreu
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)					

For health business on indicated lines report: Number of persons insinsured under indemnity only products ured under PPO managed care produ and number of persons



DIRECT BUSINESS IN THE STATE OF Louisiana NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Company Code 72222

.....

..... , current year \$

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	289,157				289,157
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX			
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	306,757				306,757
	DIRECT DIVIDENDS TO	,				,
	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						
6.5	Totals (Sum of Lines 6.1 to 6.4)					
Annu	ities:					
7.1	Paid in cash or left on deposit					
7.2						
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	430 000				430 000
10.	Matured endowments					
11.		12 215				43.215
12.						
	Aggregate write-ins for miscellaneous direct claims					12,310
13.						
14.						
	Totals	485.531			-	485.531
10.	DETAILS OF WRITE-INS	100,001				400,001
1301	·					
1301	·					
1302						
1203	Summary of Line 12 from overflow nogo					
	Summary of Line 13 from overflow page					
1399.	. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					
	abovej					

	-) rdin en (Credit Life		Group		advatrial		Tatal
	C	Drdinary	1-1	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										
17. Incurred during current year	2								2	
Settled during current year:										
18.1 By payment in full	2	430 000							2	430 000
18.2 By payment on										
compromised claims 18.3 Totals paid	2	430 000							2	430,000
18.4 Reduction by compromise										,
18.5 Amount rejected										
18.6 Total settlements									2	
19. Unpaid Dec. 31, current										
year (16+17-18.6)										
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
vear		107,687,021		(a)						
21. Issued during year		8,850,000		()						
22 Other changes to in force										, - ,
(Net)	(31)	(8,617,492)							(31)	(8,617,492)
23. In force December 31 of										
current year	280	107,919,529		(a)					280	107,919,529

	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)					

ess on indi cated lines report: Number of persons insured under PPO managed care products and number of persons or he h busine insured under indemnity only products



DIRECT BUSINESS IN THE STATE OF Maine 0028

LIFE INSURANCE

DURING THE YEAR 2021

	Group Code 0028	LI	FE INSURANCE	NAIC Company Code 7222		
		1	2	3	4	5
	DIRECT PREMIUMS	o "	Credit Life (Group			-
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.						
2.						
3.			XXX		XXX	
4.						
5.	Totals (Sum of Lines 1 to 4)	915,616		37,460		953,076
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
l ife in	surance:					
6.2						
6.3	Applied to provide paid-up additions or shorten the					
0.0	endowment or premium-paying period					
6.4						
6.5						
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.						·
11.						
12.		400 540				
13.	Aggregate write-ins for miscellaneous direct claims					
14.						
15.	Totals	819,020		50,000		869,020
	DETAILS OF WRITE-INS	,		,		,
1301.						
1302.						
1303.						
1398.						
	. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

		Seedline arms		Credit Life		0				Tatal
	C	Drdinary	1-	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	17,021							1	
17. Incurred during current year	4				1				5	
Settled during current year:										
18.1 By payment in full	4	390.710			1	50.000			5	440.710
18.2 By payment on										
compromised claims										
compromised claims 18.3 Totals paid					1	.50,000				.440,710
18.4 Reduction by compromise										,
18.5 Amount rejected										
18.6 Total settlements	4				1				5	
19. Unpaid Dec. 31, current										
year (16+17-18.6)	1	100,078							1	100,078
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	968	363.797.931		(a)		3,454,800			968	
21. Issued during year	39	22,900,000		. ,					.39	22,900,000
22 Other changes to inforce										
(Net)	(32)	(7, 103, 528)				(392,900)			(32)	(7,496,428)
23. In force December 31 of										
current year	975	379,594,403		(a)		3,061,900			975	382,656,303

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

ACCIDENT AND HEAT TH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)					
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	Maryland
NAIC Group Code	0028	

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Company Code 72222

INAIC	Group Code 0028	LI	FE INSURANCE	NAIC Company Code /2222		
		1	2	3	4	5
	DIRECT PREMIUMS		Credit Life (Group			
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.	Life insurance	2,327,541				
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	2,448,620		89,996		2,538,616
	DIRECT DIVIDENDS TO					
	POLICYHOLDERS/REFUNDS TO MEMBERS					
Life i	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						
6.5	Totals (Sum of Lines 6.1 to 6.4)					
Annu						
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	648.507				
10.	Matured endowments					
11.		662.616				.662.616
12.		.263,485				
13.	Aggregate write-ins for miscellaneous direct claims					
14.	All other benefits, except accident and health					
15.	Totals	1,574,608				1,574,608
	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)					

		2 li		Credit Life		0				T
	C	Drdinary	1-1	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	2	175,614							2	175,614
17. Incurred during current year	8	518,531			1				9	
Settled during current year:										
18.1 By payment in full	9								9	
18.2 By payment on										
compromised claims 18.3 Totals paid										
18.3 I otals paid	9	648,507							9	648,507
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	9	648,507							9	
19. Unpaid Dec. 31, current year (16+17-18.6)	1	45,638			1	33,800			2	79,438
		10,000			No. of	00,000			-	10,100
POLICY EXHIBIT					Policies					
-					Policies					
20. In force December 31, prior year	2 265	055 788 101				8 200 000				
21. Issued during year	2,205					0,299,900			2,205	
22. Other changes to in force (Net)	(124)	(34, 162, 111)				(1,187,300)			(124)	(35,349,411)
23. In force December 31 of										
current year	2,336	1,006,633,990		(a)		7,112,600			2,336	1,013,746,590

(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 \$

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)					
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)					

(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



DIRE	CT BUSINESS IN THE STATE OF Massachuset	ts			DURING THE	YEAR 2021
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	12,646,245		1,259,514		13,905,759
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	13,075,778		1,259,514		14,335,292
Lifo in	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Isurance:					
6.1						
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	8,630,279				9,527,179
10.	Matured endowments					
11.	Annuity benefits	3, 167, 528				3, 167, 528
12.						
13.	and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	12,474,065		896,900		13,370,965
	DETAILS OF WRITE-INS					
1301.						
1302.						
1398						
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13					
	above)					

	C	Ordinary		Credit Life and Individual)		Group	l	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	5	793,861			4				9	1,598,361
17. Incurred during current year Settled during current year:	50	10,751,518			7				57	
18.1 By payment in full	44	8,630,279			8	896.900			52	9.527.179
18.2 By payment on										
compromised claims 18.3 Totals paid	44	8.630.279			8	896.900			52	9.527.179
18.4 Reduction by compromise						, , , , , , , , , , , , , , , , , , , ,				
18.5 Amount rejected										
18.6 Total settlements	44	8.630.279			8	896.900			52	9.527.179
19. Unpaid Dec. 31, current year (16+17-18.6)	11	2,915,100			3	468,300			14	3,383,400
		, ,			No. of	,				, ,
POLICY EXHIBIT 20. In force December 31, prior					Policies					
year	13,289	6, 161, 284, 562		(a)		122, 194, 000			13,289	6,283,478,562
21. Issued during year	730					, . ,				429,019,875
22. Other changes to in force (Net)										
23. In force December 31 of current year	13,172	6,268,137,451		(a)		119, 143, 900			13, 172	6,387,281,351

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

...... , current year \$

ACCIDENT AND HEAT TH INSURANCE

		1	2	3	4	5
		Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. 0	Group Policies (b)	Billotti folilidillo	Lantoa		Direct Lobood F did	litearrou
24.1 F	ederal Employees Health Benefits Plan premium (b)					
24.2 0	Credit (Group and Individual)					
	Collectively renewable policies/certificates (b)					
24.4 N	Medicare Title XVIII exempt from state taxes or fee					
C	Other Individual Policies:					
25.1 N	Non-cancelable (b)					
25.2 0	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. T	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					



DIRECT BUSINESS IN THE STATE OF Michigan NAIC Group Code 0020

LIFE INSURANCE

DURING THE YEAR 2021 70000

NAIC	Group Code 0028	LI	FE INSURANCE	NAIC Company Code 72222		
		1	2	3	4	5
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1.	Life insurance	1,045,983		00.000		1,075,673
2.	Annuity considerations					
3.	Deposit-type contract funds				XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	1,056,833		29,690		1,086,523
	DIRECT DIVIDENDS TO					
Life ir	POLICYHOLDERS/REFUNDS TO MEMBERS					
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						
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.	· · · · · · · · · · · · · · · · · · ·					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.						
15.	Totals	1,858,636				1,858,636
	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		redit Life and Individual)		Group	h	ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND		-	No. of	·	Ŭ	0	,	U	Ũ	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	1	100,565							1	
17. Incurred during current year	4	1,710,000							4	1,710,000
Settled during current year:										
18.1 By payment in full	4	1,805,993							4	1,805,993
18.2 By payment on										
compromised claims 18.3 Totals paid	. 4	1.805.993								1,805,993
18.4 Reduction by compromise										, ,
18.5 Amount rejected	_									
18.6 Total settlements	4	1.805.993								1.805.993
19. Unpaid Dec. 31, current year (16+17-18.6)	1	4,572							1	4,572
		,			No. of					,
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
vear	1, 173			(a)					1, 173	
21. Issued during year		33,630,000		、 <i>,</i>		. ,				33,630,000
22 Other changes to in force										
(Net)	(69)	(34,536,792)				(211,500)			(69)	(34,748,292)
23. In force December 31 of current year	1,158	501,718,265		(a)		2,526,700			1,158	504,244,965

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

ACCIDENT AND HEAT TH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	Billotti folilidillo	Edition		Direct Lobood F did	incariou
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	S IN THE STATE
NAIO Creating Conda	0000

OF Minnesota

LIFE INSURANCE

DURING THE YEAR 2021 70000

NAIC Group Code 0028		LI	FE INSURANCE	NAIC Company Code 72222		
	·	1	2	3	4	5
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1.				07 700		
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	838,246		27,728		865,974
	DIRECT DIVIDENDS TO					
	POLICYHOLDERS/REFUNDS TO MEMBERS					
	isurance:					
6.1	· · · · · · · · · · · · · · · · · · ·					
6.2						
6.3	Applied to provide paid-up additions or shorten the					
64	endowment or premium-paying period Other					
6.5	Totals (Sum of Lines 6.1 to 6.4)					
Annu						
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	126 000		63 800		189 800
10.	Matured endowments					
11.		.51,325				.51,325
12.		.38,268				
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	,				·
14.	All other benefits, except accident and health					
15.	Totals	217,961		63,800		281,761
	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		Credit Life		Group		ndustrial		Total
				and Individual)		Group	-			
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 INCURRED	Pols. & Certifs.	A	& Gr. Certifs.	A	No. of Certifs.	A	Pols. & Certifs.	A	Pols. &	A
	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year 17. Incurred during current year	·····	100 000				60.000				100 000
	2	120,000			I	03,800				
Settled during current year:										
18.1 By payment in full	2				1				3	
18.2 By payment on										
compromised claims 18.3 Totals paid										
18.3 Totals paid	2				1				3	
18.4 Reduction by compromise										
18.5 Amount rejected	-									
18.6 Total settlements	2	126.000			1	63.800			3	
19. Unpaid Dec. 31, current		,				····· ,				
year (16+17-18.6)										
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior					1 0110100					
year	1.004	451,976,153		(a)		2.557.200			1.004	454.533.353
21. Issued during year	66	35 019 000		(u)					66	
22 Other changes to in force										
(Net)	(52)	(10.314.446)				(129,500)			(52)	(10,443,946)
23. In force December 31 of										
current year	1,018	476,680,707		(a)		2,427,700			1,018	479,108,407
(a) Includes Individual Credit Life I	neurance n	tior year \$		current	voar \$				· · · · ·	

(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 HEAT TH INCHDANCE

		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)					
	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					



DIRECT BUSINESS IN THE STATE OF Mississippi NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Company Code 72222

	01000 0020				ra de comp	any obdo Theele
	DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.	Life insurance	126.504		p		126,504
2.		720				700
3.			XXX			
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	127,224				127,224
	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						
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					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	5,000				5,000
	DETAILS OF WRITE-INS					
1301.						
1302.						
1303.						
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

				Credit Life						
		Drdinary	(Group	and Individual)		Group	l 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	1								1	
Settled during current year: 18.1 By payment in full	1								1	
18.2 By payment on compromised claims										
compromised claims 18.3 Totals paid									1	
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	1								1	
19. Unpaid Dec. 31, current year (16+17-18.6)										
					No. of					
POLICY EXHIBIT 20. In force December 31, prior					Policies					
vear				(a)						
21. Issued during year										6,305,000
22. Other changes to in force (Net)										1,950,000
23. In force December 31 of current year	156	53,253,041		(a)					156	53,253,041

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

	-		2	2	1	5
			2 Direct Premiums	Policyholder Dividends Paid, Refunds to Members or Credited	4	o Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
	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)					

(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 Missouri NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Comp ny Codo 70000

