

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

## **ANNUAL STATEMENT**

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

# **AMICA LIFE INSURANCE COMPANY**

NAIC	Group Code 0028		AIC Company Code	_ 7	2222 Employer's I	D Number	05-0340166
Organized under the Laws of	(Curre	nt) (Prior) Rhode Island	, Sta	ite of	Domicile or Port of E	ntry	RI
Country of Domicile			United States of A	Amer	ca		
Licensed as business type:		Life, Accident	t and Health [X] Frat	ernal	Benefit Societies [ ]		
Incorporated/Organized	06/13	3/1968		Com	menced Business _		05/06/1970
Statutory Home Office	100	Amica Way					S 02865-1156
	(Street	and Number)			(City o	or Town, State, 0	Country and Zip Code)
Main Administrative Office			100 Amica V (Street and Nu		)		
	Lincoln, RI, US 02865-			IIIDCI			2-6422
(City o	or Town, State, Country a	nd Zip Code)			(4	Area Code) (Te	ephone Number)
Mail Address	P.O. Box						US 02940-6008
	(Street and Numb	er or P.O. Box)			(City o	r Town, State, (	Country and Zip Code)
Primary Location of Books ar	nd Records		100 Amica		A		
	Lincoln, RI, US 02865-	1156	(Street and Nu	mbei	)	800-65	2-6422
(City o	or Town, State, Country a	nd Zip Code)			(4	Area Code) (Te	ephone Number)
Internet Website Address			www.amica.	com			
Statutory Statement Contact	N	/lichael Lee Bake	r. Jr.			800-6	552-6422-22365
,		(Name)	, -		· ·	(Area Code	) (Telephone Number)
	mbakerjr@amica.co (E-mail Address)	m					4-3657 lumber)
	(2 / (22.555)					(1751)	
			OFFICER	25			
				Ser	ior Vice President,		
President and Chief Executive Officer	Edmui	nd Shallcross III #	Ch	ief Fi	nancial Officer and Treasurer		James Parker Loring
Senior Assistant Vice					<del>-</del>		
President and Secretary	Suza	nne Ellen Casey			Actuary _		Woodrow Michael Crouch
o 5: 0: 0			OTHER				
	ior Vice President & Chie nent Officer	et Snieia Lo	orraine Companie, #, \$ General Mar			Jenniter Ann	Morrison, Senior Vice President & General Counsel
			DIRECTORS OR 1	TRU!	STEES		
	nice Avery		Ivy Lynne Br	own #	<u> </u>		Debra Ann Canales
	alsh Chadwick eith Machtley	<u> </u>	Michael David Peter Michael				Matthew Alexander Lopes, Jr. #  Debra Marie Paul
	ulian Reaves		Edmund Shallo				Diane Desmarais Souza
State of	Rhode Island Providence	ss	3				
County of	1 Tovidence						
The officers of this reporting	entity being duly sworn	ach denose and s	av that they are the de	secrib	ed officers of said ren	norting entity a	nd that on the reporting period stated above.
all of the herein described a	ssets were the absolute	property of the sa	id reporting entity, fre	e an	d clear from any lien	s or claims the	reon, except as herein stated, and that this
							ent of all the assets and liabilities and of the the period ended, and have been completed
in accordance with the NAIC	Annual Statement Instru	ictions and Accou	nting Practices and P	rocec	ures manual except	to the extent th	at: (1) state law may differ; or, (2) that state
							of their information, knowledge and beliefing with the NAIC, when required, that is ar
exact copy (except for forma							by various regulators in lieu of or in addition
to the enclosed statement.							
Edmund Shall		Cania	Suzanne Ellen		•	Comien	James Parker Loring
President and Chief E	vecarise Officet	Senio	r Assistant Vice Presi	uent	ани эесгетагу	Senior	Vice President, Chief Financial Officer and Treasurer
				2	Is this an original filin	ng?	Yes [ X ] No [ ]
Subscribed and sworn to before	ore me this			b.	If no,		
8th day of	f	February, 2023			State the amendm     Date filed		
					<ol> <li>Date filed</li> <li>Number of pages</li> </ol>		
Ann Marie Octeau Notary Public					900		
June 8, 2026							



DIRECT BUSINESS IN THE STATE OF Alabama

DURING THE YEAR 2022

DIRECT PREMIUMS   1   Credit Life (Group and Individual)   Group   Industrial   Total	NAIC	Group Code 0028	LI	<b>FE INSURANCE</b>	<b>E</b>	NAIC Company Code 72222		
2. Annuity considerations			·	Credit Life (Group	-	4 Industrial		
3. Deposit-type contract funds	1.	Life insurance	229,761		1,267		231,028	
4. Other considerations 5. Totals (Sum of Lines 1 to 4)  DIRECT DIVIDENDS TO  POLICYHOLDERS/REFUNDS TO MEMBERS  Life insurance: 6.1 Paid in cash or left on deposit. 6.2 Applied to pay renewal premiums 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period. 6.4 Other. 6.5 Totals (Sum of Lines 6.1 to 6.4)  Annutities: 7.1 Paid in cash or left on deposit. 7.2 Applied to provide paid-up annutites 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. Annutip 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 19. 9. 9,968 10. 130.  DETAILS OF WRITE-INS 1301. 1302. 1303. 1303. 13098. Summary of Line 13 from overflow page 13099. Totals (Lines 1301 thru 1303 plus 1398) (Line 13	2.	Annuity considerations	7,000				7,000	
5. Totals (Sum of Lines 1 to 4)   236,761   1,267   238,028	3.	Deposit-type contract funds		XXX		XXX		
DIRECT DIVIDENDS TO	4.	Other considerations						
POLICYHOLDERS/REFUNDS TO MEMBERS	5.	Totals (Sum of Lines 1 to 4)	236,761		1,267		238,028	
Life insurance: 6.1 Paid in cash or left on deposit								
6.3 Applied to pay renewal premiums 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period 6.4 Other 6.5 Totals (Sum of Lines 6.1 to 6.4)  Annuities: 7.1 Paid in cash or left on deposit 7.2 Applied to provide paid-up annuities 7.3 Other 7.4 Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4)  DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits 10. Matured endowments 11. Annuity benefits 12. Surrender values and withdrawals for life contracts 13. Aggregate write-ins for miscellaneous direct claims and benefits paid 14. All other benefits, except accident and health 15. Totals 16. Totals 17. DETAILS OF WRITE-INS 18. Summary of Line 13 from overflow page	Life ir	nsurance:						
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	-							
endowment or premium-paying period								
6.5 Totals (Sum of Lines 6.1 to 6.4)		endowment or premium-paying period						
Annuities: 7.1 Paid in cash or left on deposit 7.2 Applied to provide paid-up annuities 7.3 Other 7.4 Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4)  DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits 10. Matured endowments 11. Annuity benefits 12. Surrender values and withdrawals for life contracts 13. Aggregate write-ins for miscellaneous direct claims and benefits paid 14. All other benefits, except accident and health 15. Totals  DETAILS OF WRITE-INS 1301. 1302. 1303. 1308. Summary of Line 13 from overflow page 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13	Ų.,							
7.1   Paid in cash or left on deposit		,						
7.2 Applied to provide paid-up annuities  7.3 Other  7.4 Totals (Sum of Lines 7.1 to 7.3)								
7.3 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								
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								
DIRECT CLAIMS AND BENEFITS PAID     9. Death benefits								
9. Death benefits       10. Matured endowments       23,819       23,819         11. Annuity benefits       23,819       23,819         12. Surrender values and withdrawals for life contracts       13. Aggregate write-ins for miscellaneous direct claims and benefits paid       9,968         14. All other benefits, except accident and health       9,968       9,968         15. Totals       33,787       33,787         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	8.							
10. Matured endowments       23,819         11. Annuity benefits       23,819         12. Surrender values and withdrawals for life contracts	_							
11. Annuity benefits       23,819         12. Surrender values and withdrawals for life contracts       3. Aggregate write-ins for miscellaneous direct claims and benefits paid         14. All other benefits, except accident and health       9,968         15. Totals       33,787         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								
12. Surrender values and withdrawals for life contracts.								
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.       9,968       9,968         14. All other benefits, except accident and health							23,819	
and benefits paid  14. All other benefits, except accident and health 9,968  15. Totals 33,787  DETAILS OF WRITE-INS  1301.  1302.  1308. Summary of Line 13 from overflow page 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13		li di			•••••			
14. All other benefits, except accident and health       9,968       9,968         15. Totals       33,787       33,787         DETAILS OF WRITE-INS         1301.       1302.       1303.         1303.       1398. Summary of Line 13 from overflow page       1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13	13.							
15. Totals 33,787  DETAILS OF WRITE-INS  1301	14.							
DETAILS OF WRITE-INS  1301.  1302.  1303.  1398. Summary of Line 13 from overflow page	15.						,	
1302.		DETAILS OF WRITE-INS						
1302.	1301							
1398. Summary of Line 13 from overflow page								
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13	1303							
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13	1398	. Summary of Line 13 from overflow page						
		. Totals (Lines 1301 thru 1303 plus 1398) (Line 13						

				Credit Life (Group and Individual)		•				
	(	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										
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	258	88,636,000		(a)		120,000				88,756,000
21. Issued during year	32	13,830,000							32	13,830,000
22. Other changes to in force		==								. ====
(Net)		1,475,000				308 , 100				1,783,100
23. In force December 31 of	202	100 041 000				400 400				104 000 100
current year	290	103,941,000		(a)		428, 100			290	104,369,100