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.						,
2.		800				800
3.			XXX		XXX	
4.						
5.	Totals (Sum of Lines 1 to 4)	378,434				378,434
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
	isurance:					
6.1	· · · · · · · · · · · · · · · · · · ·					
6.3	endowment or premium-paying period					
6.4						
Annu						
7.1	Paid in cash or left on deposit					
7.2						
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	(159)				(159)
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	15,717				15,717
	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
	, (1-1	1			7		-	
DIRECT DEATH	1	2	3	4	5	6	1	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		05 050								05 050
year]								1	
17. Incurred during current year	1								1	
Settled during current year:										
18.1 By payment in full		(159)								(159)
18.2 By payment on										
compromised claims 18.3 Totals paid		(450)								(450)
										(159)
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements		(159)								(159)
19. Unpaid Dec. 31, current year (16+17-18.6)	2	60,218							2	60.218
Joan (10 11 1010)		,			No. of					,
POLICY EXHIBIT					Policies					
_					Folicies					
20. In force December 31, prior	480			(a)					489	
year 21. Issued during year				(a)						18,000,000
22. Other changes to in force (Net)	(26)	(6,959,000)							(26)	
23. In force December 31 of	497	188,657,778		(a)					497	188,657,778
current year	-	, ,		(a)			I I		497	100,007,770

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

....., current year \$

		1	2	3	4	5
		Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)	Biroot i formanio	Lamou		Diroct Loodoor and	induirdu
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)					
	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 Montana NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Company Code 72222

NAIC	Group Code 0028	LI	FE INSURANCE		NAIC Compa	pany Code 72222	
		1	2	3	4	5	
	DIRECT PREMIUMS		Credit Life (Group				
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total	
1.	Life insurance						
2.	Annuity considerations						
3.	Deposit-type contract funds		XXX		XXX		
4.	Other considerations						
5.	Totals (Sum of Lines 1 to 4)	112,726				112,726	
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					·	
Life ir	isurance:						
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							
6.5	T () (0 ()) (0 ())						
Annu	ities:						
7.1	Paid in cash or left on deposit						
7.2							
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	1,878					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	·				·	
14.							
15.	Totals	80,685				80,685	
	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)						

			0	Credit Life						
	C	Ordinary	(Group	and Individual)		Group	h	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	
Settled during current year:										
18.1 By payment in full	1								1	
18.2 By payment on										
compromised claims 18.3 Totals paid										
18.3 Totals paid	1								1	
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	1								1	
19. Unpaid Dec. 31, current										
year (16+17-18.6)										
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
vear	104			(a)					104	
21. Issued during year		1,200,000		` <i>`</i>						1,200,000
22 Other changes to in force										
(Net)		8,012,000							13	8,012,000
23. In force December 31 of										
current year	120	39,719,274		(a)					120	39,719,274

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

		1	2	3	4	5
		Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)					
24.1						
24.2	Credit (Group and Individual)					
	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					
	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 Nebraska NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Company Code 72222

	0.049 0040 0020				10.00 0000	
		1	2 Credit Life (Creun	3	4	5
		Ordinan	Credit Life (Group	Crown	Industrial	Total
1	AND ANNUITY CONSIDERATIONS	Ordinary 144.101	and Individual)	Group		144,101
1. 2.						
2. 3.		600				
3. 4.	Other considerations		XXX		XXX	
4. 5.	Totals (Sum of Lines 1 to 4)	144 701				144 701
э.	DIRECT DIVIDENDS TO	144,701				144,701
	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						
Annuit						
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					
	All other benefits, except accident and health					
15.		9,835				9,835
	DETAILS OF WRITE-INS					
1301.						
1302.						
1303.						
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

				Credit Life						
	C	Irdinary	(Group	and Individual)		Group	li 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
 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										
 Unpaid Dec. 31, current year (16+17-18.6) 										
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior year	196	80 289 000		(a)						
21. Issued during year				(~)						
22. Other changes to in force (Net)		(4,860,000)							(8)	(4,860,000
23. In force December 31 of current year	214	89,514,000		(a)					214	89,514,000

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

		1	2	3	4	5
		Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)					
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)					
	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 NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Comp ny Codo 70000

NAIC	Group Code 0028	LI	FE INSURANCE	NAIC Company Code 72222		
		1	2 Credit Life (Group	3	4	5
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.	Life insurance	379,928	· · · · · · · · · · · · · · · · · · ·	10 107		
2.	Annuity considerations					
3.	Deposit-type contract funds	, ,			XXX	,
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	559,949		48,137		608,086
	DIRECT DIVIDENDS TO					
	POLICYHOLDERS/REFUNDS TO MEMBERS					
	nsurance:					
6.1	· · · · · · · · · · · · · · · · · · ·					
6.2						
6.3						
6.4	endowment or premium-paying period					
	T , , , (0) (1) (1)					
	Deid in each ar left an danasit					
7.1						
7.2						
7.3 7.4	Other					
7.4 8.	Totals (Sum of Lines 7.1 to 7.3)					
0.	DIRECT CLAIMS AND BENEFITS PAID					
9.		05,000				05,000
÷.	Death benefits					
10.	Matured endowments					10 014
11.						
12.						
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.						
	Totals	68.811				68.811
	DETAILS OF WRITE-INS	00,011				00,011
1301						
1302						
1303	·					
1398	. Summary of Line 13 from overflow page					
	. Totals (Lines 1301 thru 1303 plus 1398) (Line 13					
	above)					

	C	Ordinary		Credit Life and Individual)		Group	1	ndustrial		Total
DIRECT DEATH	1	2	3	<u>and individual)</u> <u>4</u>	5	<u>6</u>	7	8	9	10
BENEFITS AND	1	2	No. of	4	5	0	'	0	5	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	1								1	
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full	1								1	
18.2 By payment on										,
compromised claims										
compromised claims 18.3 Totals paid	1								1	
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	1	25.000							1	25,000
19. Unpaid Dec. 31, current										,
year (16+17-18.6)										
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
vear				(a)						149,437,137
21. Issued during year		5,782,000								
22 Other changes to in force										
(Net)	(28)	(5,601,949)							(28)	(5,250,349)
23. In force December 31 of										
current year	387	145,177,688		(a)		4,791,100			387	149,968,788

(a) In

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

ACCIDENT AND HEAT TH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)					
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 New Hamps	shire	
NAIC Group Code 0028	L	IFE INSURANCE
	1	2
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	Credit Life (Group and Individual)

DURING THE YEAR 2021 NAIC Company Code 72222

		1	2	3	4	5
		Ordinan	Credit Life (Group	Crown	In du atrial	Total
1	AND ANNUITY CONSIDERATIONS Life insurance	Ordinary 2,889,736	and Individual)	Group 164.507	Industrial	3.054.243
2.	Annuity considerations			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, . , .
2. 3.	Deposit-type contract funds					, .
3. 4					XXX	
4. 5.	Totals (Sum of Lines 1 to 4)	0 005 770		104 507		0.000.000
э.	DIRECT DIVIDENDS TO	3,225,773		164,507		3,390,280
	POLICYHOLDERS/REFUNDS TO MEMBERS					
Life in	surance:					
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	1,780,967				1,866,667
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	2,747,787		85,700		2,833,487
	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)					

		Oudlin - m -		Credit Life		0		ndustrial		Total
		Ordinary	1-	and Individual)		Group				
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	179,874							5	179,874
year	16	1,615,850			4				20	1,751,550
Settled during current year:										
18.1 By payment in full	18	1.780.967			3	85.700			21	1.866.667
18.2 By payment on										
compromised claims 18.3 Totals paid	. 18	1.780.967			3	85.700			21	1.866.667
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	18	1,780,967			3				21	1,866,667
19. Unpaid Dec. 31, current										
year (16+17-18.6)	3	14,757			1	50,000			4	64,757
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	3.334	1.144.763.785		(a)		15.458.000			3.334	1,160,221,785
21. Issued during year		67,121,001		(a)						
(Net)	(162)	(48,388,475)				(883,400)			(162)	(49,271,875)
23. In force December 31 of										
current year	3,337	1,163,496,311		(a)		14,574,600			3,337	1,178,070,911

(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 HEAT THINGUDANCE

	A	1	2	3	1	5
		I	Z	J Delieu de al de r Divide a de	4	5
				Policyholder Dividends		
			Disc et Deservisions	Paid, Refunds to		Discottores
			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)					
	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



	CT BUSINESS IN THE STATE OF New Jersey					EYEAR 2021
VAIC	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	4,358,032				4,467,95
2.	Annuity considerations					
3.	Deposit-type contract funds				XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	4,575,227		109,924		4,685,15
l ife ir	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
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.		172,062				
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	,				
14.	All other benefits, except accident and health					
15.	Totals	2,837,288		25,000		2,862,28
	DETAILS OF WRITE-INS					· · · ·
1301.						
1302						
1303.						
1398.	Summary of Line 13 from overflow page		[
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13					

			(Credit Life						
	(Ordinary	(Group	and Individual)		Group	In	dustrial		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
 Unpaid December 31, prior year 										
17. Incurred during current year					2					
Settled during current year:										
18.1 By payment in full					1					
18.2 By payment on compromised claims										
18.3 Totals paid					1					
18.4 Reduction by compromise										
18.4 Reduction by compromise 18.5 Amount rejected										
18.6 Total settlements					1					
19. Unpaid Dec. 31, current year (16+17-18.6)	4	73, 181			1	108,100			5	181,281
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	4 093	1 777 293 611		(a)		10 137 800			4 093	1,787,431,411
21. Issued during year		94 720 515								
22. Other changes to in force (Net)										
23. In force December 31 of current year	3,989	1,752,850,904		(a)		10,070,900			3,989	1,762,921,804

above)

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

-

		1	2	3	4	5
			Direct Premiums	Policyholder Dividends Paid, Refunds to 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)					
	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)					
	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)			Ι		

insured under indemnity only products



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

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Company Code 72222

.....

...... , current year \$

		1	2 Oradit Life (Oracus	3	4	5
		Ondinana	Credit Life (Group	0	المتعاد ومقتر وال	Tatal
1	AND ANNUITY CONSIDERATIONS	Ordinary 297,878	and Individual)	Group 813	Industrial	Total 298.691
1.	Life insurance	,				. , .
2. 3.	Annuity considerations					10,000
-	Other considerations		XXX		XXX	
4. 5.	Totals (Sum of Lines 1 to 4)	307,878		813		308.691
5.	DIRECT DIVIDENDS TO	307,878		813		308,091
	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					
	· · · · · · · · · · · · · · · · · · ·					
Annuit						
7.1	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.						40,842
13.	Aggregate write-ins for miscellaneous direct claims					
14	and benefits paid All other benefits, except accident and health					
	Totals	58.995				58.995
	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)					

	C	Ordinary		redit Life and Individual)		Group		ndustrial		Total
DIRECT DEATH			```				7		0	
BENEFITS AND	1	2	3 No. of	4	5	6	1	8	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										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
 Unpaid Dec. 31, current year (16+17-18.6) 										
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year		110,203,853		(a)						110,278,853
21. Issued during year	<u>3</u> 0									
22. Other changes to in force (Net)		(7,446,888)							(26)	(7,446,888
23. In force December 31 of						75 000			000	
current year	336	121,749,965		(a)		75,000			336	121,824,965

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

		1	2	3	4	5
		Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)					
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)					
	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

ured under PPO manage For health business on indicated lines report: Number of persor insured under indemnity only products d care produ



DIRECT BUSINESS	IN THE STATE OF	New York
NAIC Crown Code	0020	

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Comp ny Codo 70000

5 otal 8,266,512 487,865 487,865
8,266,512 487,865
487,865
8,754,377
5,703,229
1,923,877
,
8,649,855

	C	Ordinary		Credit Life and Individual)		Group		ndustrial		Total
DIRECT DEATH	1	2	(Group 3	4 and individual)	5	6 6	7	8	9	10
BENEFITS AND	1	2	3 No. of	4	5	0	1	8	9	10
MATURED	NI						NI		Nia of	
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	Certiis.	Amount	Ceruis.	Amount	Certiis.	Amount	Ceruis.	Amount	Ceruis.	Amount
year	3	1 005 210							3	1 005 210
year 17. Incurred during current year	S					CE 100				1,095,210
	40	0,912,004			······				40	0,977,104
Settled during current year:										
18.1 By payment in full	41	5,638,129			1				42	5,703,229
18.2 By payment on compromised claims										
compromised claims 18.3 Totals paid		5,638,129			1	65.100			42	5.703.229
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	41	5,638,129			1	.65,100				5,703,229
19. Unpaid Dec. 31, current year (16+17-18.6)	7	2,369,085				,			7	2,369,085
,		,,			No. of					,,
POLICY EXHIBIT					Policies					
20. In force December 31, prior					T UICIES					
year	8 476	3 154 850 876		(a)		32 527 900			8 476	3 187 378 776
21. Issued during year	307	144.757.048		(α)					307	
22 Other changes to inferes										
(Net)	(602)	(226,775,736)				(2,659,000)			(602)	(229,434,736)
23. In force December 31 of										
current year	8,181	3,072,832,188		(a)		29,868,900			8,181	3,102,701,088
a) Includes Individual Credit Life I		rior vear \$		current	Vear \$					

(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 HEAT TH INCHDANCE

		1	2	3	4	5
			Direct Premiums	Policyholder Dividends Paid, Refunds to Members or Credited		Direct Losses
~ 1		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
	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)					
	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)					

(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



	CT BUSINESS IN THE STATE OF North Carolina Group Code 0028		FE INSURANCE		DURING THE YEAR 2021 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	4,592,048		107,786		4,699,83	
2.		147,870					
3.	Deposit-type contract funds		XXX		XXX		
4.	Other considerations						
5.	Totals (Sum of Lines 1 to 4)	4,739,918		107,786		4,847,70	
6.1 6.2	Applied to pay renewal premiums Applied to provide paid-up additions or shorten the						
6.4	endowment or premium-paying period						
÷	Other						
0.5 Annui							
7.1	Paid in cash or left on deposit						
7.2							
7.3	Other						
7.4	Totals (Sum of Lines 7.1 to 7.3)						
8.	Grand Totals (Lines 6.5 plus 7.4)						
0.	DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits	2 743 874		553,200		3,297,07	
10.	Matured endowments						
11.							
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	1 770					
15.	Totals	3,327,512		553,200		3,880,71	
	DETAILS OF WRITE-INS						
1301.							
1302.							
1303.							
1398.							
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)						

				Credit Life		_				
	0	Drdinary	1-1	and Individual)		Group	I	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		0 501				400,000			0	404 501
year	l				I					
17. Incurred during current year					2				23	3,557,481
Settled during current year:										
18.1 By payment in full	17	2,743,874			3				20	3,297,074
18.2 By payment on compromised claims										
compromised claims 18.3 Totals paid	17	2.743.874			3	553,200			20	3.297.074
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements		2,743,874				.553,200				3,297,074
19. Unpaid Dec. 31, current year (16+17-18.6)	5	664,908				,			5	664,908
		,			No. of					,
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	5.235	2.035.742.050		(a)		9,965,600			5.235	2,045,707,650
21. Issued during year	371	184.622.786		()					371	
22 Other changes to in force										
(Net)	(249)	(72,610,419)				(766,600)			(249)	
23. In force December 31 of										
current year	5,357	2,147,754,417		(a)		9,199,000			5,357	2,156,953,417

....., current year \$, current year \$

ACCIDENT AND HEAT TH INSURANCE

	1	2	3	4	5
		Direct Premiums	Policyholder Dividends Paid, Refunds to 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 North Dakota NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Company Code 72222

UNAIC						Jany Goue 12222
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life insurance	18,752	/			40.750
1. 2.	Annuity considerations					
2. 3.	Deposit-type contract funds		XXX		~~~~	-
4.	Other considerations					
4. 5.	Totals (Sum of Lines 1 to 4)	18.752				18.752
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS	10,752				10,752
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					
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					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					_
14.	All other benefits, except accident and health					
15.	Totals					
	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)					

	<i>.</i>	Ordinary		Credit Life and Individual)		Group		ndustrial		Total
DIRECT DEATH	(2	· ·		-	<u>Group</u> 6	7		0	
BENEFITS AND	Т	2	3 No. of	4	5	Ø	/	8	9	10
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	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	Contailor	7 1110 1111	0011101	7.11104111	Contaio	7 1110 1111	0011101	711104111	o or ano:	, unoun
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										
vear				(a)					27	14,661,000
21. Issued during year	1								1	
22 Other changes to in force										
(Net)	(5)	(1,731,000)							(5)	(1,731,000)
23. In force December 31 of	00	10, 100, 000								40,400,000
current year	23	13,430,000		(a)					23	13,430,000

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

		1	2	3	4	5
			Direct Premiums	Policyholder Dividends Paid, Refunds to 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)					
	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

eport: Number of persor d care proc .. and num per of persons insured under indemnity only products



DIRECT BUSINESS IN THE STATE OF Ohio

LIFE INSURANCE

DURING THE YEAR 2021

	Group Code 0028	LI	FE INSURANCE	NAIC Company Code 72222		
		1	2 Credit Life (Group	3	4	5
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.	Life insurance	1,326,862				1,409,459
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.						
5.	Totals (Sum of Lines 1 to 4)	1,448,361		82,597		1,530,958
Life in	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS isurance:					
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						
	Totals (Sum of Lines 6.1 to 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					
10.	Matured endowments					
11. 12.	Annuity benefits					
	Surrender values and withdrawals for life contracts Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health	11.740				
	Totals	568,622				568,622
	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)					

) rdin en (Crown	la In	dustrial		Total
		Drdinary		and Individual)		Group	7		-	
DIRECT DEATH	1	2	3	4	5	6	1	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		5 000								F 000
year]								1	
17. Incurred during current year	4								4	
Settled during current year:										
18.1 By payment in full	4								4	
18.2 By payment on										
compromised claims		005 000								005 000
18.3 Totals paid	4								4	
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	4								4	
19. Unpaid Dec. 31, current										
year (16+17-18.6)	1	5,022							1	5,022
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	1,554			(a)					1,554	
21. Issued during year		41,360,000				· · ·				41,360,000
22 Other changes to in force										, ,
(Net)	(82)	(26,374,539)				(1,583,000)			(82)	(27,957,539)
23. In force December 31 of									,	. , ,,
current year	1,559	638,238,504		(a)		6,034,600			1,559	644,273,104
a) Includes Individual Credit Life	neurance n	rior vear \$	•	current	Voar \$					

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

ACCIDENT AND HEAT TH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)					
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 Oklahoma NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Company Code 72222

NAIC	Group Code 0028	LI	LE INSORANCE	NAIC Company Code 72222		
		1	2	3	4	5
	DIRECT PREMIUMS		Credit Life (Group			
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.						
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	192,111		388		192,499
	DIRECT DIVIDENDS TO 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						
6.5	Totals (Sum of Lines 6.1 to 6.4)					
Annu						
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					
10.	Matured endowments					
11.						
12.		13,691				13,691
13.	Aggregate write-ins for miscellaneous direct claims	.,				,
14.	All other benefits, except accident and health					
15.	Totals	41,250				41,250
	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)					

	C	Ordinary (0		Credit Life (Group and Individual) G		Group Industrial			Total	
DIRECT DEATH	1	2	3	<u>4</u>	5	6	7	8	9	10
BENEFITS AND		-	No. of	•	Ŭ	0		0	Ũ	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										
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				(a)						
21. Issued during year				· ·						
22 Other changes to in force										
(Net)	(15)	(4,778,470)							(15)	(4,777,570
23. In force December 31 of										
current year	237	92,232,656		(a)		36,700			237	92,269,356

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

ACCIDENT AND HEAT TH INSURANCE

	1	2	3	4	5
			Policyholder Dividends		
			Paid, Refunds to		D: (1
	Dire et Dreeniume	Direct Premiums	Members or Credited	Discott and Daid	Direct Losses
24. Group Policies (b)	Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
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)					

For health business on indicated lines report: Number of persons insinsured under indemnity only products ured under PPO managed care produ and number of persons icts



DIRECT BUSINESS IN THE STATE OF Oregon NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Comp ny Codo 70000

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	1,039,902				1, 106, 488
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX			
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	1,066,352		66,586		1,132,938
	DIRECT DIVIDENDS TO			, i i i i i i i i i i i i i i i i i i i		, ,
	POLICYHOLDERS/REFUNDS TO MEMBERS					
	isurance:					
6.1	· · · · · · · · · · · · · · · · · · ·					
6.3	Applied to provide paid-up additions or shorten the					
~ 4	endowment or premium-paying period					
	Other					
Annui						
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)					
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					
15.	Totals	103,606				103,606
	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	Drdinary	1-	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	o	14 660								14.662
Settled during current year:	د	14,002							s	14,002
18.1 By payment in full										
18.2 By payment on										
compromised claims 18.3 Totals paid	2								2	
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	2								2	
19. Unpaid Dec. 31, current year (16+17-18.6)	1	1,000							1	1,000
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior	1 060	E40 212 660		(-)		6 140 000			1 260	554 454 5 <u>60</u>
year 21. Issued during year	1,∠00 62	29 420 000		(a)		0, 140,900				
22 Other changes to in force										
(Net)	(71)	(25,710,440)				(1,124,000)			(71)	(26,834,440)
23. In force December 31 of current year	1,251	552,023,220		(a)		5,016,900			1,251	557,040,120

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

ACCIDENT AND HEAT TH INSURANCE

	1	2	3	4	5
		Direct Premiums	Policyholder Dividends Paid, Refunds to 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	Pennsylvania
NAIC Group Code	0028	

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Com 70000

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	3,085,058				
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	3,204,758		119,233		3,323,991
	DIRECT DIVIDENDS TO 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						
Annu						
7.1						
7.2						
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					
15.	Totals	1,596,015		118,200		1,714,215
	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						
	C	Drdinary	(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	1									
17. Incurred during current year	8								8	
Settled during current year:										
18.1 By payment in full	9				1				10	.904,757
18.2 By payment on										
compromised claims										
compromised claims 18.3 Totals paid					1	.118,200				.904,757
18.4 Reduction by compromise		,				,				
18.5 Amount rejected										
18.6 Total settlements	9	786,557				118,200				.904,757
19. Unpaid Dec. 31, current		,				,				,
year (16+17-18.6)										
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
vear	2,981	1, 168, 411, 899		(a)					2,981	1, 179, 408, 199
21. Issued during year		62,472,000								
22 Other changes to in force										
(Net)	(214)	(49,389,940)				(1,337,600)			(214)	(50,727,540)
23. In force December 31 of										
current year	2,915	1,181,493,959		(a)		9,658,700			2,915	1,191,152,659

(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 HEAT THINGUDANCE

		1	2	3	4	5
			Direct Premiums	Policyholder Dividends Paid, Refunds to Members or Credited		Direct Losses
~ 1		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
	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)					
	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)					

(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



DIRE	CT BUSINESS IN THE STATE OF Rhode Island				DURING THE	YEAR 2021
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	7,422,076		2,766,299		10, 188, 375
2.	Annuity considerations	1,008,497				1,008,497
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	8,450,573		2,766,299		11,216,872
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
	isurance:					
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)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	6 , 469 , 652				7, 120, 252
10.						
11.	Annuity benefits	8,478,926				8,478,926
12.	Surrender values and withdrawals for life contracts	1,665,015				1,665,015
	Aggregate write-ins for miscellaneous direct claims and benefits paid					
	All other benefits, except accident and health	,				
15.	Totals	16,663,129		650,600		17,313,729
	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							
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		0 0 10 000				10, 100			_	0.000.400
year	4				1				5	2,868,489
17. Incurred during current year	47	5,862,195			12				59	6,663,395
Settled during current year:										
18.1 By payment in full	48	6,469,652			10				58	7, 120, 252
18.2 By payment on										
compromised claims 18.3 Totals paid	,									
18.3 Totals paid		6,469,652			10				58	7, 120, 252
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements		6,469,652			10					7, 120, 252
19. Unpaid Dec. 31, current										
year (16+17-18.6)	3	2,211,632			3	200,000			6	2,411,632
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	9,200	2,776,026,743		(a)	1				9,201	3,054,167,643
21. Issued during year										
22. Other changes to in force										
(Net)	(523)	(131,929,186)				(963,100)			(523)	(132,892,286)
23. In force December 31 of	0.055	0 004 054 007				077 177 000			0.050	0 100 100 007
current year (a) Includes Individual Credit Life In	9,055	2,824,951,837		(a)	1	277, 177, 800			9,056	3,102,129,637

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

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

..... , current year \$

ACCIDENT AND HEALTH INSURANCE

		1	2	3	4	5
		Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)					
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						
25.4	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)					

(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 ----



DIRE	CT BUSINESS IN THE STATE OF South Carolina	а			DURING THE	YEAR 2021
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.		1,149,736				1,247,593
2.						
3.			XXX		XXX	
4.						
5.	Totals (Sum of Lines 1 to 4)	1,207,759		97,857		1,305,616
	DIRECT DIVIDENDS TO 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					
6.5	Totals (Sum of Lines 6.1 to 6.4)					
Annu						
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					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	1,215,617				1,215,617
	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		ndustrial		Total
DIRECT DEATH	1	2	(Group 3		6		7	8	9	
BENEFITS AND	1	Z	•	4	5	6	1	8	9	10
MATURED	NI- of		No. of				NI 6		Nia af	
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
	Certils.	Amount	Ceruis.	Amount	Ceruis.	Amount	Ceruis.	Amount	Ceruis.	Amount
 Unpaid December 31, prior year 	-	100 010							-	100 010
year	I								I	
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full	10								10	
18.2 By payment on										
compromised claims 18.3 Totals paid										
18.3 Totals paid	10	961,427							10	
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	.10	.961.427								
19. Unpaid Dec. 31, current		,								,
year (16+17-18.6)	2	37,592							2	37,592
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior					1 0110100					
vear	1.153	387.028.086		(a)		9,250,600			1,153	
21. Issued during year	81	45,446,727		(¤)						45,446,727
22 Other changes to in force										
(Net)	(56)	(11,828,524)				(1,191,200)			(56)	(13,019,724)
23. In force December 31 of	. ,	. , ,- ,								,
current year	1,178	420,646,289		(a)		8,059,400			1,178	428,705,689

----....., current year \$

		1	2	3	4	5
			Direct Premiums	Policyholder Dividends Paid, Refunds to 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)					
	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)					
	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)			Ι		

eport: Number of pe er of persons age insured under indemnity only products



DIRECT BUSINESS IN THE STATE OF South Dakota NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Comp ny Codo 70000