_	ourront you			,	(α)			,				
(a	a) Includes Individ	dual Credit Life Ins	surance p	rior year \$		, current y	year \$				•	
	Includes Group	p Credit Life Insura	ance Loar	ns less than or equ	ual to 60 mont	ths at issue, prior	r year \$		, C	urrent year \$		
	Loans greater	than 60 months at	ticcuo BI	IT NOT OPENTE	D TUAN 120 I	MONTHS prior	voor ¢		-	urrent voor ¢		

## ACCIDENT AND HEALTH INSURANCE

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



DIRECT BUSINESS IN THE STATE OF Alaska

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	FE INSURANC	E	NAIC Company Code 72222		
		1	2	3	4	5	
	DIRECT PREMIUMS	0 "	Credit Life (Group			T	
-	AND ANNUITY CONSIDERATIONS	Ordinary54.095	and Individual)	Group	Industrial	Total	
1. 2.	Life insurance Annuity considerations	- ,				54,095	
3.	Deposit-type contract funds				XXX		
3. 4.	Other considerations				XXX		
4. 5	Totals (Sum of Lines 1 to 4)	54.095				54.095	
J.	DIRECT DIVIDENDS TO	34,093				34,093	
	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						
	,						
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						
10.	Matured endowments						
11. 12.	Annuity benefits						
13.	Aggregate write-ins for miscellaneous direct claims						
13.	and benefits paid						
14.	All other benefits, except accident and health						
	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)						

	(	Ordinary		Credit Life and Individual)		Group		Industrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4	5	6	7	8	9	10
MATURED ENDOWMENTS INCURRED	No. of Pols. & Certifs.	Amount	Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior	OCITIIS.	Amount	Ocitiis.	7 tillodit	OCITIIS.	7 tillount	OCITIIS.	7 tillourit	Octuis.	7 tirioditi
year17. Incurred during current year										
Settled during current year: 18.1 By payment in full										
18.2 By payment on compromised claims										
18.4 Reduction by compromise										
18.5 Amount rejected 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					
year21. Issued during year	51	22,529,500		(a)						22,529,50
22. Other changes to in force (Net)										(2,412,0
23. In force December 31 of current year	47	21.367.500		(a)					47	21.367.50

 current year
 47
 21,367,500
 (a)
 47

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

## **ACCIDENT AND HEALTH INSURANCE**

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



LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF Arizona NAIC Group Code 0028

DURING THE YEAR 2022 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	1,253,129		104,540		1,357,669
2.	Annuity considerations	305,711				305,711
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	1,558,840		104,540		1,663,380
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
l ife in	surance:					
	Paid in cash or left on deposit					
	Applied to provide paid-up additions or shorten the					
0.0						
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						
7.4	T . I (0 (1) T . I T . I					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	350 . 160				
10.	Matured endowments					
11.		128,883				128.883
12.	Surrender values and withdrawals for life contracts					409.585
13.	Aggregate write-ins for miscellaneous direct claims					
	and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	888,628				888,628
	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		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	224,988							2	224,988
17. Incurred during current year	1	150,000							1	150,000
Settled during current year:										
18.1 By payment in full	2	350 , 160							2	350, 160
18.2 By payment on		,								
compromised claims										
18.3 Totals paid	2	350 . 160							2	350 . 160
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	2	350 , 160							2	350, 160
19. Unpaid Dec. 31, current										
year (16+17-18.6)	1	24,828							1	24,828
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	1,311	518,452,307		(a)		9,897,300			1,311	528,349,607
21. Issued during year	93	38,385,000							93	38,385,000
22. Other changes to in force	(00)	(00 105 000)							(00)	(00 505 000)
(Net)	(92)	(28, 125, 999)				1,598,700			(92)	(26,527,299)
23. In force December 31 of	4 040	F00 711 000				11 400 000			4 040	F40, 007, 000
current year	1,312	528,711,308		(a)		11,496,000			1,312	540,207,308

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

## **ACCIDENT AND HEALTH INSURANCE**

	<i>F</i>	ACCIDENT AND	IILALIII II1301	VAITOL		
		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)					
	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee		<b>.</b>			
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only				•••••	
	All other (b)					
	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					



DIRECT BUSINESS IN THE STATE OF Arkansas

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	<b>FE INSURANCI</b>	E	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	, -				118,450	
2.	Annuity considerations	7,000				7,000	
3.	Deposit-type contract funds		XXX		XXX		
4.	Other considerations						
5.	Totals (Sum of Lines 1 to 4)	125,450				125,450	
	DIRECT DIVIDENDS TO						
	POLICYHOLDERS/REFUNDS TO MEMBERS						
	surance:						
6.1	Paid in cash or left on deposit						
	Applied to pay renewal premiums						
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period						
6.4	Other						
	Totals (Sum of Lines 6.1 to 6.4)						
Annu							
7.1	Paid in cash or left on deposit						
7.2	Applied to provide paid-up annuities						
7.3	Other						
7.4	Totals (Sum of Lines 7.1 to 7.3)						
8.	Grand Totals (Lines 6.5 plus 7.4)						
	DIRECT CLAIMS AND BENEFITS PAID						
9.	Death benefits						
10.	Matured endowments						
11.	Annuity benefits						
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						
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)						
		1	1		•	•	
1		Credit Life					

<u> </u>				Credit Life						
	(	Ordinary		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.	Amazunt	Ind.Pols. & Gr. Certifs.	Amazunt	No. of Certifs.	Amazunt	No. of Pols. & Certifs.	Amazunt	No. of Pols. & Certifs.	Amaunt
16. Unpaid December 31, prior	Certiis.	Amount	Certiis.	Amount	Certiis.	Amount	Certifs.	Amount	Certiis.	Amount
year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on										
compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current										
year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior										
year	123	56,373,950		(a)						56,373,95
21. Issued during year	16	7,495,000							16	7,495,00
22. Other changes to in force (Net)	3	(64,095)							3	(64,09
23. In force December 31 of current year	142	63,804,855		(a)					142	63,804,85

ı	ouricit your		00,001,000	(a	1)				
(	(a) Includes Individual Credit Life I	nsurance p	rior year \$		, current	year \$	 		
	Includes Group Credit Life Insu	ırance Loar	ns less than or equ	al to 60 mor	nths at issue, prio	r year \$	 , Cl	urrent year \$	 
	Loans greater than 60 months	at issue BL	JT NOT GREATER	R THAN 120	MONTHS, prior	year \$	 , Cl	urrent year \$	 

## **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF California

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	FE INSURANC	E	NAIC Compa	any Code 72222
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life insurance	6,101,427		196,195		6,297,622
2.	Annuity considerations					80,821
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	6,182,248		196, 195		6,378,443
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Isurance: 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					
6.5	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 8.	Totals (Sum of Lines 7.1 to 7.3)					
0.	DIRECT CLAIMS AND BENEFITS PAID					
9	Death benefits	1 773 714				1 773 71/
10	Matured endowments					
11.	Annuity benefits	385 724				385 724
12.	Surrender values and withdrawals for life contracts	308 911				308 911
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health	61,463				61,463
15.	Totals	2,529,812				2,529,812
	DETAILS OF WRITE-INS	. ,				
1301.						
1302						
1303.						
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

		Ordinary		Credit Life and Individual)		Group		ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND		-	No. of					, and the second		
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year	9	1,420,896							9	1,420,890
17. Incurred during current year	16	3,789,000							16	3,789,000
Settled during current year:										
18.1 By payment in full	19	1,773,714							19	1,773,714
18.2 By payment on										
compromised claims										
18.3 Lotais paid	19	1,//3,/14							19	1,7/3,714
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	19	1,773,714							19	1,773,714
19. Unpaid Dec. 31, current										
year (16+17-18.6)	6	3,436,182							6	3,436,182
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior										
vear	5,434	3,354,948,933		(a)		18,574,700			5,434	3,373,523,633
21. Issued during year	341	276,643,000								
22. Other changes to in force (Net)										
23. In force December 31 of										
current vear	5.441	3.471.223.109		(a)		19.272.800			5.441	3.490.495.90

 current year
 5,441
 3,471,223,109
 19,272,800
 5,441
 3,49

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

## **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF Colorado NAIC Group Code 0028

DURING THE YEAR 2022

NAIC Group Code 0028	LI	FE INSURANCE		NAIC Compar	ny Code 72222
DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
	2,261,580				2,334,142
Annuity considerations	60,147				
Deposit-type contract funds		XXX			
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	2,321,727		72,562		2,394,289
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Life insurance:					
and an arrange of the state of					
,					
Annuities:					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	1 000 000				1 000 00
	1,000,000				
litter in the second of the	372.225				270.00
	194.556				- ,
13. Aggregate write-ins for miscellaneous direct claims	194,550				134,33
15. Totals	1.654.781				1,654,78
DETAILS OF WRITE-INS	.,,				.,
1301.					
1302.					
1000					
1000 0 111 101 0					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					
	Cradit Life	·			

	(	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										
year17. Incurred during current year Settled during current year:	8	1,088,000							8	1,088,000
18.1 By payment in full	8	1 088 000							8	1 088 000
18.2 By payment on compromised claims										
18.3 Totals paid	8	1,088,000							8	1,088,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	8	1,088,000							8	1,088,00
19. Unpaid Dec. 31, current year (16+17-18.6)		, ,								, ,
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior	2 414	1 140 000 010		(-)		6 060 000			2 414	1,149,759,01
year21. Issued during year	158	82 536 000		(a)		0,009,000			158	
22. Other changes to in force (Net)										
23. In force December 31 of	2.392	1.143.127.441		(a)		8.263.400			2.392	1.151.390.84

current year | 2,392 | 1,143,127,441 | (a) |
(a) Includes Individual Credit Life Insurance prior year \$ ......, current year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ....., current year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ....., current year \$