NAIC					NAIC Compa	any Coue 12222
	DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.	Life insurance					
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	29,105				29,105
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life in	isurance:					
6.1	Paid in cash or left on deposit					
6.2						
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4						
Annui						
7.1						
7.2						
7.3						
7.4	,					
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					
15.	Totals	224,000				224,000
	DETAILS OF WRITE-INS					
1301.						
1302.						
1303.						
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

	C	Ordinary		redit Life and Individual)		Group	In	dustrial	-	Total
DIRECT DEATH	1	2	3	<u>4</u>	5	6 6	7	8	9	10
BENEFITS AND		-	No. of	•	Ŭ	Ŭ		U	Ŭ	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	1									
Settled during current year:										
18.1 By payment in full	1									
18.2 By payment on compromised claims										
18.3 Totals paid	1	224.000								
18.4 Reduction by compromise										,
18.5 Amount rejected										
18.6 Total settlements	1	224.000								224.000
19. Unpaid Dec. 31, current year (16+17-18.6)										
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year				(a)						
21. Issued during year	1									
22. Other changes to in force (Net)		(306,000)							(3)	(250,400
23. In force December 31 of current year	33	18,059,862		(a)		55,600			33	18,115,462

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

ACCIDENT AND HEAT TH INCHDANCE

		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)					
	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 NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Company Code 72222

NAIC Group Code 0028	L	FE INSURANCE		NAIC Compa	ny Code 72222
	1	2 Ora dit life (Oracum	3	4	5
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance			05 740		921,118
2. Annuity considerations					
3. Deposit-type contract funds				XXX	,
 Deposit-type contract runus					
 5. Totals (Sum of Lines 1 to 4) 			25.746		948.718
	922,972		23,740		940,710
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					136.268
10. Matured endowments			·		
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					43,135
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	· · · · · · · · · · · · · · · · · · ·				,
14. All other benefits, except accident and health					
15. Totals	125,602		76,300		201,902
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)					
above)					

	0) rdin on (Credit Life		Crown	l.	aduatrial		Tatal
		Ordinary	<u> </u>	and Individual)	<u> </u>	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										
17. Incurred during current year	3				2				5	
Settled during current year:										
18.1 By payment in full	2	.59,968							4	136,268
18.2 By payment on										-
compromised claims 18.3 Totals paid		F0 000				70,000				400,000
18.3 Totals paid	2								4	
18.4 Reduction by compromise										
18.5 Amount rejected										
18.5 Amount rejected 18.6 Total settlements	2								4	
19. Unpaid Dec. 31, current year (16+17-18.6)	1	50,032							1	50,032
J oan (10 11 1010)	-	,			No. of					,
POLICY EXHIBIT					Policies					
-					Folicies					
20. In force December 31, prior year	08/	103 064 121		(c)		2 460 000			08/	
21. Issued during year										
	<u>.</u> 00	20,010,000			·					
22. Other changes to in force (Net)	(48)	(12,174,383)				(463,200)			(48)	(12,637,583)
23. In force December 31 of current year	994	420,363,038		(a)		2.005.800			994	422,368,838
(a) Includes Individual Credit Life I		, ,		(a)		2,000,000			554	-LL,000,000

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

ACCIDENT AND HEAT TH INSURANCE

	1	2	3	4	5
		Direct Premiums	Policyholder Dividends Paid, Refunds to 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 Texas NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Compo ny Codo 70000

NAIC Group Code 0028	L	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. Annuity considerations					
Deposit-type contract funds				XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	10,174,812		428,141		10,602,953
DIRECT DIVIDENDS TO					
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					
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	7.470.244		275.000		7.745.244
10. Matured endowments					, ,
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals	8,400,834		275,000		8,675,834
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		Credit Life and Individual)		Group		ndustrial		Total
DIRECT DEATH	1	2	3	4 and individual)	5	6	7	8	9	10
BENEFITS AND		2	No. of	-	Ŭ	0	'	0	5	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	5	1,321,197			2				7	1,402,797
17. Incurred during current year		7,244,073			3				37	7,519,073
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid	32	7 470 244			3	275 000			35	7 745 244
18.4 Reduction by compromise						£70,000				
18.5 Amount rejected										
18.6 Total settlements	.32	7,470,244				.275,000				7,745,244
19. Unpaid Dec. 31, current year (16+17-18.6)	7	1.095.026			2	81,600			9	1,176,626
,, _,, _		,,			No. of	,				, ,
POLICY EXHIBIT					Policies					
20. In force December 31, prior					1 0110100					
year		4,693,107,098		(a)					10,501	4,732,838,098
21. Issued during year	697	411.846.000		< /					697	411,846,000
22 Other changes to in force										
(Net)	(597)	(186,001,815)				(2,484,400)			(597)	(188,486,215)
23. In force December 31 of current year	10,601	4,918,951,283		(a)		37,246,600			10,601	4,956,197,883

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

-----..... , current year \$

		1	2	3	4	5
		Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)					
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)					
	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 Utah NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Comp ny Codo 70000

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.				077		282,325
2.						202,025
3.					XXX	
3. 4.						
4. 5.	Totals (Sum of Lines 1 to 4)	280.549		1.776		282.325
J.	DIRECT DIVIDENDS TO	200,049		1,770		202,323
l ife ir	POLICYHOLDERS/REFUNDS TO MEMBERS					
6.1						
6.3	Applied to provide paid-up additions or shorten the					
0.0	endowment or premium-paying period					
6.4						
6.5	T () () () () () () () () () (
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	5 000				5 000
10.	Matured endowments					
11.		8.362				.8,362
12.		.11,058				
13.	Aggregate write-ins for miscellaneous direct claims					
14.						
15.	Totals	24,420				24,420
	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)					

	C	Ordinary		Credit Life and Individual)		Group	1	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:	2								2	
18.1 By payment in full 18.2 By payment on									1	5,000
compromised claims 18.3 Totals paid	1								1	
18.4 Reduction by compromise 18.5 Amount rejected										
18.6 Total settlements	1								1	
19. Unpaid Dec. 31, current year (16+17-18.6)	1	2,689							1	2,689
POLICY EXHIBIT 20. In force December 31, prior					No. of Policies					
vear				(a)						
21. Issued during year										
22. Other changes to in force (Net)	(17)	(6,385,869)				4,700			(17)	
23. In force December 31 of current year	342	185,719,734		(a)		168,500			342	185,888,234

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

ACCIDENT AND HEAT TH INCHDANCE

		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)					
	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					



DIRECT BUSINESS IN THE STATE OF Vermont NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Company Code 72222

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					
2.	Annuity considerations					
3.	Deposit-type contract funds				XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	454,519		876		455,395
	DIRECT DIVIDENDS TO	,				,
	POLICYHOLDERS/REFUNDS TO MEMBERS					
Life i	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						
6.5	Totals (Sum of Lines 6.1 to 6.4)					
Annu	ities:					
7.1						
7.2						
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	147 130				147 130
10.	Matured endowments					
11.		112,332				
12.		123,467				,
13	Aggregate write-ins for miscellaneous direct claims					
10.	and benefits paid					
14.						
15.	Totals	382.929				382.929
	DETAILS OF WRITE-INS					
1301						
1302						
	·					
1398	. Summary of Line 13 from overflow page					
	. Totals (Lines 1301 thru 1303 plus 1398) (Line 13					
1000	above)					

	Ordinary		Credit Life (Group and Individual)			0	Industrial		Total	
	C		、 · ·	,		Group				
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.	A 1	No. of		Pols. &		Pols. &	
	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior	-	05 100								05 100
year	I									
17. Incurred during current year	1								1	
Settled during current year:										
18.1 By payment in full	2	147 , 130							2	147 , 130
18.2 By payment on										
compromised claims 18.3 Totals paid										
18.3 Totals paid	2	147 , 130							2	147 , 130
18.4 Reduction by compromise										
18.5 Amount rejected	_									
18.6 Total settlements	2	147.130							2	147.130
19. Unpaid Dec. 31, current		, ,								, .
year (16+17-18.6)										
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	525	193.681.201		(a)		80.800			525	
21. Issued during year	22			()		,			22	
22 Other changes to in force										
(Net)	(32)	(9,927,686)							(32)	(9,927,686
23. In force December 31 of									,	
current year	515	192,518,515		(a)		80,800			515	192,599,315

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

, current year \$, current year \$

ACCIDENT AND HEALTH INSURANCE

		1	2	3	4	5
				Policyholder Dividends		
			Direct Dremiume	Paid, Refunds to Members or Credited		Direct Lesses
		Direct Premiums	Direct Premiums Earned	on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)	Bilder feiniding	Edified	on Direct Dusiness	Direct 200000 1 did	lindarica
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)					
	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 Virginia NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Com 70000

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.		2,118,283				2, 156, 143
2.						
3.	Deposit-type contract funds				XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	2,192,381		37,860		2,230,241
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					· · ·
Life ir	isurance:					
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						
Annu						
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					
9.	Death benefits	2,033,528				
10.	Matured endowments					
11.						
12.						267,326
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					·
14.	All other benefits, except accident and health					
15.	Totals	2,493,364				2,493,364
	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)					

		Sadia and		Credit Life		0				T-4-1
	(Drdinary	1-1	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	4								4	1,920,507
17. Incurred during current year	3									
Settled during current year:										
18.1 By payment in full	6	2.033.528							6	2.033.528
18.2 By payment on										
compromised claims 18.3 Totals paid	6	2 033 528							6	2,033,528
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements		0 000 500								0 000 500
	b	2,033,528							0	2,033,528
19. Unpaid Dec. 31, current	1	7 001							-	7 001
year (16+17-18.6)	1	7,321							1	7,321
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	2,144	1,042,735,505		(a)		3,491,700				1,046,227,205
21. Issued during year	114								114	
22. Other changes to in force										
(Net)	(116)	(46,052,303)				(290,400)			(116)	(46,342,703)
23. In force December 31 of										
current year	2,142	1,064,855,202		(a)		3,201,300			2,142	1,068,056,502

(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 HEAT TH INCHDANCE

		1	2	3	4	5
			Direct Premiums	Policyholder Dividends Paid, Refunds to Members or Credited		Direct Losses
~ 1		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
	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)					
	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)					

(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
NAIC Group Code	0028	

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Company Code 72222

NAIC	Group Code 0028	LI	LE INPOKANCE		NAIC Company Code 72222		
		1	2	3	4	5	
	DIRECT PREMIUMS		Credit Life (Group				
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total	
1.						2,484,143	
2.	Annuity considerations						
3.	Deposit-type contract funds		XXX		XXX		
4.	Other considerations						
5.	Totals (Sum of Lines 1 to 4)	2,412,821		148,840		2,561,661	
	DIRECT DIVIDENDS TO						
Lifo ir	POLICYHOLDERS/REFUNDS TO MEMBERS						
6.1							
	Applied to pay renewal premiums						
6.2	Applied to provide paid-up additions or shorten the						
0.3	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	449.280				449.280	
10.	Matured endowments					1,926	
11.	Annuity benefits	,.					
12.	Surrender values and withdrawals for life contracts	319.826				319,826	
13.	Aggregate write-ins for miscellaneous direct claims					,	
14.	All other benefits, except accident and health						
15.	Totals	822,109				822,109	
	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						T ()
	(Drdinary	· ·	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	5								5	481,047
17. Incurred during current year	19	1,678,451							19	1,678,451
Settled during current year:										
18.1 By payment in full	16									
18.2 By payment on										
compromised claims										
compromised claims 18.3 Totals paid									16	
18.4 Reduction by compromise										
18.5 Amount rejected	_									
18.6 Total settlements										
19. Unpaid Dec. 31, current										
year (16+17-18.6)	8	1,710,218							8	1,710,218
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
vear	2,651	1,237,672,066		(a)	1				2,652	1,251,400,597
21. Issued during year		110,432,000								110,432,000
22 Other changes to in force										
(Net)	(170)	(68,678,166)				(240,800)			(170)	
23. In force December 31 of										
current year	2,658	1,279,425,900		(a)	1	13,487,731			2,659	1,292,913,631

(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 \$

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)					
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)					

(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 West Virginia NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Company Code 72222

						uny 0000 12222
		1	2	3	4	5
		0.1	Credit Life (Group	0		T ()
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.						
2.						
3.			XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	115,702				115,702
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life in	isurance:					
6.1						
6.2						
6.3					_	
6.4	Other					
6.5	Totals (Sum of Lines 6.1 to 6.4)					
Annui	ties:					
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					
15.	Totals	21,813				21,813
	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)					

	0	Ordinary		Credit Life and Individual)		Group	1	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: 18.1 By payment in full	2								2	
 18.2 By payment on compromised claims										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
 Unpaid Dec. 31, current year (16+17-18.6) 	2	299,000							2	299,000
POLICY EXHIBIT 20. In force December 31, prior					No. of Policies					
vear	114			(a)					114	
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year	119	43,291,000		(a)					119	43,291,000

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

		1	2	3	4	5
		Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)					
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)					

(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 Wisconsin NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Company Code 72222

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.						
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	604,428		19,773		624,201
	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)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					12,315
13.	Aggregate write-ins for miscellaneous direct claims					
	and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	635,461				635,461
	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)					

	C	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	Ceruis.	Amount	Ceruis.	Amount	Ceruis.	Amount	Certiis.	Amount	Certiis.	Amount
year										
17. Incurred during current year	1								1	
Settled during current year:										
18.1 By payment in full	1								1	
18.2 By payment on compromised claims										,
18.3 Totals paid	1								1	
18.4 Reduction by compromise		, 								, , , , , , , , , , , , , , , , , , ,
18.5 Amount rejected										
18.6 Total settlements	1	621.000								
19. Unpaid Dec. 31, current year (16+17-18.6)		,								,
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year				(a)		1,823,600			767	
21. Issued during year									43	
22. Other changes to in force (Net)	(42)	(13,952,631)								(14,059,431)
23. In force December 31 of current year	768	315,262,185		(a)		1,716,800			768	316,978,985

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

ACCIDENT AND HEAT TH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	Billott Folliano	Edition		Direct Lobood F did	incariou
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 Wyoming NAIC Group Code 0028

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Company Code 72222

1. 2. 3.	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2 Credit Life (Group	3	4	5
2.	AND ANNUITY CONSIDERATIONS		Credit Life (Group			
2.						
2.		Ordinary	and Individual)	Group	Industrial	Total
						<u>60,459.</u>
3	Annuity considerations					
5.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	60,459				60,459
	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					
	Other					
Annuit	ties:					
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				100.000
10.	Matured endowments					,
11.	Annuity benefits					
		14,752				14,752
	Aggregate write-ins for miscellaneous direct claims					
14.						
15.	Totals	115,626				115,626
	DETAILS OF WRITE-INS	- /				
1301.						
1302.						
1303.						
1398					1	
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13					
	above)					

				Credit Life						T
	(Drdinary	1-1	and Individual)		Group		ndustrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4	5	6	7	8	9	10
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS INCURRED	Pols. & Certifs.	Amount	& Gr. Certifs.	Amount	No. of Certifs.	Amount	Pols. & Certifs.	Amount	Pols. & Certifs.	Amount
16. Unpaid December 31, prior	Certiis.	Amount	Certiis.	Amount	Ceruis.	Amount	Ceruis.	Amount	Ceruis.	Anount
year										
17. Incurred during current year	1								1	
Settled during current year:										
18.1 By payment in full	1								1	
18.2 By payment on										
compromised claims 18.3 Totals paid	1								1	
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	1								1	
19. Unpaid Dec. 31, current year (16+17-18.6)										
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year				(a)					57	
21. Issued during year	7	2,250,000							7	2,250,000
22. Other changes to in force (Net)	(8)	(2,628,998)								(2,628,998)
23. In force December 31 of	(-)									
current year	56	30,108,999		(a)					56	30,108,999

---, current year \$

...... , current year \$

		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)					
	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	Grand Total
NAIC Group Code	0028	

LIFE INSURANCE

DURING THE YEAR 2021 NAIC Company Code 72222

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.		102,558,950		7,314,087		
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	108,227,271		7,314,087		115,541,358
	DIRECT DIVIDENDS TO	· · ·		, ,		, ,
	POLICYHOLDERS/REFUNDS TO MEMBERS					
Life i	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						
6.5	Totals (Sum of Lines 6.1 to 6.4)					
Annu	ities:					
7.1						
7.2						
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	64.244.257		3,794,200		68.038.457
10.	Matured endowments			······		, ,
11.	Annuity benefits					,,
12.		9 053 480				9 053 480
13.	Aggregate write-ins for miscellaneous direct claims					
	and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	94,981,899		3,794,200		98,776,099
	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		_				
		Ordinary	1-	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	65				12	2,013,700			77	14,996,198
17. Incurred during current year	447				46	2,847,300				
Settled during current year:										
18.1 By payment in full										
18.2 By payment on						, ,				
compromised claims										
18.3 Totals paid	420	64.244.257			46	3,794,200			466	68.038.457
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements					46	3,794,200				
19. Unpaid Dec. 31, current										
year (16+17-18.6)	92	16,229,494			12	1,066,800			104	17,296,294
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	110,330	45,631,182,963		(a)	2				110,332	46,337,531,994
21. Issued during year	6,403	3,284,248,347								3,284,248,347
22. Other changes to in force										
(Net)	(6,591)	(2,231,330,942)				(22,615,600)			(6,591)	(2,253,946,542)
23. In force December 31 of										
current year	110,142	46,684,100,368		(a)	2	683,733,431			110,144	47,367,833,799

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

, current year \$, current year \$

		1	2	3	4	5
		Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24.	Group Policies (b)					
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)					
25.6	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE AMICA LIFE INSURANCE COMPANY FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

		1 Amount
1.	Reserve as of December 31, Prior Year	14,017,556
2.	Current year's realized pre-tax capital gains/(losses) of \$	(490,427)
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)	13,527,129
5.	Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)	2,099,688
6.	Reserve as of December 31, current year (Line 4 minus Line 5)	11,427,441

		AMORTIZATION			
	Year of Amortization	1 Reserve as of December 31, Prior Year	2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3 Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	4 Balance Before Reduction for Curren Year's Amortization (Cols. 1 + 2 + 3)
1			(34,275)		
	2021		(109,079)		
2. 3.	2022		(109,079)		
3. 4			(125,345) (98,987)		
	2024	······································	(98,987) (70,509)		,- , -
5.	2025				
6.	2026	,	. , ,		*
7.	2027		. , ,		,
8.	2028	,	(19,765)		
9.	2029		(14,925)		
10.	2030		(9,540)		,
11.	2031	,	(4,386)		
12.	2032		(1,154)		
13.	2033	· · · · · · · · · · · · · · · · · · ·			*
14.	2034				
15.	2035	,			
16.	2036	,	4,579		,
17.	2037		6,277		,
18.	2038		7 ,785		,
19.	2039		8,762		
20.	2040	,	10,641		,
21.	2041		12,111		
22.	2042		11,258		*
23.	2043		7,468		
24.	2044		4 , 190		
25.	2045	,	810		
26.	2046		(3, 185)		
27.	2047		(4,516)		
28.	2048		(3,592)		
29.	2049		(2,566)		
30.	2050	1,399	(1,642)		
31.	2051 and Later		(513)		(513
32.	Total (Lines 1 to 31)	14,017,556	(490,427)		13,527,129

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)
1. Reserve as of December 31, prior year	3, 184, 264		4,061,802	7,772,658			25,915,040
2. Realized capital gains/(losses) net of taxes - General Account	7,685			5,808,812		5,818,665	5,826,350
3. Realized capital gains/(losses) net of taxes - Separate Accounts							
4. Unrealized capital gains/(losses) net of deferred taxes - General Account				5,679,435	6,640,886		
5. Unrealized capital gains/(losses) net of deferred taxes - Separate Accounts							
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves							
7. Basic contribution	680,436	187,333	867,769				867,769
8. Accumulated balances (Lines 1 through 5 - 6 + 7)		1,064,870	4,937,255				44,929,479
9. Maximum reserve			4,795,302	13, 172, 848			
10. Reserve objective	2, 126, 125	635,556	2,761,681	13,169,513	14,303,014	27,472,527	30,234,208
11. 20% of (Line 10 - Line 8)	(349,252)	(85,863)	(435,115)	(1,218,278)	(1,285,661)	(2,503,939)	(2,939,054
12. Balance before transfers (Lines 8 + 11)			4,502,141				41,990,425
13. Transfers		(152,255)					
14. Voluntary contribution							
15. Adjustment down to maximum/up to zero				(4,869,779)	(5,142,644)	(10,012,423)	(10,012,423)
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	3,675,388	826,752	4,502,141	13, 172, 848	14,303,014	27,475,862	31,978,002

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

			1	2	3	4	Basic C	ontribution	Reserv	e Objective	Maximun	n Reserve
						Balance for	5	6	7	8	9	10
Line	NAIC			Reclassify		AVR Reserve						
Num- ber	Desig- nation		Book/Adjusted Carrying Value	Related Party Encumbrances	Add Third Party Encumbrances	Calculations	E a sta s	Amount	E a sta s	Amount	Fasta	Amount
Dei	пацоп	LONG-TERM BONDS	Carrying value	Encumbrances	Encumbrances	(Cols. 1 + 2 + 3)	Factor	(Cols.4 x 5)	Factor	(Cols. 4 x 7)	Factor	(Cols. 4 x 9)
1.		EXEMPT Obligations	193.372.977	XXX	XXX	193.372.977	0.0000		0.0000		0.0000	
	4			XXX	XXX	407,170,789	0.0005	203,585	0.0016		0.0033	1,343,664
2.1 2.2	1	NAIC Designation Category 1.A NAIC Designation Category 1.B			XXX		0.0005		0.0016		0.0033	
2.2	1	NAIC Designation Category 1.6			XXX	7,759,138						
2.3	1	NAIC Designation Category 1.D		XXX	XXX				0.0016		0.0033	
2.4	1	NAIC Designation Category 1.D			XXX		0.0005		0.0016	41,775	0.0033	
2.5	1	NAIC Designation Category 1.E			XXX	53,289,772	0.0005		0.0016		0.0033	
2.0	1	NAIC Designation Category 1.F			XXX							
2.7		Subtotal NAIC 1 (2.1+2.2+2.3+2.4+2.5+2.6+2.7)	687,933,321	XXX	XXX	687.933.321	XXX	343,967	XXX	1,100,693	XXX	2,270,180
	2					103,582,410	0.0021		0.0064		0.0106	1,097,974
3.1	_	NAIC Designation Category 2.A		XXX	XXX		0.0021		0.0064		0.0106	
3.2	2	NAIC Designation Category 2.B		XXX	XXX			4.992	0.0064			
3.3	2	NAIC Designation Category 2.C	• • • • • • • • • • • • • • • • • • • •	XXX	XXX	, , ,	0.0021	····· , • • =				
3.4		Subtotal NAIC 2 (3.1+3.2+3.3)	160,223,664	XXX	XXX	160,223,664	XXX	336,470	XXX	1,025,431	XXX	1,698,371
4.1	3	NAIC Designation Category 3.A		XXX	XXX		0.0099					
4.2	3	NAIC Designation Category 3.B	•••••••••••••••••••••••••••••••••••••••	XXX	XXX							
4.3	3	NAIC Designation Category 3.C		XXX	XXX				0.0263			
4.4		Subtotal NAIC 3 (4.1+4.2+4.3)		XXX	XXX		XXX		XXX		XXX	
5.1	4	NAIC Designation Category 4.A		XXX	XXX		0.0245		0.0572		0.0817	
5.2	4	NAIC Designation Category 4.B		XXX	XXX		0.0245		0.0572		0.0817	
5.3	4	NAIC Designation Category 4.C		XXX	XXX		0.0245		0.0572		0.0817	
5.4		Subtotal NAIC 4 (5.1+5.2+5.3)		XXX	XXX		XXX		XXX		XXX	
6.1	5	NAIC Designation Category 5.A		XXX	XXX		0.0630		0.1128			
6.2	5	NAIC Designation Category 5.B		XXX	XXX		0.0630		0.1128		0.1880	
6.3	5	NAIC Designation Category 5.C		XXX	XXX				0.1128			
6.4		Subtotal NAIC 5 (6.1+6.2+6.3)		XXX	XXX		XXX		XXX		XXX	
7.	6	NAIC 6		XXX	XXX				0.2370			
8.		Total Unrated Multi-class Securities Acquired by Conversion		XXX	XXX		XXX		XXX		XXX	
9.		Total Long-Term Bonds (1+2.8+3.4+4.4+5.4+6.4+7+8)	1,041,529,962	XXX	XXX	1,041,529,962	XXX	680,436	XXX	2,126,125	XXX	3,968,551
		PREFERRED STOCKS										
10.	1	Highest Quality		XXX					0.0016		0.0033	
11.	2	High Quality		XXX					0.0064			
12.	3	Medium Quality		XXX			0.0099		0.0263		0.0376	
13.	4	Low Quality		XXX					0.0572		0.0817	
14.	5	Lower Quality		XXX			0.0630		0.1128		0.1880	
15.	6	In or Near Default		XXX					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	