## **ACCIDENT AND HEALTH INSURANCE**

	•	COUDEIN / UID		V 1110E		
		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		<b>.</b>			
	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)			1		l



DIRECT BUSINESS IN THE STATE OF Connecticut

DURING THE YEAR 2022

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.		8.481.138				8.804.736
2.		209.794		/		, , -
3.	· ·	., .				
4.	·			· · · ·		
5.	Totals (Sum of Lines 1 to 4)	8.690.932		323.598		9.014.530
	DIRECT DIVIDENDS TO	0,000,002		020,000		0,011,000
Life ir	POLICYHOLDERS/REFUNDS TO MEMBERS asurance:					
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					
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	5,060,842		126,000		5, 186, 842
10.						
11.	Annuity benefits	1,180,494				1, 180, 494
12.	Surrender values and withdrawals for life contracts	1,256,604				1,256,604
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health	5,351				5,35 <sup>-</sup>
15.	Totals	7,503,291		126,000		7,629,29
	DETAILS OF WRITE-INS					
1301.						
1302.						
1303.						
1398.	0 (1) 40 (					
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

	(	Ordinary		Credit Life and Individual)		Group	ı	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	7	1,748,471							7	1,748,47
17. Incurred during current year	29	4,028,763			3	251,000			32	4,279,760
Settled during current year:										
18.1 By payment in full	32	5,060,842			2	126,000			34	5, 186, 842
18.2 By payment on compromised claims										
18.3 Totals paid	32	5,060,842			2	126,000			34	5, 186, 842
18.4 Reduction by compromise										
18.5 Amount rejected			l		L					
18.6 Total settlements	32	5.060.842			2	126.000			34	5 . 186 . 842
19. Unpaid Dec. 31, current		, ,				,				, ,
year (16+17-18.6)	4	716,392			1	125,000			5	841,392
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior	0.072	2 705 722 001		(a)		22 260 600			0.072	3 939 003 50
year	3,073	107 054 000		(a)		32,209,000			9,073	107 054 000
21. Issued during year	380	197,054,000							380	197,054,000
22. Other changes to in force (Net)	(636)	(189,673,464)				2,859,500			(636)	(186,813,96
23. In force December 31 of current year	8 817	3.803.113.527		(a)		35.129.100			8.817	3.838.242.62

 current year
 8,817
 3,803,113,527
 (a)
 35,129,100
 8,817
 3,83

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

## **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF Delaware

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	<b>FE INSURANCE</b>		NAIC Comp	any Code 72222
		1	2	3	4	5
	DIRECT PREMIUMS		Credit Life (Group	_		
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.	Life insurance	300,551		, -		· ,
2.	Annuity considerations					100
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	300,651		1,691		302,342
	DIRECT DIVIDENDS TO					
l ifa 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					
	Totals (Sum of Lines 6.1 to 6.4)					
Annu						
7.1	Paid in cash or left on deposit					
7.1	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	,					
0.	Grand Totals (Lines 6.5 plus 7.4)  DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					
10.	Matured endowments					04.045
11.		31,645				31,645
12.	Surrender values and withdrawals for life contracts	33,741				33,741
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14	All other benefits, except accident and health					
	Totals	65.386				65.386
10.	DETAILS OF WRITE-INS	05,300				03,300
1201						
1302						
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					
	abovoj					1
		Credit Life				

	(	Ordinary		Credit Life and Individual)		Group		ndustrial		Total
DIRECT DEATH BENEFITS AND MATURED	1	2	3 No. of	4	5	6	7	8	9	10
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	Oortiio.	7 tillount	Cortilo.	7 tilloditt	OOI tillo.	Timount	Cortilo.	Tunount	Oortilo.	7 tillount
year17. 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										
8.5 Amount rejected										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT 20. In force December 31, prior					No. of Policies					
year21. Issued during year	308	113,264,310		(a)		160 , 100				113,424,4
22. Other changes to in force (Net)										(2,173,6
23. In force December 31 of current year	318	119.815.681		(a)		160 . 100			318	119.975.7

 current year
 318
 119,815,681
 (a)
 160,100
 318
 1

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

## **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF District of Columbia

DURING THE YEAR 2022 NAIC Company Code 72222

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.		376,266		-		376,98	
2.							
3.			XXX		XXX		
4.							
5.	Totals (Sum of Lines 1 to 4)	376,266		719		376,98	
Life in	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS issurance:						
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							
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	17,000				17,00	
12.	Surrender values and withdrawals for life contracts	317				31	
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid						
14.	All other benefits, except accident and health						
15.	Totals	17,317				17,31	
	DETAILS OF WRITE-INS						
1301.							
1302.							
1303.							
1398.	O						
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)						

			(	Credit Life						
	(	Ordinary	(Group	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										
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	249	169,820,842		(a)		68 , 100			249	169,888,942
21. Issued during year	19	13, 175,000							19	13, 175,000
22 Other changes to in force										
(Net)	(30)	(13,981,914)				(68,100)			(30)	(14,050,014)
23. In force December 31 of										
current year	238	169,013,928		(a)					238	169,013,928

current year 238 169,013,928 (a)

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

## **ACCIDENT AND HEALTH INSURANCE**

	<i>F</i>	ACCIDENT AND	IILALIII II1301	VAITOL		
		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)					
	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee		<b>.</b>			
	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 Florida

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	<b>FE INSURANCE</b>		NAIC Comp	any Code 72222
		1	2	3	4	5
	DIRECT PREMIUMS	<b>.</b>	Credit Life (Group	_		
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.		5,719,571		,		
2.	Annuity considerations	- , -				306,113
3.			XXX		XXX	
4.						
5.	Totals (Sum of Lines 1 to 4)	6,025,684		278,961		6,304,645
	DIRECT DIVIDENDS TO					
l ifa is	POLICYHOLDERS/REFUNDS TO MEMBERS asurance:					
6.1	·					
6.2						
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	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	_''.					
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9	Death benefits	2 520 365		157.500		2 686 865
10.		2,020,000		- , -		, , ,
11.	Annuity benefits					1.143.865
12.	Surrender values and withdrawals for life contracts					, -, -
13.	Aggregate write-ins for miscellaneous direct claims					1,010,020
10.						
14.	All other benefits, except accident and health	25,630				25,630
15.	Totals	5,211,886		157,500		5,369,386
	DETAILS OF WRITE-INS	, ,		, i		, ,
1301						
1302						
1303						
1398						
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				·	ŭ	Ū	
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	371, 141			1	125,000			6	496, 14
year	27	2,438,123			1	32,500			28	2,470,62
Settled during current year:										
18.1 By payment in full	29	2,529,365			2	157,500			31	2,686,86
18.2 By payment on compromised claims										
18.3 Totals paid	29	2,529,365			2	157,500			31	2,686,86
18.4 Reduction by compromise			l			l				
18.5 Amount rejected										
18.6 Total settlements	29	2.529.365			2	157.500			31	2.686.86
19. Unpaid Dec. 31, current						,				, ,
year (16+17-18.6)	3	279,899							3	279,899
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior	C 444	0 000 000 457				00 405 500			0 111	0 000 007 00
year	0, 114	2,023,802,137		(a)					0,114	2,000,287,60
21. Issued during year	263	115,532,000							263	115,532,000
22. Other changes to in force (Net)	(240)	(35,280,413)				1,462,100			(240)	(33,818,31
23. In force December 31 of current year	6 137	2.104.053.744		(a)		27.947.600			6.137	2.132.001.34

 current year
 6,137
 2,104,053,744
 (a)
 27,947,600
 6,137
 2,13

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

## **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF Georgia

DURING THE YEAR 2022

·	1				
DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
	4,788,752				4,901,23
Annuity considerations	99,711				
Deposit-type contract funds		XXX		XXX	
Other considerations					
Totals (Sum of Lines 1 to 4)	4,888,463		112,481		5,000,94
DIRECT DIVIDENDS TO	, ,		· ·		, , , , , , , , , , , , , , , , , , ,
POLICYHOLDERS/REFUNDS TO MEMBERS					
Other					
,					
	2 153 887				2 153 88
					,,
	- ,				- ,
	171,702				171,40
	14,184				14 , 18
Totals	2,532,111				2,532,11
DETAILS OF WRITE-INS	, ,				, , , , , , , , , , , , , , , , , , ,
	Annuity considerations	Annuity considerations	Annuity considerations	Annuity considerations Deposit-type contract funds Other considerations Totals (Sum of Lines 1 to 4)  DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Surance: Paid in cash or left on deposit Applied to pay renewal premiums Applied to provide paid-up additions or shorten the endowment or premium-paying period Other Totals (Sum of Lines 6.1 to 6.4) ties: Paid in cash or left on deposit Applied to provide paid-up annuities Other Totals (Sum of Lines 7.1 to 7.3) Grand Totals (Lines 6.5 plus 7.4)  DIRECT CLAIMS AND BENEFITS PAID Death benefits Annuity benefits Surrender values and withdrawals for life contracts Aggregate write-ins for miscellaneous direct claims and benefits paid All other benefits, except accident and health Totals  Summary of Line 13 from overflow page Totals (Lines 1301 fhru 1303 plus 1398) (Line 13 above)	Annuity considerations 99,711