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

			1	2	3	4	Basic C	ontribution	Reserve	e Objective	Maximu	m Reserve
						Balance for	5	6	7	8	9	10
Line	NAIC			Reclassify		AVR Reserve						
Num-	Desig- nation	Description	Book/Adjusted	Related Party Encumbrances	Add Third Party Encumbrances	Calculations	- 1	Amount	F (Amount	- ·	Amount
ber	nation		Carrying Value	Encumprances	Encumprances	(Cols. 1 + 2 + 3)	Factor	(Cols.4 x 5)	Factor	(Cols. 4 x 7)	Factor	(Cols. 4 x 9)
10		SHORT-TERM BONDS		2007	2007		0.0000		0.0000		0,0000	
18.		Exempt Obligations		XXX	XXX						0.0000 0.0033	
19.1		NAIC Designation Category 1.A		XXX	XXX		0.0005		0.0016			
19.2		NAIC Designation Category 1.B		XXX	XXX		0.0005		0.0016		0.0033	
19.3		NAIC Designation Category 1.C			XXX		0.0005		0.0016		0.0033	
19.4		NAIC Designation Category 1.D		XXX	XXX		0.0005		0.0016		0.0033	
19.5		NAIC Designation Category 1.E		XXX	XXX		0.0005				0.0033	
19.6		NAIC Designation Category 1.F		XXX	XXX		0.0005		0.0016		0.0033	
19.7		NAIC Designation Category 1.G		XXX	XXX		0.0005		0.0016		0.0033	
19.8		Subtotal NAIC 1 (19.1+19.2+19.3+19.4+19.5+19.6+19.7)		XXX	XXX		XXX		XXX		XXX	
20.1		NAIC Designation Category 2.A		XXX	XXX		0.0021		0.0064		0.0106	
20.2		NAIC Designation Category 2.B		XXX	XXX		0.0021		0.0064		0.0106	
20.3	2	NAIC Designation Category 2.C		XXX	XXX		0.0021		0.0064		0.0106	
20.4		Subtotal NAIC 2 (20.1+20.2+20.3)		XXX	XXX		XXX		XXX		XXX	
21.1	3	NAIC Designation Category 3.A		XXX	XXX		0.0099		0.0263		0.0376	
21.2	3	NAIC Designation Category 3.B		XXX	XXX		0.0099		0.0263		0.0376	
21.3	3	NAIC Designation Category 3.C		XXX	XXX		0.0099		0.0263		0.0376	
21.4		Subtotal NAIC 3 (21.1+21.2+21.3)		XXX	XXX		XXX		XXX		XXX	-
22.1	4	NAIC Designation Category 4.A			XXX		0.0245		0.0572		0.0817	
22.2		NAIC Designation Category 4.B		XXX	XXX		0.0245		0.0572		0.0817	
22.3		NAIC Designation Category 4.C		XXX	XXX		0.0245		0.0572		0.0817	
22.4		Subtotal NAIC 4 (22.1+22.2+22.3)		XXX	XXX		XXX		XXX		XXX	
23.1		NAIC Designation Category 5.A										
23.2	5	NAIC Designation Category 5.8			XXX		0.0630		0.1128		0,1880	
23.3		NAIC Designation Category 5.C		XXX	XXX		0.0630		.0.1128		0.1880	
23.4		Subtotal NAIC 5 (23.1+23.2+23.3)		XXX	XXX		XXX		XXX		XXX	
24.	6	NAIC 6		XXX	XXX		0.0000		0.2370		0.2370	
24.	0	Total Short-Term Bonds (18+19.8+20.4+21.4+22.4+23.4+24)		XXX	XXX		0.0000		XXX		XXX	
23.				~~~	~~~~		~~~~		~~~		~~~	
00		DERIVATIVE INSTRUMENTS		XXX	xxx		0.0005		0.0016		0.0033	
26.	4	Exchange Traded			XXX		0.0005				0.0033	
27.	1	Highest Quality					0.0005		0.0018		0.0106	
28.	2 3	High Quality					0.0021					
29.	3	Medium Quality		XXX	XXX		0.0099		0.0263		0.0376	
30.	4	Low Quality		XXX XXX	XXX		0.0245		0.0572		0.0817	
31.	5	Lower Quality			XXX							
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)	1,041,529,962	XXX	XXX	1,041,529,962	XXX	680,436	XXX	2,126,125	XXX	3,968,551

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

			1	2	3	4	Basic C	ontribution	Reserve	e Objective	Maximu	m Reserve
Line Num- ber	NAIC Desig- nation	Description	Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5 Factor	6 Amount (Cols.4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
		MORTGAGE LOANS										· · ·
		In Good Standing:										
35.		Farm Mortgages - CM1 - Highest Quality					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							
38.		Farm Mortgages - CM4 - Low Medium Quality					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					0.0015		0.0034		0.0046	
42.		Commercial Mortgages - Insured or Guaranteed					0.0003		0.0007		0.0011	
43.		Commercial Mortgages - All Other - CM1 - Highest Quality			XXX		0.0011	.42,951	0.0057		0.0074	
44.		Commercial Mortgages - All Other - CM2 - High Quality					0.0040		0.0114		0.0149	
45.		Commercial Mortgages - All Other - CM3 - Medium Quality	4,494,920			4,494,920	0.0069		0.0200		0.0257	
46.		Commercial Mortgages - All Other - CM4 - Low Medium Quality					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:										
48.		Farm Mortgages			XXX		0.0480		0.0868			
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					
		In Process of Foreclosure:										
53.		Farm Mortgages			XXX		0.0000		0.1942		0.1942	
54.		Residential Mortgages - Insured or Guaranteed			XXX				0.0046		0.0046	
55.		Residential Mortgages - All Other			XXX		.0.0000		0.0149			
56.		Commercial Mortgages - Insured or Guaranteed			XXX		0.0000		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)	71,882,602		XXX	71,882,602	XXX	187,333	XXX	635,556	XXX	826,752
59.		Schedule DA Mortgages	. /		XXX		0.0034	,	0.0114		0.0149	,
60.		Total Mortgage Loans on Real Estate (Lines 58 + 59)	71,882,602		XXX	71,882,602	XXX	187,333	XXX	635,556	XXX	826,752

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

			1	2	3	4	Basic C	Contribution	Reserv	ve Objective	Maximu	ım 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)
		COMMON STOCK Unaffiliated - Public	107,723,913	\A\A\	2004		0.0000		0 1000 ()		0 1000 ()	
1.			107,723,913	XXX	XXX		0.0000		0.1222 (a) 0.1945		0.1222 (a) 0.1945	
2.		Unaffiliated - Private	926.400	XXX	XXX		0.0000		0.0061			.8,986
3.		Federal Home Loan Bank		XXX XXX	XXX XXX		0.0000		0.000	ວ,ເວເ	0.0007	
4.		Affiliated - Life with AVR					0.0000		0.0000		0.0000	
-		Affiliated - Investment Subsidiary:					2004		200/		2004	
5.		Fixed Income - Exempt Obligations				••••	XXX		XXX XXX	••••	XXX	
6. 7		Fixed Income - Highest Quality					XXX		XXX XXX		XXX	
1.		Fixed Income - High Quality					XXX XXX				XXX	
8.		Fixed Income - Medium Quality				••••			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							0.1222 (a)		0.1222 (a)	
13.		Unaffiliated Common Stock - Private							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		0.0000		0.1945		0.1945	
17.		Total Common Stock (Sum of Lines 1 through 16)	108,650,313	~~~		108,650,313	XXX		XXX	13,169,513	XXX	13, 172, 848
17.		REAL ESTATE	100,000,010			100,000,010	~~~		~~~	10, 100, 010	~~~~	10, 172,040
18.		Home Office Property (General Account only)					0.0000		0.0912		0.0912	
19.		Investment Properties							0.0912		0.0912	
20.		Properties Acquired in Satisfaction of Debt					0.0000		0.1337		0.1337	
20.		Total Real Estate (Sum of Lines 18 through 20)					XXX		XXX		XXX	
21.		OTHER INVESTED ASSETS					~~~		~~~		~~~	
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS										
22.		Exempt Obligations		XXX	XXX				0.0000		0.0000	
23.	1	Highest Quality		XXX	XXX		0.0005		0.0016		0.0033	
24.	2	High Quality		XXX	XXX		0.0021		0.0064		0.0106	
25.	3	Medium Quality		XXX	XXX				0.0263		0.0376	
26.	4	Low Quality		XXX	XXX		0.0245		0.0572		0.0817	
27.	5	Lower Quality		XXX	XXX		0.0630		<u>0.1128</u>		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

			1	2	3	4	Basic C	ontribution	Reserve	e Objective	Maximu	im 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					0.0064		0.0106	
32.	3	Medium Quality		XXX	XXX		0.0099				0.0376	
33.	4	Low Quality		XXX					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.	ů	Affiliated Life with AVR		XXX	XXX		0.0000		0.0000		0.0000	
37.		Total with Preferred Stock Characteristics (Sum of Lines 30		7000	7000		0.0000		0.0000		0.0000	
07.		through 36)		XXX	XXX		XXX		XXX		XXX	
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS		7001	7000		7000		7000		7000	
		OF MORTGAGE LOANS										
		In Good Standing Affiliated:										
38.		Mortgages - CM1 - Highest Quality			XXX		0.0011		0.0057		0.0074	
30. 39.		Mortgages - CM2 - High Quality			XXX		0.0040				0.0149	
							0.0040		0.0200		0.0257	
40.		Mortgages - CM3 - Medium Quality			XXX		0.0120				0.0257	
41.		Mortgages - CM4 - Low Medium Quality			XXX							
42.		Mortgages - CM5 - Low Quality			XXX		0.0183		0.0486		0.0628	
43.		Residential Mortgages - Insured or Guaranteed			XXX				0.0007		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				0.0014		0.0023	
48.		Residential Mortgages - All Other			XXX				0.0066		0.0103	
49.		Commercial Mortgages - Insured or Guaranteed			XXX				0.0014		0.0023	
50.		Commercial Mortgages - All Other			XXX						0.1371	
		In Process of Foreclosure Affiliated:										
51.		Farm Mortgages			XXX				0.1942		0.1942	
52.		Residential Mortgages - Insured or Guaranteed			XXX				0.0046		0.0046	
53.		Residential Mortgages - All Other			XXX				0.0149		0.0149	
54.		Commercial Mortgages - Insured or Guaranteed							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			<u> </u>	(c)		(c)	
58.		Unaffiliated - In Good Standing Defeased With Government										
00.		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 - Overdue, Not in Process			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)	1		XXX		XXX		XXX		XXX	
64.		Total with Mortgage Loan Characteristics (Lines 56 + 63)	-		XXX		 XXX		 XXX		XXX	
04.	1	Total with Moltgage Loan ChardClenstics (Lines 30 + 03)	I	I	٨٨٨		~~~		~~~		~~~	

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

			1	2	3	4	Basic C	ontribution	Reserve	Objective	Maximu	m Reserve
Line Num- ber	NAIC Desig- nation	Description	Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5 Factor	6 Amount (Cols.4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS										
		OF COMMON STOCK										
65.		Unaffiliated Public		XXX			0.0000		0.1580 (a)		0.1580 (a)	
66.		Unaffiliated Private		XXX	XXX		0.0000				0.1945	
67.		Affiliated Life with AVR		XXX	XXX		0.0000				0.0000	
68.		Affiliated Certain Other (See SVO Purposes & Procedures Manual)		XXX	xxx		0.0000		0.1580		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 through 69)		XXX	XXX		XXX		XXX		XXX	
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE		7000			7001		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		7001	
71.		Home Office Property (General Account only)					0.0000				0.0912	
72.		Investment Properties										
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				0.0010	
76.		Non-guaranteed Federal Low Income Housing Tax Credit					0.0063		0.0120		0.0190	
77.		Guaranteed State Low Income Housing Tax Credit									0.0010	
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					0.0000				0.0042	
82.		NAIC 2 Working Capital Finance Investments		XXX			0.0000		0.0137		0.0137	
83.		Other Invested Assets - Schedule BA		XXX			0.0000		0.1580		0.1580	
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)	90,525,404	XXX		90,525,404	XXX		XXX	14,303,014	XXX	14,303,014
86.		Total Other Invested Assets - Schedules BA & DA (Sum of Lines 29, 37, 64, 70, 74, 80 and 85)	90,525,404			90,525,404	XXX		XXX	14,303,014	XXX	14,303,014

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

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

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

Asset Valuation Reserve - Replications (Synthetic) Assets

NONE

Schedule F - Claims

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

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Schedule H - Part 5 - Health Claims

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Schedule S - Part 1 - Section 1

Schedule S - Part 1 - Section 2 **NONE**

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE AMICA LIFE INSURANCE COMPANY SCHEDULE S - PART 2

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

1	2	3		5	6	7
NAIC		-		-		
Company	ID	Effective		Domiciliary		
Code	Number	Date	Name of Company	Jurisdiction	Paid Losses	Unpaid Losses
0399999. To	otal Life and A	nnuity - U.S. A	Affiliates			
		nnuity - Non-L				
0799999. To	otal Life and A	nnuity - Affiliat	ies			
66346	58-0828824		Munich American Reassurance Company		1, 124, 230	
66346	58-0828824		Munich American Reassurance Company			
66346	58-0828824		Munich American Reassurance Company			
	75-1608507	08/28/2020	Optimum Re Insurance Company			
93572	43-1235868		RGA Reinsurance Company			
64688	75-6020048	04/01/2004	Scor Global Life Americas Reinsurance Company	DE		
64688	75-6020048		Scor Global Life Americas Reinsurance Company	DE		
64688 64688	75-6020048		Scor Global Life Americas Reinsurance Company	DE		250,000
	13-3126819		Scor Global Life Americas Reinsurance Company Scor Global Life USA Reinsurance Company		1,349,041 	
82627	06-0839705		Suiss Re Life & Health America. Inc.			1.500.000
	06-0839705		Swiss Re Life & Health America, Inc.	MO		
82627	06-0839705		Swiss Re Life & Health America, Inc.		140.919	1,051,300
82627	06-0839705		Swiss Re Life & Health America, Inc.	MO		
	06-0839705		Swiss Re Life & Health America, Inc.			103.100
	06-0839705		Swiss Re Life & Health America, Inc.	MO		
	06-0839705		Swiss Re Life & Health America, Inc.	MO		
	41-1760577		Wilton Reassurance Company	MN.	116,625	
		/ - U.S. Non-A			4,453,269	9,413,000
		nnuity - Non-A			4,453,269	9,413,000
	otal Life and A				4,453,269	9,413,000
		and Health - U	S Affiliates		.,,	•,•••,•••
			on-U.S. Affiliates			
		and Health - At				
		and Health - N				
	otal Accident a					
			0899999, 1499999 and 1999999)		4,453,269	9,413,000
			999, 0999999, 1799999 and 2099999)		.,,	•,•••,•••
210000011		(00000				
				 -		
000000 To	tolo Lifo Am		Hant and Haalth	I F	4,453,269	9,413,000
<u> </u>	nais - Liie, Aff	iuny and ACCIO	dent and Health		4,400,209	3,413,000