		Ordinary		Credit Life and Individual)		Group		ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND		_	No. of	·				, and the second	Ū	
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	640,534							4	640,534
17. Incurred during current year	15	2,143,540							15	2,143,540
Settled during current year:		, ,								, ,
18.1 By payment in full	16	2.153.887							16	2 . 153 . 887
18 2 By payment on										
compromised claims	16	0 150 007							10	0 150 00
10.3 Totals paid	10	2, 103,007								
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	16	2, 153, 887							16	2, 153, 887
<ol><li>Unpaid Dec. 31, current</li></ol>										
year (16+17-18.6)	3	630, 187							3	630, 187
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior										
year	5,280	2,109,491,989		(a)		10,649,100			5,280	2, 120, 141, 089
21. Issued during year	523	224,007,000								
22. Other changes to in force (Net)										
23. In force December 31 of										
current vear	5.476	2.231.474.690		(a)		10.137.400			5.476	2.241.612.09

 current year
 5,476
 2,231,474,690
 (a)
 10,137,400
 5,476
 2,2

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

## **ACCIDENT AND HEALTH INSURANCE**

	•	ACCIDENT AND	IILALIII IIIOOI	VAIIOL		
		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)					
	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee		<b>.</b>			
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)				••••••	
25.4					•••••	• • • • • • • • • • • • • • • • • • • •
	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)			1		

(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 Hawaii

DURING THE YEAR 2022

NAIC Group Code 0028	LI	<b>FE INSURANCE</b>	NAIC Company Code 72222		
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
Life insurance	50,844		1,584		52,428
Annuity considerations					
Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)	50,844		1,584		52,428
DIRECT DIVIDENDS TO					
POLICYHOLDERS/REFUNDS TO MEMBERS Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
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)					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
l I					
,					
8. Grand Totals (Lines 6.5 plus 7.4)  DIRECT CLAIMS AND BENEFITS PAID					
10. Matured endowments					
11. Annuity benefits	2,348				2,348
12. 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	2,348				2,348
DETAILS OF WRITE-INS					
1301					
1302					
1303.					.
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					
	Credit Life				

				Credit Life						
	(	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										
<ol><li>17. Incurred during current year</li></ol>										
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						1				
year	56	22.037.699	L	(a)		150.000			56	22, 187, 699
21. Issued during year				()						.,,,,,,,,
22 Other changes to in force										
(Net)	5	2,144,000				204,400			5	2,348,400
23. In force December 31 of						, , , , , , , , , , , , , , , , , , ,				
current year	61	24 181 699	1	(2)	1	354 400		l	61	24 536 099

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

## **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF Idaho

DURING THE YEAR 2022

NAIC	Group Code 0028	L	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.		228,725		14,712		243,43
2.	_ 1					
3.			XXX		XXX	
4.						
5.	Totals (Sum of Lines 1 to 4)	228,725		14,712		243,43
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
	surance:					
	11 12 1					
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	937.994				937.99
10.	Matured endowments	,				, , , ,
11.		2,359				2.35
12.		7.260				7.26
13.	Aggregate write-ins for miscellaneous direct claims	,				,
14.						
15.	Totals	947.613				947.61
	DETAILS OF WRITE-INS	,				,
1301.						
1302.						
1303.						
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					
	above)	Credit Life	<u> </u>			

		Ordinary		Credit Life and Individual)		Group		Industrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND	· ·	_	No. of			Ŭ				
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year										
17. Incurred during current year	4	940,500							4	940,500
Settled during current year:		,								,
18.1 By payment in full	3	937.994							3	937.994
18.2 By payment on compromised claims										
18.3 Totals paid	3	937,994							3	937,994
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	3	937.994							3	937,994
19. Unpaid Dec. 31, current	•									,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
year (16+17-18.6)	1	2,506							1	2,506
POLICY EXHIBIT 20. In force December 31, prior					No. of Policies					
year	351	123 257 485		(a)		1 392 900			351	124 650 385
21. Issued during year	19	8 800 000		(α)		1,002,000			19	8 800 000
22. Other changes to in force (Net)					1					
23. In force December 31 of current year	342	123.551.327		(a)		1.528.300			342	125.079.627

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

## **ACCIDENT AND HEALTH INSURANCE**

		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 Illinois

DURING THE YEAR 2022

NAIC Group Code 0028	LI	FE INSURANCE		NAIC Compa	any Code 72222
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
Life insurance	1,658,723		54,438		1,713,16
	29,362				. , .
, ,,		XXX		XXX	
5. Totals (Sum of Lines 1 to 4)	1,688,085		54,438		1,742,52
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Life insurance:					
6.3 Applied to provide paid-up additions or shorten the					
Annuities:					
,					
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	892.395				892.39
					, , , ,
	73.206				73.20
12. Surrender values and withdrawals for life contracts	399,264				399,26
and believe paid					
15. Totals	1,364,865				1,364,86
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)					
	Cradit Life		+	+	

,		•								
	(	Ordinary		Credit Life and Individual)		Group		ndustrial		Total
DIRECT DEATH	4			and individual)			7	,	0	
	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. &		& Gr.		No. of		Pols. &		Pols. &	
	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior	0	450 005								450,000
year	3	100,390								156,395
17. Incurred during current year	11	1,965,000							11	1,965,000
Settled during current year:										
18.1 By payment in full	10	892,395							10	892,39
18.2 By payment on										
compromised claims										
compromised claims	10	892,395							10	892,39
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	10	802 305							10	892.395
19. Unpaid Dec. 31. current	10								10	
vear (16+17-18.6)	4	1,229,000							4	1,229,000
year (10:17-10:0)		1,220,000			No. of					1,220,000
DOLLOV EVIJIBIT										
POLICY EXHIBIT					Policies					
20. In force December 31, prior year	1 500	004 507 076		(-)		E 250 000			1 500	000 056 676
year	1,399	47 147 000		(a)					1,399	47 147 00
21. Issued during year	88	47 , 147 ,000							88	47 , 147 ,000
22. Other changes to in force (Net)	(117)	(EO 704 100)				001 000			(117)	/E1 000 000
	(117)	(52,704,188)				901,900			(11/)	(31,802,288
23. In force December 31 of	1 570	700 040 600				6 060 700			1 570	005 201 200
current year	1,570	799,040,688		(a)	l	6,260,700		I	1,570	805,301,388

ı	ourion you	1,010	700,010,000	(a	1)		0,200,700			1,010	
(	(a) Includes Individual Credit Life	Insurance p	rior year \$		, current	year \$					
	Includes Group Credit Life Inst	urance Loar	ns less than or equ	al to 60 mor	nths at issue, prio	r year \$		, Cl	urrent year \$		
	Loans greater than 60 months	at issue BU	JT NOT GREATER	R THAN 120	MONTHS, prior	year \$		, Cl	urrent year \$		

## **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2022

2. Annuity considerations	NAIC	Group Code 0028	LI	<b>FE INSURANCE</b>		NAIC Comp	any Code 72222
2. Annuity considerations			·	Credit Life (Group	-	4 Industrial	
3. Deposit-type contract funds	1.	Life insurance	573,217		51,893		625,110
4. Other considerations   5. Totals (Sum of Lines 1 to 4)   573,317   51,893   625,21	2.	Annuity considerations	100				100
4. Other considerations   5. Totals (Sum of Lines 1 to 4)   573,317   51,893   625,21	3.	Deposit-type contract funds		XXX		XXX	
DIRECT DIVIDENDS TO	4.	Other considerations					
POLICYHOLDERS/REFUNDS TO MEMBERS	5.	Totals (Sum of Lines 1 to 4)	573,317		51,893		625,210
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 6.5 Totals (Sum of Lines 6.1 to 6.4) Annutites: 7.1 Paid in cash or left on deposit 7.2 Applied to provide paid-up annutites 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. Annutity 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 1399. Summary of Line 13 from overflow page 1399. Summary of Line 13 from overflow page 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13					·		
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	Life ir	surance:					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	-	•					
endowment or premium-paying period	_						
6.5 Totals (Sum of Lines 6.1 to 6.4)		endowment or premium-paying period					
Annuities: 7.1 Paid in cash or left on deposit 7.2 Applied to provide paid-up annuities 7.3 Other 7.4 Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4)  DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits 10. Matured endowments 11. Annuity benefits 12. Surrender values and withdrawals for life contracts 13. Aggregate write-ins for miscellaneous direct claims and benefits paid 14. All other benefits, except accident and health 15. Totals  DETAILS OF WRITE-INS 1301. 1302. 1308. Summary of Line 13 from overflow page. 1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13	V						
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							
9. Death benefits	8.						
10. Matured endowments   11. Annuity benefits   76,885   76,885   76,885   3,319   3,311     12. Surrender values and withdrawals for life contracts   3,319   3,311     13. Aggregate write-ins for miscellaneous direct claims and benefits paid   14. All other benefits, except accident and health   15. Totals   180,204   180,204   180,204   180,200     1301.   1302.   1303.   1398. Summary of Line 13 from overflow page   1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13			100 000				400.000
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							, -
and benefits paid			3,319				3,319
15. Totals	13.						
DETAILS OF WRITE-INS 1301. 1302. 1303. 1398. Summary of Line 13 from overflow page	14.	All other benefits, except accident and health					
1301. 1302. 1303. 1398. Summary of Line 13 from overflow page	15.	Totals	180,204				180,204
1302.		DETAILS OF WRITE-INS					
1303. 1398. Summary of Line 13 from overflow page	1301.						
1398. Summary of Line 13 from overflow page							
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13							
	1398.	Summary of Line 13 from overflow page					
above)	1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

				Credit Life		_				
		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	1	100,000							1	100,000
Settled during current year:										
18.1 By payment in full	1	100,000							1	100,000
18.2 By payment on		,								,
compromised claims										
18.3 Totals paid	1	100,000							1	100,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	1	100,000							1	100,000
19. Unpaid Dec. 31, current										
year (16+17-18.6)										
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	678	292,908,332		(a)		4,913,000			678	297,821,332
21. Issued during year	35	20,080,000							35	20,080,000
22. Other changes to in force		(00 410 100)								(0.4.00= 000)
(Net)	(33)	(22,419,189)				421,500			(33)	(21,997,689)
23. In force December 31 of	000	000 500 440				E 004 E00			000	005 000 040
current year	680	290,569,143		(a)		5,334,500			680	295,903,643

## **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF Iowa

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	FE INSURANCI	E	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.		146,268				146,268
2.						
3.			XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	146,268				146,268
Life ir	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS surance: Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Other					
	,					
7.1 7.2 7.3	Paid in cash or left on deposit					
7.4 8.	Totals (Sum of Lines 7.1 to 7.3)					
9.	DIRECT CLAIMS AND BENEFITS PAID  Death benefits					
10.	Matured endowments					
11.	Annuity benefits	22,480				22,480
12.	Surrender values and withdrawals for life contracts					
13.						
14.	All other benefits, except accident and health					
15.	Totals	22,480				22,480
	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)					
		1				

		Ordinary		Credit Life and Individual)		Group		ndustrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4	5	6	7	8	9	10
MATURED ENDOWMENTS	No. of Pols. &		Ind.Pols. & Gr.		No. of		No. of Pols. &		No. of Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior										
year	197	82,026,000		(a)						82,026,00
21. Issued during year	15	4,230,000							15	4,230,00
22. Other changes to in force (Net)	(4)	26,000							(4)	26,00
23. In force December 31 of										
current vear	208	86.282.000	1	(a)	l			l	208	86.282.00

 current year
 208
 86,282,000
 (a)
 208

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

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

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

## **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF Kansas

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	FE INSURANC	E	NAIC Compa	any Code 72222
	DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.	Life insurance	180,190				180,190
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	180,190				180,190
	DIRECT DIVIDENDS TO					
Life ir	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					
6.4	Other					
6.5	Totals (Sum of Lines 6.1 to 6.4)					
Annu	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	25,000				25,000
10.	Matured endowments					
11.	Annuity benefits	11,692				11,692
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	36,692				36,692
	DETAILS OF WRITE-INS					
1301.						
1302.						
1303.						
	Summary of Line 13 from overflow page					
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					
					+	

		Ordinary		Credit Life and Individual)		Group		ndustrial		Total
DIRECT DEATH			_	and individual)	_				0	
DIRECT DEATH BENEFITS AND	1	2	3	4	5	6	7	8	9	10
MATURED	No. of		No. of Ind.Pols.				NI6		NIf	
ENDOWMENTS	Pols. &		& Gr.		No. of		No. of Pols. &		No. of Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	A ma a comt	Certifs.	Amazunt
16. Unpaid December 31, prior	Certiis.	Amount	Ceruis.	Amount	Ceruis.	Amount	Certiis.	Amount	Ceruis.	Amount
year										
17. Incurred during current year									1	25.000
Settled during current year:		20,000								
18.1 By payment in full	1	25.000							1	25.000
18.2 By payment on		,								- ,
compromised claims										
18.3 Totals paid	1	25,000							1	25,000
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										
year	244	103,044,953		(a)					244	103,044,953
21. Issued during year	16	7,275,000							16	7,275,000
22. Other changes to in force	(44)	(0.407.000)							(44)	(0.407.000)
(Net)	(14)	(3,427,000)							(14)	(3,427,000)
23. In force December 31 of	246	106.892.953							246	106 000 050
current year	240	100,892,953		(a)					240	106,892,953

(	a) Includes Individual Credit Life	Insurance p	rior year \$			, c	current year	ır \$	 		
	Includes Group Credit Life Ins	urance Loa	ns less tha	ın or equ	ial to 60 mo	onths at issu	ue, prior ye	ear\$	 , CL	ırrent year \$	 
	Loans greater than 60 months	at issue Bl	JT NOT G	REATE	R THAN 12	20 MONTHS	S, prior yea	ar \$	 , CL	ırrent year \$	 

## **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	FE INSURANC	E	NAIC Comp	any Code 72222
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life insurance			·		
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	411,763		264		412,027
Life in	DIRECT DIVIDENDS TO 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					
6.5	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	105,000				105,000
10.	Matured endowments					
11.	Annuity benefits	119				119
12.	Surrender values and withdrawals for life contracts	20,229				20,229
13.						
	All other benefits, except accident and health					
15.	Totals	125,348				125,348
	DETAILS OF WRITE-INS					
1302.						
1303.						
	Summary of Line 13 from overflow page					
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					
	a contract of the contract of					

	Ordinary		Credit Life (Group and Individual)		0		la de está el		T-4-1	
			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		405 000								40F 000
17. Incurred during current year	2	105,000						•	2	105,000
Settled during current year:										
18.1 By payment in full	2  .	105,000							2	105,000
18.2 By payment on										
compromised claims										
18.3 Totals paid	2  .	105,000							2	105,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	2	105.000							2	105.000
19. Unpaid Dec. 31, current										
year (16+17-18.6)										
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	443	153,023,736		(a)		25,000			443	153,048,736
21. Issued during year	20	9,900,000								9,900,000
00 00 1 1 1										-,,
(Net)	(23)	(3,872,327)							(23)	(3,872,327)
23. In force December 31 of	,	. , , , ,								. , , , ,
current year	440	159,051,409		(a)		25,000			440	159,076,409

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

## **ACCIDENT AND HEALTH INSURANCE**

	•	COUDEIN / UID		V 1110E		
		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		<b>.</b>			
	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)			1		l



DIRECT BUSINESS IN THE STATE OF Louisiana

DURING THE YEAR 2022

1	72222
1. Life insurance	ı
2. Annuity considerations   32,100	
3. Deposit-type contract funds	,
4. Other considerations 5. Totals (Sum of Lines 1 to 4)  DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Life insurance: 6.1 Paid in cash or left on deposit 6.2 Applied to pay renewal premiums 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period 6.4 Other 6.5 Totals (Sum of Lines 6.1 to 6.4)  Annutities: 7.1 Paid in cash or left on deposit 7.2 Applied to provide paid-up annutities 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. Annutly benefits 12. Surrender values and withdrawals for life contracts 13. Aggregate write-ins for miscellaneous direct claims and benefits paid	
State	
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS  Life insurance: 6.1 Paid in cash or left on deposit 6.2 Applied to pay renewal premiums 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period 6.4 Other 6.5 Totals (Sum of Lines 6.1 to 6.4)  Annuities: 7.1 Paid in cash or left on deposit 7.2 Applied to provide paid-up annuities 7.3 Other 7.4 Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4)  DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits 10. Matured endowments 11. Annuity benefits 12. Surrender values and withdrawals for life contracts 13. Aggregate write-ins for miscellaneous direct claims and benefits paid.	327.730
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         6.3 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)       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         7.3 Other       7.4 Totals (Sum of Lines 7.1 to 7.3)         8. Grand Totals (Lines 6.5 plus 7.4)       8 Grand Totals (Lines 6.5 plus 7.4)         9. Death benefits       25,000         10. Matured endowments       11 Annuity benefits         11. Annuity benefits       148,658         12. Surrender values and withdrawals for life contracts       64,470         13. Aggregate write-ins for miscellaneous direct claims and benefits paid       64,470	
6.2 Applied to pay renewal premiums 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period 6.4 Other 6.5 Totals (Sum of Lines 6.1 to 6.4)  Annuities: 7.1 Paid in cash or left on deposit 7.2 Applied to provide paid-up annuities 7.3 Other 7.4 Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4)  DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits 10. Matured endowments 11. Annuity benefits 12. Surrender values and withdrawals for life contracts 13. Aggregate write-ins for miscellaneous direct claims and benefits paid	
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	
endowment or premium-paying period	
6.5 Totals (Sum of Lines 6.1 to 6.4)	
Annuities: 7.1 Paid in cash or left on deposit	
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	
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       25,000         10. Matured endowments       11. Annuity benefits         12. Surrender values and withdrawals for life contracts       64,470         13. Aggregate write-ins for miscellaneous direct claims and benefits paid       64,470	
8. Grand Totals (Lines 6.5 plus 7.4)  DIRECT CLAIMS AND BENEFITS PAID  9. Death benefits	
DIRECT CLAIMS AND BENEFITS PAID  9. Death benefits	
9. Death benefits	
10. Matured endowments	25 000
11. Annuity benefits	- /
12. Surrender values and withdrawals for life contracts	
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	, -
	,
15. Totals 238,128	238.128
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)	

		0.1		Credit Life		0			T-4-1	
		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	1	25,000							1	25,000
Settled during current year:										
18.1 By payment in full	1	25,000							1	25,000
18.2 By payment on										,
compromised claims										
18.3 Totals paid	1	25.000							1	25.000
18.4 Reduction by compromise 18.5 Amount rejected										
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	280	107,919,529		(a)						107,919,529
21. Issued during year	13	8,650,000							13	8,650,000
22. Other changes to in force										
(Net)	(19)	(5,454,383)							(19)	(5,454,383)
23. In force December 31 of										
current year	274	111, 115, 146		(a)					274	111, 115, 146