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	Reinsu	rance Ceded Life Insurance, Annuities, Deposit											1
1	2	3	4	5	6	7	8	Reserve Cr		11	Outstanding S		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
0399999.	Total Genera	l Account - Au	uthorized U.S. Affiliates											
0699999.	Total Genera	l Account - Au	uthorized Non-U.S. Affiliates											
			uthorized Affiliates											
82627	06-0839705		Swiss Re Life & Health America, Inc.	MO	YRT/I	OL								
82627	06-0839705	07/01/1985	Swiss Re Life & Health America, Inc.	MO	YRT/I	OL		406						
82627	06-0839705		Swiss Re Life & Health America, Inc.		C0/1	OL	275.000	8.909	8.268	9,266				
82627			Swiss Re Life & Health America, Inc.		YRT/I	0			6,220	5.025				
	06-0839705		Swiss Re Life & Health America, Inc.		YRT/I	OL			4,683	10				
	.06-0839705		Swiss Re Life & Health America, Inc.		YRT/I	OL	11,122,000		85.008					
82627	06-0839705		Swiss Re Life & Health America, Inc.			0L	.500,000		7.448					
	06-0839705		Swiss Re Life & Health America, Inc.			OL			216,245	.239,001				
82627			Swiss Re Life & Health America, Inc.			OL.			16,825					
	06-0839705		Swiss Re Life & Health America, Inc.		C0/I	0L	15,350,000							
82627	06-0839705		Swiss Re Life & Health America, Inc.		C0/1	OL.	1,270,082,400	5,220,918	5,529,000	2,000,991				
	06-0839705		Swiss Re Life & Health America, Inc.			XXXL	1,597,653,162		16,833,624				l	
	06-0839705		Swiss Re Life & Health America, Inc.		C0/1	0L								
	06-0839705		Swiss Re Life & Health America, Inc		YRT/1	0L		1,916						
	06-0839705		Swiss Re Life & Health America, Inc	MO	YRT/1	0L								
	06-0839705		Swiss Re Life & Health America, Inc.	MO	C0/I	XXXL								
82627	06-0839705	07/10/2010	Swiss Re Life & Health America, Inc.	MO	C0/I	XXXL	1,437,414,118							
	06-0839705	05/01/2007	Swiss Re Life & Health America, Inc	MO	YRT/I	0L								
	06-0839705	_05/13/2013	Swiss Re Life & Health America, Inc.		YRT/1	OL	2,910,088	8,936						
82627	06-0839705		Swiss Re Life & Health America, Inc.		YRT/1	OL	21,795,613		2,494					
	06-0839705	.09/01/2020	Swiss Re Life & Health America, Inc	MO	YRT/1	XXXL								
65676	35-0472300		Lincoln National Life Insurance Company	IN	YRT/1	OL	5,869,612	2, 143						
	41-1760577		Wilton Reassurance Company	MN	C0/1	XXXL	605, 194, 840			1,067,459				
16535	36-4233459		Zurich American Insurance Company		CAT/G	OL								
66346			Munich American Reassurance Company		YRT/G	OL								
66346			Munich American Reassurance Company		C0/I	XXXL	1, 120, 894, 854			1,679,014				
66346		09/01/2015	Munich American Reassurance Company	GA	C0/I	XXXL				4,407,181				
66346		09/01/2020	Munich American Reassurance Company	GA	YRT/I	XXXL								
93572	43-1235868		RGA Reinsurance Company	MO	C0/1	XXXL	2,396,131,585			4,271,038				
64688	75-6020048		Scor Global Life Americas Reinsurance Company	DE	C0/I	XXXL	4,265,784,119			7, 326, 153				
64688	75-6020048	05/01/2009		DE	C0/I	XXXL	2,442,346,393	51,641,608		4 , 197 , 697				
64688	75-6020048	. 10/31/2011	Scor Global Life Americas Reinsurance Company	DE	C0/I	XXXL								
64688	75-6020048	. 10/10/2013	Scor Global Life Americas Reinsurance Company	DE	C0/I	XXXL	1,453,317,922			2,213,963				
64688	75-6020048	08/04/2014	Scor Global Life Americas Reinsurance Company	DE	YRT/I	OL	14,668,000							
97071	13-3126819		Scor Global Life USA Reinsurance Company			XXXL				5,021,364				
97071	13-3126819		Scor Global Life USA Reinsurance Company	DE		XXXL								
	75-1608507		Optimum Re Insurance Company	ТХ	YRT/1	XXXL								
			zed U.S. Non-Affiliates				27,819,189,927	338,453,399	315,399,109	41,990,305				
	-		uthorized Non-Affiliates				27,819,189,927	338,453,399	315,399,109	41,990,305				
	Total Genera						27,819,189,927	338,453,399	315,399,109	41,990,305				
			nauthorized U.S. Affiliates											
1799999.	Total Genera	I Account - Ur	nauthorized Non-U.S. Affiliates											
1899999.	Total Genera	I Account - Ur	nauthorized Affiliates											
2199999	Total Genera	Account - Ur	nauthorized Non-Affiliates											
	Total Genera	-												
			ertified U.S. Affiliates										1	
			ertified Non-U.S. Affiliates										1	
	-	-	ertified Affiliates											
			ertified Non-Affiliates											
	Total Genera	-												
			eciprocal Jurisdiction U.S. Affiliates											
3999999	I otal Genera	i Account - Re	eciprocal Jurisdiction Non-U.S. Affiliates										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

-		Reinsur	rance Ceded Life Insurance, Annuities, Deposit Funds and C	Juner Lia	bilities without	Life of Disabil	ity Contingencies,			insuring Compa	iny as of Decem	ber 31, Current	Year	
1	2	3	4	5	6	7	8	Reserve Cr		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		diction	Ceded	Ceded	at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Reserve	Coinsurance
			eciprocal Jurisdiction Affiliates											
	-		eciprocal Jurisdiction Non-Affiliates											
			siprocal Jurisdiction											
	-		horized, Unauthorized, Reciprocal Jurisdiction and Certified				27,819,189,927	338,453,399	315,399,109	41,990,305				
			Authorized U.S. Affiliates											
			Authorized Non-U.S. Affiliates											
			Authorized Affiliates											
			Authorized Non-Affiliates											
	Total Separate													
			Unauthorized U.S. Affiliates											
			Unauthorized Non-U.S. Affiliates											
			Unauthorized Affiliates											
			Unauthorized Non-Affiliates											
	Total Separate	-												
			Certified U.S. Affiliates											
			Certified Non-U.S. Affiliates											
			Certified Affiliates											
			Certified Non-Affiliates											
	Total Separate													
			Reciprocal Jurisdiction U.S. Affiliates											
			Reciprocal Jurisdiction Non-U.S. Affiliates											
			Reciprocal Jurisdiction Affiliates											
			Reciprocal Jurisdiction Non-Affiliates											
			Reciprocal Jurisdiction											
			uthorized, Unauthorized, Reciprocal Jurisdiction and Certified											
9199999.			9, 0899999, 1499999, 1999999, 2599999, 3099999, 3699999, 419999	99, 48999	99, 5399999, 599	9999, 6499999,								
			999 and 8699999)				27,819,189,927	338,453,399	315,399,109	41,990,305				
9299999.			99999, 0999999, 1799999, 2099999, 2899999, 3199999, 3999999, 42	2999999, 5	199999, 5499999,	, 6299999,								
		99999, 7699	999, 8499999 and 8799999)											
9999999 -	Totals						27,819,189,927	338,453,399	315,399,109	41,990,305				

Schedule S - Part 3 - Section 2

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Schedule S - Part 4

Schedule S - Part 4 - Bank Footnote

Schedule S - Part 5

Schedule S - Part 5 - Bank Footnote

SCHEDULE S - PART 6 Five Year Exhibit of Reinsurance Ceded Business

			Omitted)			
		1 2021	2 2020	3 2019	4 2018	5 2017
	A. OPERATIONS ITEMS					
1.	Premiums and annuity considerations for life and accident and health contracts	41,990			40,903	
2.	Commissions and reinsurance expense allowances					
3.	Contract claims					
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					
	B. BALANCE SHEET ITEMS					
8.	Premiums and annuity considerations for life and accident and health contracts deferred and uncollected	3 757	3 682	4 292	4 077	3 649
9.	Aggregate reserves for life and accident and health					
9.	contracts					
10.	Liability for deposit-type contracts					
11.	Contract claims unpaid	10, 151		4,649		
12.	Amounts recoverable on reinsurance	4,453		1,051		
13.	Experience rating refunds due or unpaid					
14.	Policyholders' dividends and refunds to members (not included in Line 10)					
15.	Commissions and reinsurance expense allowances due	750		1,098	1,051	
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		2	3
		As Reported (net of ceded)	Z Restatement Adjustments	3 Restated (gross of ceded)
	ASSETS (Page 2, Col. 3)			
1.	Cash and invested assets (Line 12)			1,372,645,089
2.	Reinsurance (Line 16)		(5,203,181)	
3.	Premiums and considerations (Line 15)		3,756,744	
4.	Net credit for ceded reinsurance			
5.	All other admitted assets (balance)			51,918,122
6.	Total assets excluding Separate Accounts (Line 26)			1,814,022,757
7.	Separate Account assets (Line 27)			
8.	Total assets (Line 28)	1,465,418,458	348,604,299	1,814,022,757
	LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9.	Contract reserves (Lines 1 and 2)		338,453,399	1, 199,634,604
10.	Liability for deposit-type contracts (Line 3)			
11.	Claim reserves (Line 4)			
12.	Policyholder dividends/member refunds/reserves (Lines 5 through 7)			
13.	Premium & annuity considerations received in advance (Line 8)			
14.	Other contract liabilities (Line 9)			11,427,441
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)	113,859,598		113,859,598
20.	Total liabilities excluding Separate Accounts (Line 26)			1,456,989,538
21.	Separate Account liabilities (Line 27)			
22.	Total liabilities (Line 28)	1,108,385,239		1,456,989,538
23.	Capital & surplus (Line 38)		XXX	357,033,219
24.	Total liabilities, capital & surplus (Line 39)	1,465,418,458	348,604,299	1,814,022,757
	NET CREDIT FOR CEDED REINSURANCE			
25.	Contract reserves			
26.	Claim reserves			
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			
40.	Total ceded reinsurance payable/offsets			
41.	Total net credit for ceded reinsurance	350,050,736		

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

			Allocated by S	states and Territ		iness Only		
		-	1	2	3	4	5	6
			Life	Annuities	Disability Income	Long-Term Care		
	States Fts		(Group and Individual)	(Group and Individual)	(Group and Individual)	(Group and Individual)	Deposit-Type Contracts	Totals
	States, Etc.		,			1		
1.	Alabama							
2.	Alaska							
3.	Arizona							
4.	Arkansas							,
5.	California							
6.	Colorado							
7.	Connecticut			618,884				
8.	Delaware			10,760				
9.	District of Columbia	DC .						
10.	Florida			735,541				6 , 655 , 692
11.	Georgia	GA .	4,709,360					4,869,460
12.	Hawaii	HI .						
13.	ldaho	ID						
14.	Illinois	IL	1,719,054					1,767,533
15.	Indiana	IN						
16.	lowa							
17.	Kansas							
18.	Kentucky							,
19.	Louisiana							
20.	Maine							
20.	Maryland							,
21.	Massachusetts							
23.	Michigan			14,700				
24.	Minnesota							
25.	Mississippi							
26.	Missouri							
27.	Montana			14,000				
28.	Nebraska			600				,
29.	Nevada	NV .	-					608 , 086
30.	New Hampshire		3,054,243					3 , 390 , 280
31.	New Jersey	NJ .	4,467,956					4,685,151
32.	New Mexico	NM .						
33.	New York	NY .						
34.	North Carolina	NC .	4,699,834					4 , 847 , 704
35.	North Dakota	ND .						
36.	Ohio	ОН	1,409,459					
37.	Oklahoma	ок						
38.	Oregon	OR .						
39.	Pennsylvania							3.323.991
40.	Rhode Island			1,008,497				
41.	South Carolina							
42.	South Dakota							
42. 43.	Tennessee							
	Texas							,
44. 45			10,378,084 					
45.	Utah			11 975				
46.	Vermont		· · ·					,
47.	Virginia		2, 156, 143					2,230,241
48.	Washington							
49.	West Virginia							
50.	Wisconsin							
51.	Wyoming							60 , 459
52.	American Samoa	AS .						
53.	Guam	GU .						
54.	Puerto Rico	PR						
55.	U.S. Virgin Islands	VI .						
56.	Northern Mariana Islands							
57.	Canada							
58.	Aggregate Other Alien							
	Total		109,873,037	5,648,321			20,000	115,541,358

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Туре	lf			
											of Control	Control			
											(Ownership,	is		ls an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary			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)	(Yes/No)) *
	Amica Mutual Insurance Company		05-0348344		-	/	Amica Mutual Insurance Company	RI	UDP			J		NO	
	Amica Mutual Insurance Company		05-0340166				Amica Life Insurance Company			Amica Mutual Insurance Company	Ownership	100.000	Amica Mutual Insurance Company	NO	
							Amica Property and Casualty Insurance								
	Amica Mutual Insurance Company		26-0115568				Company	RI	IA	Amica Mutual Insurance Company	Ownership		Amica Mutual Insurance Company	NO	
0028	Amica Mutual Insurance Company	00000	05-0430401				Amica General Agency, LLC.	RI	NIA /	Amica Mutual Insurance Company	Ownership		Amica Mutual Insurance Company	NO	
															•
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Asle								-^Þ	2 I						
L															

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

1	2	3	4	5	6	7	8	9	10	11	12	13
						Income/						
						(Disbursements)						
					Purchases, Sales	Incurred in						Reinsurance
					or Exchanges of	Connection with		Income/		Any Other Material		Recoverable/
NAIO					Loans, Securities, Real Estate.	Guarantees or		(Disbursements) Incurred Under		Activity Not in the		(Payable) on
NAIC Company	ID	Names of Insurers and Parent.	Shareholder	Capital	Mortgage Loans or	Undertakings for the Benefit of any	Management Agreements and	Reinsurance		Ordinary Course of the Insurer's		Losses and/or Reserve Credit
Code	Number	Subsidiaries or Affiliates	Dividends	Contributions	Other Investments	Affiliate(s)	Service Contracts	Agreements	*	Business	Totals	Taken/(Liability)
		Amica Mutual Insurance Company		(32,000,000)	Other investments	7 (11111110(3)		(7,547,703)		Dusiness		(68,278,583)
		Amica Life Insurance Company	1,000,000				(342,954)					(00,270,000)
		Amica Property and Casualty Insurance										
	20 0110000	Company					(10,931,032)				(3,383,329)	
	05-0430401	Company Amica General Agency, LLC	(1,500,000)				(1,881,669)				(3,381,669)	
	00 0400401										(0,001,000)	
9999999 Cor	ntrol Totals								XXX			
39999999 CO									~~~			

SCHEDULE Y

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

1 2 3 4 5 6 7 8 Insurers in Holding Company Ownership Ownership <th></th> <th></th> <th></th> <th>0.0.0.0</th> <th></th> <th></th> <th></th> <th></th>				0.0.0.0				
Insurers in Holding Company Amica Mutual Insurance Company Amica Mutual Insurance Company Amica Mutual Insurance Company Amica Mutual Insurance Company NA NA NA	1	2	3	4	5	6	7	
Insurers in Holding Company Amica Mutual Insurance Company Amica Mutual Insurance Company Amica Mutual Insurance Company Amica Mutual Insurance Company NA Maica Mutual Insurance Company Maica Mutual Insurance Company NA Maica Mutual Insurance Company								
Affiliation of Ownership Percentage Column 2 Affiliation of Column 2 Affiliation of Column 2 Affiliation of Column 2 Over Over Output 2 Over Over Output 2 Over Ov				Disclaimer				Disclaimer
Affiliation of Ownership Percentage Column 2 Affiliation of Column 2 Affiliation of Column 2 Affiliation of Column 2 Over Over Output 2 Over Over Output 2 Over Ov				of Control\				of Control\
Insurers in Holding Company Amica Mutual Insurance Company NA Ownership Column 5 Over Over Over Over Over Column 1 Over Column 1 Over Column 1 Over Column 1 Over Over <th< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></th<>								
Percentage Column 2 of Column 1 Over Column 1 Over Column 1 Percentage Column 1 Over Column 1 Insurers in Holding Company Owners with Greater Than 10% Ownership Descentage Column 1 Over Column 1 U.S. Insurance Groups or Entities Controlled by Column 5 Percentage (Column 6) Over Column 6 ica Mutual Insurance Company Amica Mutual Insurance Company Amica Mutual Insurance Company N/A N/A N/A ica Life Insurance Company Amica Mutual Insurance Company 100.000 N/O Amica Mutual Insurance Company N/A N/A N/A			Ownership				Ownership	
Insurers in Holding Company Owners with Greater Than 10% Ownership Column 2 of Column 1 Column 1 Column 1 Ultimate Controlling Party U.S. Insurance Groups or Entities Controlled by Column 5 (Column 5 of Column 6) Column 6 (Yes/No) ica Mutual Insurance Company Amica Mutual Insurance Company Amica Mutual Insurance Company N/A N/A N/A N/A ica Life Insurance Company Amica Mutual Insurance Company 100.000 N/O Amica Mutual Insurance Company N/A N/A N/A								
Insurers in Holding Company Owners with Greater Than 10% Ownership Column 1 (Yes/No) Ultimate Controlling Party by Column 5 Column 6) (Yes/No) ica Mutual Insurance Company Amica Mutual Insurance Company 100.000 NO Amica Mutual Insurance Company N/A NO <						LLS Insurance Groups or Entities Controlled		
ica Mutual Insurance Company	Insurers in Holding Company	Owners with Greater Than 10% Ownership			Ultimate Controlling Party	by Column 5	Column 6)	
ica Life Insurance Company Amica Mutual Insurance Company 100.000NO Amica Mutual Insurance Company NO NO							oolullin oj	
Cick Life insurance Company Milica Mutual Insurance Company NO NO <td< td=""><td>Amirca Mutuar Trisurance Company</td><td>Anitica Mutual Insurance Company</td><td></td><td></td><td></td><td></td><td></td><td></td></td<>	Amirca Mutuar Trisurance Company	Anitica Mutual Insurance Company						
ica Property and Casualty Insurance Company Amica Mutual Insurance Company NO Amica Mutual Insurance Company Amica Mutual Insurance Company NO Amica Mutual Insurance Company Amica Mutual Insurance Company NO Amica Mutual Insurance Company Amica Mutual Insurance Company NO Amica Mutual Insurance Company Amica Mutual Insurance Company NO Amica Mutual Insurance Company Amica Mutual Insurance Company NO Amica Mutual Insurance Company Amica Mutual Insurance Company NO Amica Mutual Insurance Company Amica Mutual Insurance Company NO Amica Mutual Insurance Company Amica Mutual Insurance Company NO Amica Mutual Insurance Company Amica Mutual Insurance Company NO Amica Mutual Insurance Company Amica Mutual Insurance Company NO Amica Mutual Insurance Company Amica Mutual Insurance Company NO Amica Mutual Insurance Company Amica Mutual Insurance Company NO Amica Mutual Insurance Company Amica Mutual Insurance Company NO Amica Mutual Insurance Company Amica Mutual Insurance Company NO Amica Mutual Insuranc	Amica Life Insurance Company	Amica Mutual Insurance Company			Amica Mutual Insurance Company			
	Amica Property and Casualty Insurance Company	Amica Mutual Insurance Company		NO	Amica Mutual Insurance Company	N/A		NO
Image: State in the state								

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.

	<u> </u>	Responses
	MARCH FILING	
1.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
3.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	YES
4.	Will an actuarial opinion be filed by March 1?	YES
	APRIL FILING	
5.	Will Management's Discussion and Analysis be filed by April 1?	YES
6.	Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies)	YES
7.		YES
	JUNE FILING	
8.	Will an audited financial report be filed by June 1?	YES
9.	Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES

The following supplemental reports are required to be filed as part of your annual statement filing <u>if your company is engaged in the type of business covered by the</u> <u>supplement.</u> However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the <u>specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below.</u> If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

NΟ

	MARCH FILING
10	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of demicile by March 12 (Not applicable to fraternal bopofit sociation)

10.	
11.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?
12.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?
13.	Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?
14.	Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?
15.	Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?
16.	Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1?
17.	Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1?
18.	Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?
19.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?
20.	Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1?
21.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?
22.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?
23.	Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?
24.	Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?
25.	Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1?

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

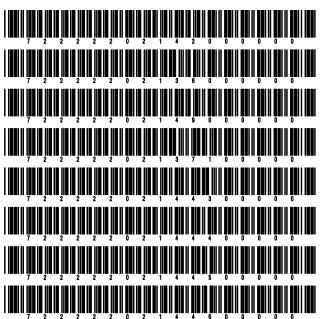
26.	Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1?	NO
27.	Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1?	NO
28.	Will the Worker's Compensation Carve-Out Supplement be filed by March 1? (Not applicable to fraternal benefit societies)	NO
29.	Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1?	NO
30.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
31.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO
32.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
33.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
34.	Will the VM-20 Reserves Supplement be filed with the state of domicile and the NAIC by March 1?	YES
35.	Will the Health Care Receivables Supplement be filed with the state of domicile and the NAIC by March 1?	NO
	APRIL FILING	
36.	Will the confidential Regulatory Asset Adequacy Issues Summary (RAAIS) required by the Valuation Manual be filed with the state of domicile by April 1?	YES
37.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
38.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies)	NO
39.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
40.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	NO
41.	Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?	NO
42.	Will the confidential Actuarial Memorandum required by Actuarial Guideline XXXVIII 8D be filed with the state of domicile by April 30?	YES
43.	Will the Supplemental Term and Universal Life Insurance Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
44.	Will the Variable Annuities Supplement be filed with the state of domicile and the NAIC by April 1?	NO
45.	Will the confidential Executive Summary of the PBR Actuarial Report be filed with the state of domicile by April 1?	SEE EXPLANATION
46.	Will the confidential Life Summary of the PBR Actuarial Report be filed with the state of domicile by April 1?	SEE EXPLANATION
47.	Will the confidential Variable Annuities Summary of the PBR Actuarial Report be filed with the state of domicile by April 1?	NO
	AUGUST FILING	
48.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	SEE EXPLANATION

11.		
12.		
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41.		
44.		
45.	Not Required	
46.	Not Required	
47.		
48.	Not Required	
	Bar Codes:	
10.	SIS Stockholder Information Supplement [Document Identifier 420]	
11.	Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]	

12. Trusteed Surplus Statement [Document Identifier 490]

10.

- 13. Participating Opinion for Exhibit 5 [Document Identifier 371]
- 16. Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit [Document Identifier 443]
- 17. Actuarial Opinion on Synthetic Guaranteed Investment Contracts [Document Identifier 444]
- Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 445]
- 19. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 446]





ANNUAL STATEMENT FOR THE YEAR 2021 OF THE AMICA LIFE INSURANCE COMPANY **OVERFLOW PAGE FOR WRITE-INS**

Addition	al Write-ins for Summary of Operations Line 53		
		1	2
		Current Year	Prior Year
5304.	Miscellaneous surplus adjustment		(802,250)
5305.	Deferred premium asset adjustment as a result of updated X-factors	1,915,674	
5306.	X-factor adjustments	(4,962,916)	
5307.	Correction of an error	(1,316,485)	
5397.	Summary of remaining write-ins for Line 53 from overflow page	(3,965,394)	(802,250)

VM-20 Reserves Supplement - Part 1A

ΝΟΝΕ

VM-20 Reserves Supplement - Part 1B **NONE**

VM-20 RESERVES SUPPLEMENT – PART 2

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

	Life PBR Exemption as defined in the NAIC adopted Valuation Manual (VM)				
1.	Has the company filed and been granted a Life PBR Exemption from the reserve requirements of VM-20 of the Valuation Manual by their state of domicile?	Yes [X]	No []
2.	If the response to Question 1 is "Yes", then check the source of the granted "Life PBR Exemption" definition? (Check either 2.1, 2.2 or 2.3)				
	2.1 NAIC Adopted VM [X]				
	2.2 State Statute (SVL) [] Complete items "a" and "b" as appropriate.				
	a. Is the criteria in the State Statute (SVL) different from the NAIC adopted VM?	Yes []	No []
	b. If the answer to "a" above is "Yes", provide the criteria the state has used to grant the Life PBR Exemption (e.g., Group/Legal Entity criteria) and the minimum reserve requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS NAIC VM:				
2.3	State Regulation [] Complete items "a" and "b" as appropriate.				
	a. Is the criteria in the State Regulation different from the NAIC adopted VM?	Yes []	No []
	b. If the answer to "a" above is "Yes", provide the criteria the state has used to grant the Life PBR Exemption (e.g., Group/Legal Entity criteria) and the minimum reserve requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS NAIC VM:				

VM-20 RESERVES SUPPLEMENT – PART 3

Other Exclusions from Life PBR For The Year Ended December 31, 2021 (To Be Filed by March 1)

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