## **ACCIDENT AND HEALTH INSURANCE**

	•	COUDEIN / UID		V 1110E		
		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		<b>.</b>			
	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)			1		l



DIRECT BUSINESS IN THE STATE OF Maine

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	FE INSURANCE	NAIC Company Code 722		
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life insurance	853,679		32,341		886,020
2.	Annuity considerations	51,250				51,250
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	904,929		32,341		937,270
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS assurance:					
6.1						
	Applied to pay renewal premiums					
	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
	Totals (Sum of Lines 6.1 to 6.4)					
Annu	,					
7.1	Paid in cash or left on deposit					
7.2						
7.3	21.7					
7.4						
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1.000.004				1.000.004
10.						
11.						157.074
12.		′				73.424
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid	,				
14.	All other benefits, except accident and health	12,086				12,086
15.	Totals	1,242,588				1,242,588
	DETAILS OF WRITE-INS					
1302.						
1303.						
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

	(	Ordinary		Credit Life and Individual)		Group	ı	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	100,078							1	100,078
17. Incurred during current year	4	1,242,000			1	53,600			5	1,295,600
Settled during current year:										
18.1 By payment in full	4	1,000,004							4	1,000,004
18.2 By payment on										
compromised claims		1 000 004							Λ	1 000 00
10.5 Totals paid	4	1,000,004								
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	4	1,000,004							4	1,000,004
19. Unpaid Dec. 31, current									_	
year (16+17-18.6)	1	342,074			1	53,600			2	395,674
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior										
year	975	379,594,403		(a)		3,061,900			975	
21. Issued during year	46	19,905,000							46	19,905,000
22. Other changes to in force (Net)										
23. In force December 31 of	966	383.919.574		(a)		3.113.300			966	387.032.87

 current year
 966
 383,919,574
 (a)
 3,113,300
 966
 3

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

## **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF Maryland

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	FE INSURANCE	NAIC Company Code 7222		
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.		2,395,380				2,470,507
2.				- /		
3.	_ 1				XXX	
4.						
5.	Totals (Sum of Lines 1 to 4)	2,429,099		75,127		2,504,226
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS ISSURANCE:					
6.1						
	Other  Totals (Sum of Lines 6.1 to 6.4)					
Annui						
7.1	Paid in cash or left on deposit					
7.1						
7.3						
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
<u> </u>	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	856 626		33,800		890 426
10.						
11.		284.215				284.215
12.		48,232				48 . 232
13.	Aggregate write-ins for miscellaneous direct claims					
14.						
15.	Totals	1,189,073		33,800		1,222,873
	DETAILS OF WRITE-INS					
1301.						
1302.						
1303.						
1398.	0 (11 40 ( 0					
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

		Ordinary	Credit Life (Group and Individual)			Group		ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND		_	No. of	·				· ·		
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year	1	45,638			1	33,800			2	79,438
17. Incurred during current year	8	916,000			1	25,000			9	941,000
Settled during current year:										
18.1 By payment in full	7	856,626			1	33,800			8	890,426
		· ·			1	· ·				
compromised claims										
18.2 By payment on compromised claims	7	856,626			1	33,800			8	890,426
18.4 Reduction by compromise										
18.5 Amount rejected			l							
18.6 Total settlements	7	856.626			1	33.800			8	890,426
19. Unpaid Dec. 31, current		,								,
year (16+17-18.6)	2	105,012			1	25,000			3	130,012
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	2,336	1,006,633,990		(a)		7,112,600			2,336	1,013,746,590
21. Issued during year	167	70,722,000							167	70,722,000
00 011 1 1 1										
(Net)	(181)	(68,254,273)				140,900			(181)	(68, 113, 373
23. In force December 31 of										
current vear	2.322	1.009.101.717	ĺ	(a)	l	7.253.500			2.322	1.016.355.21

 current year
 2,322
 1,009,101,717
 (a)
 7,253,500
 2,322
 1,01

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

## **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF Massachusetts NAIC Group Code 0028

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	FE INSURANCE	NAIC Company Code 7222		
	DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.		12,824,607		4 000 000		14.030.700
2.		648.785				648,785
3.	,				XXX	
4.				· · · ·		
5.	Totals (Sum of Lines 1 to 4)	13,473,392		1.206.093		14,679,485
	DIRECT DIVIDENDS TO	10,110,000		1,=11,110		,,
	POLICYHOLDERS/REFUNDS TO MEMBERS					
Life in	surance:					
6.1						
6.3						
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	6,096,882		1,462,100		7,558,982
10.						
11.	Annuity benefits					, ,
12.		1,755,656				1,755,656
14.	All other benefits, except accident and health	42,636				42,636
15.	Totals	10,848,168		1,462,100		12,310,268
	DETAILS OF WRITE-INS					
1302.						
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										
year	11	2,915,100			3	468,300			14	3,383,400
year	49	4,624,725			2	993,800			51	5,618,525
Settled during current year:										
18.1 By payment in full	44	6.096.882			5	1.462.100			49	7.558.982
1005					1					
compromised claims										
18.2 By payment on compromised claims	44	6,096,882			5	1,462,100			49	7,558,982
18.4 Reduction by compromise			l							
18.5 Amount rejected										
18.6 Total settlements	44	6.096.882			5	1.462.100			49	7.558.982
19. Unpaid Dec. 31, current		, , ,				, ,				, , .
year (16+17-18.6)	16	1,442,943							16	1,442,943
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
vear	13, 172	6,268,137,451		(a)		119, 143, 900			13, 172	6,387,281,351
21. Issued during year	757	443,421,000							757	443,421,000
00 00 1 1 1 1										
(Net)	(834)	(249,507,434)				(1,421,300)			(834)	(250,928,734
23. In force December 31 of										
current vear	13.095	6.462.051.017	l	(a)	1	117.722.600	1		13.095	6.579.773.617

ourion you	10,000	0,102,001,011	(a)			111,722,000			10,000	Ο,
(a) Includes Individual Credit Life	nsurance p	orior year \$		, current y	ear\$					
Includes Group Credit Life Inst	urance Loa	ns less than or equa	I to 60 months	is at issue, prior	year \$		, CL	ırrent year \$		
Loans greater than 60 months	at issue Bl	JT NOT GREATER	THAN 120 M	IONTHS, prior y	/ear\$		, CL	ırrent year \$		

## **ACCIDENT AND HEALTH INSURANCE**

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



LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF Michigan NAIC Group Code 0028

DURING THE YEAR 2022

1   2   3   4   5	,057,709
AND ANNUITY CONSIDERATIONS         Ordinary         and Individual)         Group         Industrial         Tota           1. Life insurance         1,031,021         26,688         1           2. Annuity considerations         6,300         20,000         20,000	,057,709 6,300
1. Life insurance       1,031,021       26,688       1         2. Annuity considerations       6,300	,057,709 6,300
2. Annuity considerations	6,300
1 3 Deposit-type contract funds	
4. Other considerations	,064,009
DIRECT DIVIDENDS TO	
POLICYHOLDERS/REFUNDS TO MEMBERS Life insurance:	
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:	
7.4 Poid in each color to deceat	
7.1 Paid in cash or left on deposit	
7.4 7.1 (0 (1): 7.4.70)	
8. Grand Totals (Lines 6.5 plus 7.4)	
DIRECT CLAIMS AND BENEFITS PAID	
9. Death benefits	1EE 447
	,
10. Matured endowments	
11. Annuity benefits	- ,
12. Surrender values and withdrawals for life contracts	. 137 , 330
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	
14. All other benefits, except accident and health	
15. Totals 25.875	302.775
DETAILS OF WRITE-INS	302,773
1301.	
1307	
1302.	
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	·		Č	•	Č	C	
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	4,572							1	4,572
17. Incurred during current year	2	125,000			2	103,500			4	228,500
Settled during current year:										
18.1 By payment in full	3	129,572			1	25,875			4	155,447
					l l					
compromised claims										
18.2 By payment on compromised claims	3	129,572			1	25,875			4	155,447
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	3	129,572			1	25,875			4	155,447
19. Unpaid Dec. 31, current		•								
year (16+17-18.6)					1	77,625		<u></u>	1	77,625
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	1 , 158	501,718,265		(a)		2,526,700			1 , 158	504,244,965
21. Issued during year	45	19,955,000							45	19,955,000
(Net)	(53)	(11,803,000)				295,900			(53)	(11,507,100
23. In force December 31 of	4 450	500 070 005				0 000 000			4 450	E40 000 005
current vear	1.150	509.870.265		(a)		2.822.600			1.150	512.692.865

current year | 1,150 | 509,870,265 | (a) |

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

## **ACCIDENT AND HEALTH INSURANCE**

	•	COUDEIN / UID		V 1110E		
		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		<b>.</b>			
	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)			1		l



DIRECT BUSINESS IN THE STATE OF Minnesota

DURING THE YEAR 2022

IAIC Group Code 0028	LI	FE INSURANCE		NAIC Compar	ny Code 72222
DIDECT DEFAULTO	1	2	3	4	5
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
	856.995				881.68
	6.300		, -		,
ž – – – – – – – – – – – – – – – – – – –				XXX	
5. Totals (Sum of Lines 1 to 4)	863.295		24,692		887.98
DIRECT DIVIDENDS TO	000,200		24,002		007,00
POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.3 Applied to provide paid-up additions or shorten the					
endowment or premium-paying period					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
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					
Death benefits	25,000				25.00
	23,000				23,00
11. Annuity benefits					56.81
	1,433				- ,
13. Aggregate write-ins for miscellaneous direct claims	1,700				
and benefits paid					
15. Totals	86.122				86,12
DETAILS OF WRITE-INS	00,122				00,12
1301.					
1302.					
1303.					
1000 0 111 101 0					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					
4,20.0/	Cradit Life		<b>_</b>	L	

				Credit Life		•				
	(	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	2	397,000							2	397,000
Settled during current year:										
18.1 By payment in full	1	25,000							1	25,000
18.2 By payment on		,								,
compromised claims										
18.3 Totals paid	1	25.000							1	25.000
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)	1	372,000							1	372,000
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	1,018	476,680,707		(a)		2,427,700			1,018	479, 108, 407
21. Issued during year	73	42,350,000							73	42,350,000
22. Other changes to in force										
(Net)	(72)	(22,408,644)				(170,300)			(72)	(22,578,944)
23. In force December 31 of										
current year	1,019	496,622,063		(a)		2,257,400			1,019	498,879,463

(	a) Includes Individual Credit Life	Insurance p	rior year \$		, c	current year \$	 		
	Includes Group Credit Life Ins	urance Loar	ns less than o	equal to	60 months at issu	ue, prior year \$	 , (	current year \$	 
	Loans greater than 60 months	at issue BL	JT NOT GREA	ATER TH	AN 120 MONTHS	S, prior year \$	 , (	current year \$	 

## **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF Mississippi

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	FE INSURANC	E	NAIC Comp	any Code 72222
	DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.	Life insurance	136,994				136,994
2.	Annuity considerations	720				720
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	137,714				137,714
	DIRECT DIVIDENDS TO					
Life ir	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)					
Annu	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.	li di					
11.	Annuity benefits					
12.		276				276
13.	and bonone paid					
15.	Totals	276				276
	DETAILS OF WRITE-INS					
1302.						
1303.						
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					
		+				

		S 12		Credit Life		0				T
		Ordinary	_	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										
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	156	53,253,041		(a)					156	53,253,041
21. Issued during year	7	2,300,000								2,300,000
22. Other changes to in force	(44)	(F. 04F. 000)							(44)	(5.045.000)
(Net)	(14)	(5,945,000)							(14)	(5,945,000)
23. In force December 31 of	149	40 609 041							149	40 609 041
current year	149	49,608,041		(a)					149	49,608,041

(	a) Includes Individual Credit Life	Insurance p	orior year \$			, c	urrent year \$	 			
	Includes Group Credit Life Ins	urance Loa	ns less tha	an or equ	ual to 60 mo	onths at issu	ue, prior year	\$ 	, CL	ırrent year \$	 
	Loans greater than 60 months	at issue Bl	UT NOT G	REATE	R THAN 12	20 MONTHS	s, prior year \$	 	, CL	ırrent year \$	 

## **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2022

2. Annuity considerations   1,800	NAIC	Group Code 0028	LI	<b>FE INSURANC</b>	E	NAIC Compa	any Code 72222
1. Life insurance				Credit Life (Group		4	, and the second
2. Annuity considerations   1,800							
3. Deposit-type contract funds							396,326
4. Other considerations 5. Totals (Sum of Lines 1 to 4)  DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS Life insurance: 6.1 Paid in cash or left on deposit 6.2 Applied to pay renewal premiums 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period 6.4 Other Charles (Sum of Lines 6.1 to 6.4)  Annutites: 7.1 Paid in cash or left on deposit 7.2 Applied to provide paid-up annutites 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							
State				XXX		XXX	
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS  Life insurance: 6.1 Paid in cash or left on deposit 6.2 Applied to pay renewal premiums 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period 6.4 Other 6.5 Totals (Sum of Lines 6.1 to 6.4)  Annuities: 7.1 Paid in cash or left on deposit 7.2 Applied to provide paid-up annuities 7.3 Other 7.4 Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4)  DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits 10. Matured endowments 11. Annuity benefits 12. Surrender values and withdrawals for life contracts 13. Aggregate write-ins for miscellaneous direct claims and benefits paid. 14. All other benefits, except accident and health 15. Totals  DETAILS OF WRITE-INS  1301.		-					
POLICYHOLDERS/REFUNDS TO MEMBERS Life insurance: 6.1 Paid in cash or left on deposit 6.2 Applied to pay renewal premiums 6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period 6.4 Other 6.5 Totals (Sum of Lines 6.1 to 6.4) Annuities: 7.1 Paid in cash or left on deposit 7.2 Applied to provide paid-up annuities 7.3 Other 7.4 Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4) DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits 10. Matured endowments 11. Annuity benefits 12. Surrender values and withdrawals for life contracts 13. Aggregate write-ins for miscellaneous direct claims and benefits paid 14. All other benefits, except accident and health 15. Totals  DETAILS OF WRITE-INS	5.	,	398,126				398,126
6.1 Paid in cash or left on deposit		POLICYHOLDERS/REFUNDS TO MEMBERS					
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 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							
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	-						
endowment or premium-paying period							
6.5 Totals (Sum of Lines 6.1 to 6.4)		endowment or premium-paying period					
Annuities: 7.1 Paid in cash or left on deposit 7.2 Applied to provide paid-up annuities 7.3 Other 7.4 Totals (Sum of Lines 7.1 to 7.3) 8. Grand Totals (Lines 6.5 plus 7.4)  DIRECT CLAIMS AND BENEFITS PAID 9. Death benefits 10. Matured endowments 11. Annuity benefits 12. Surrender values and withdrawals for life contracts 13. Aggregate write-ins for miscellaneous direct claims and benefits paid 14. All other benefits, except accident and health 15. Totals  DETAILS OF WRITE-INS 1301.	U						
7.1 Paid in cash or left on deposit		,					
7.2 Applied to provide paid-up annuities							
7.3 Other	7.1						
7.4 Totals (Sum of Lines 7.1 to 7.3)       8. Grand Totals (Lines 6.5 plus 7.4)         DIRECT CLAIMS AND BENEFITS PAID         9. Death benefits       35,159         10. Matured endowments       11. Annuity benefits         12. Surrender values and withdrawals for life contracts       163         13. Aggregate write-ins for miscellaneous direct claims and benefits paid       163         14. All other benefits, except accident and health       15. Totals         DETAILS OF WRITE-INS         1301.							
8. Grand Totals (Lines 6.5 plus 7.4)  DIRECT CLAIMS AND BENEFITS PAID  9. Death benefits	7.3						
DIRECT CLAIMS AND BENEFITS PAID  9. Death benefits							
9. Death benefits	8.						
10. Matured endowments							
11. Annuity benefits	9.	Death benefits	35 , 159				35 , 159
12. Surrender values and withdrawals for life contracts	10.						
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	11.						19,647
and benefits paid	12.		163				163
14. All other benefits, except accident and health	13.						
DETAILS OF WRITE-INS 1301.	14.						
1301.	15.	Totals	54,969				54,969
		DETAILS OF WRITE-INS	·				
	1301						
1302.							
1000							
1398. Summary of Line 13 from overflow page	1398	Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	1399	, , , , , , , , , , , , , , , , , , , ,					

				Credit Life				In directiful Tatal		
		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	2	60,218							2	60,218
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full	1	35 . 159							1	35 . 159
18.2 By payment on		,								
compromised claims			l							
18.3 Totals paid	1	35 . 159							1	35 . 159
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	1	35 , 159							1	35, 159
19. Unpaid Dec. 31, current										
year (16+17-18.6)	1	25,059							1	25,059
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
vear	497	188,657,778		(a)					497	188,657,778
21. Issued during year	33	19,430,000							33	19,430,000
22 Other changes to in force										
(Net)	(19)	(7,659,000)							(19)	(7,659,000)
23. In force December 31 of		000 400 770								000 400 770
current year	511	200,428,778		(a)					511	200,428,778

(;	a) Includes Individual Credit Life	Insurance pri	ior year \$			, current	year \$	 		
	Includes Group Credit Life Ins	urance Loans	s less than o	or equa	al to 60 mont	hs at issue, pric	r year \$	 , Cl	urrent year \$	 
	Loans greater than 60 months	at issue BU	T NOT GRE	ATER	THAN 120 I	MONTHS, prior	year \$	 , Cl	urrent year \$	 

## **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF Montana

DURING THE YEAR 2022

NAIC	Group Code 0028	L	FE INSURANCE	<b>E</b>	NAIC Compa	any Code 72222
		1	2	3	4	5
	DIRECT PREMIUMS		Credit Life (Group			
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.	Life insurance	95,406				95,406
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	95,406				95,406
	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						
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	75,541				75,541
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims					
	and ponente para					
14.	, ,					
15.	Totals	75,541				75,541
	DETAILS OF WRITE-INS					
1302.						
1303.						
1398.	Summary of Line 13 from overflow page					
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13					
L	above)					

	Ordinary			Credit Life and Individual)	dual) Group I		Industrial		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	Certiis.	Amount	Ceruis.	Amount	Certiis.	Amount	Certiis.	Amount	Ceruis.	Amount
year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20 In force December 31 prior										
year21. Issued during year	120	39,719,274		(a)					120	39,719,2
21. Issued during year	3	2,250,000							3	2,250,0
22. Other changes to in force (Net)									(1)	(488,0
23. In force December 31 of current year	122	41.481.274		(a)					122	41.481.2

current year 122 41,481,274 (a) Includes Individual Credit Life Insurance prior year \$ ...... ....., current year \$ Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ....., current year \$ Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ....., current year \$

## **ACCIDENT AND HEALTH INSURANCE**

	•	COUDEIN / UID		V 1110E		
		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		<b>.</b>			
	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)			1		l



DIRECT BUSINESS IN THE STATE OF Nebraska

DURING THE YEAR 2022

DIRECT PREMIUMS	NAIC	Group Code 0028	LI	FE INSURANC	E	NAIC Company Code 7222		
2. Annuity considerations			·			4 Industrial		
2. Annuity considerations	1.	Life insurance	147.776	,			147.776	
3. Deposit-type contract funds	2.						600	
148,376   148,	3.			XXX				
DIRECT DIVIDENDS TO	4.	Other considerations						
POLICYHOLDERS/REFUNDS TO MEMBERS	5.	Totals (Sum of Lines 1 to 4)	148,376				148,376	
Life insurance: 6.1 Paid in cash or left on deposit		DIRECT DIVIDENDS TO	,				·	
6.2 Applied to provide paid-up additions or shorten the endowment or premium-paying period	Life ir	surance:						
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	-							
endowment or premium-paying period	_							
6.5 Totals (Sum of Lines 6.1 to 6.4)		endowment or premium-paying period						
Annuities: 7.1 Paid in cash or left on deposit	Ų.,							
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								
DIRECT CLAIMS AND BENEFITS PAID     9. Death benefits								
9. Death benefits	0.							
10. Matured endowments	۵							
11. Annuity benefits       12. Surrender values and withdrawals for life contracts       768       768         13. Aggregate write-ins for miscellaneous direct claims and benefits paid       14. All other benefits, except accident and health       15. Totals       768       768         1301								
12. Surrender values and withdrawals for life contracts		l:						
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.  14. All other benefits, except accident and health			769				769	
14. All other benefits, except accident and health		Aggregate write-ins for miscellaneous direct claims						
15. Totals 768 768  DETAILS OF WRITE-INS  1301.  1302.  1303.  1398. Summary of Line 13 from overflow page	14.							
DETAILS OF WRITE-INS  1301.  1302.  1303.  1398. Summary of Line 13 from overflow page							768	
1302		DETAILS OF WRITE-INS						
1302	1301							
1303								
1398. Summary of Line 13 from overflow page								
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13	1398	0 (1) 40 ( 0						
		Totals (Lines 1301 thru 1303 plus 1398) (Line 13						

			Credit Life (Creup and Individual)			Total				
		Ordinary	(Group 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										
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	214	89,514,000		(a)					214	89,514,000
21. Issued during year	14	9,850,000							14	9,850,000
22. Other changes to in force										
(Net)	(11)	(3,244,000)							(11)	(3,244,000)
23. In force December 31 of										
current year	217	96,120,000		(a)					217	96,120,000

## **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF Nevada

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	<b>FE INSURANCE</b>		NAIC Company Code 72222	
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.		384,799	and individual)		iliuusiliai	
2.	Annuity considerations					
3.	•	11,000	XXX			11,000
4.						
5.	Totals (Sum of Lines 1 to 4)	396.179		50.606		446.785
	DIRECT DIVIDENDS TO	555, 115		00,000		110,700
	POLICYHOLDERS/REFUNDS TO MEMBERS isurance:					
6.1						
6.2	11 1 7 1					
6.3	1 1 3 31					
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	1,090,000				1,090,000
10.	Matured endowments					
11.	Annuity benefits					275,105
12.		390,879				390,879
13.						
14.	,					
15.	Totals	1,755,984				1,755,984
	DETAILS OF WRITE-INS					
1302.						
1303.						
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

	,	Ordinan (		Credit Life		Craun		ndustrial		Total
DIDECT DEATH		Ordinary	_	and Individual)		Group				Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND			No. of							
MATURED ENDOWMENTS	No. of		Ind.Pols.		NIE		No. of		No. of	
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	1,090,000							1	1,090,000
Settled during current year:										
18.1 By payment in full	1	1,090,000							1	1,090,000
18.2 By payment on										
compromised claims										
18.3 Totals paid	1	1.090.000	l						1	1,090,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements									1	1,090,000
19. Unpaid Dec. 31, current										
year (16+17-18.6)										
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	387	145 , 177 , 688		(a)		4,791,100			387	149,968,788
21. Issued during year	13	8,500,000							13	8,500,000
22. Other changes to in force										
(Net)	(22)	(5,658,999)				199,800			(22)	(5,459,199)
23. In force December 31 of	070	140 040 000				4 000 000			070	450 000 500
current year	378	148,018,689		(a)		4,990,900			378	153,009,589

(	a) Includes Individual Credit Life I	Insurance prior year	\$	, curre	ent year \$	 		
	Includes Group Credit Life Insu	urance Loans less th	an or equal to 6	0 months at issue, p	orior year \$	 , cu	rrent year \$	 
	Loans greater than 60 months	at issue BUT NOT (	GREATER THA	N 120 MONTHS, pr	ior year \$	 , cu	rrent year \$	 

## **ACCIDENT AND HEALTH INSURANCE**

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



LIFE INSURANCE

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

DURING THE YEAR 2022 NAIC Company Code 72222

		1	2	3	4	5
	DIRECT PREMIUMS		Credit Life (Group			
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.		2,925,213		150,558		3,075,771
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	3,240,247		150,558		3,390,805
	DIRECT DIVIDENDS TO					
	POLICYHOLDERS/REFUNDS TO MEMBERS					
	surance:					
6.1	•					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the					
6.4						
	Other Totals (Sum of Lines 6.1 to 6.4)					
6.5	,					
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	, ,		270,700		2,850,908
10.						
11.						
12.	Surrender values and withdrawals for life contracts	792,595				792,595
13.	Aggregate write-ins for miscellaneous direct claims					
	All other benefits, except accident and health	6,322				6,322
15.	Totals	3,989,178		270,700		4,259,878
	DETAILS OF WRITE-INS					
1301.						
1302.						
1303.						
	Summary of Line 13 from overflow page					
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13					
	above)					

		Ordinary		Credit Life and Individual)		Group		ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND		_	No. of	•			·	ŭ	Ū	
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year	3	14,757			1	50,000			4	64,75
17. Incurred during current year	12	2,584,000			2	220,700			14	2,804,700
Settled during current year:										
18.1 By payment in full	11	2,580,208			3	270,700			14	2,850,908
18.2 By payment on compromised claims										
18.3 Totals paid	11	2.580.208			3	270.700			14	2.850.908
18.4 Reduction by compromise		, , ,				, , , , , , , , , , , , , , , , , , ,				
18.5 Amount rejected										
18.6 Total settlements	11	2.580.208			3	270.700			14	2.850.908
19. Unpaid Dec. 31, current		, •,								_,,
year (16+17-18.6)	4	18,549							4	18,549
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior										
year	3,337	1, 163, 496, 311		(a)		14,574,600			3,337	1, 178, 070, 91 <sup>-</sup>
21. Issued during year	123	54,049,000							123	54,049,000
22. Other changes to in force (Net)										
23. In force December 31 of current year	3.281	1.168.537.379		(a)		14.058.200			3.281	1.182.595.57

 current year
 3,281
 1,168,537,379
 (a)
 14,058,200
 3,281
 1,1

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

## **ACCIDENT AND HEALTH INSURANCE**

	•	COUDEIN / UID		V.110E		
		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		<b>.</b>			
	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)			1		l



DIRECT BUSINESS IN THE STATE OF New Jersey

DURING THE YEAR 2022

	Group Code 0028	LI	FE INSURANCE			ny Code 72222
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life insurance	4,330,953		106,374		4,437,327
2.	Annuity considerations	155.707				
3.	Deposit-type contract funds					
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	4.486.660		106.374		4.593.034
Life in	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS ISUITAINCE:	, ,		·		
6.1						
_						
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	3,386,265		192,100		3,578,365
10.	Matured endowments					
11.	Annuity benefits	419,731				419,731
12.	Surrender values and withdrawals for life contracts	715,928				715,928
	All other benefits, except accident and health	, -				,
15.	Totals	4,540,807		192,100		4,732,907
	DETAILS OF WRITE-INS					
1302.						
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	•				ŭ	Ū	
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	73, 181			1	108,100			5	181,28
17. Incurred during current year	15	3,585,794			1	84,000			16	3,669,79
Settled during current year:										
18.1 By payment in full	16	3,386,265			2	192,100			18	3,578,36
18.2 By payment on compromised claims										
18.3 Totals paid	16	3,386,265			2	192,100			18	3,578,36
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	16	3 386 265			2	192 100			18	3 578 369
19. Unpaid Dec. 31. current						, , , , , , , , , , , , , , , , , , , ,				
year (16+17-18.6)	3	272,710							3	272,710
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior	2 000	1 750 050 004				10 070 000			2 000	1 760 001 00
year	3,989	1,752,850,904		(a)		10,070,900			3,989	1,102,921,804
21. Issued during year										
22. Other changes to in force (Net)	(278)	(92,082,770)				16,500			(278)	(92,066,270
23. In force December 31 of current year	3.936	1.764.508.134		(a)		10.087.400			3.936	1.774.595.53

 current year
 3,936
 1,764,508,134
 (a)
 10,087,400
 3,936
 1,7

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

## **ACCIDENT AND HEALTH INSURANCE**

		COUPEIN / UND		V.110E		
		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					
24.2	premium (b)					
	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)					
	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)			1		



DIRECT BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	FE INSURANC	E	NAIC Compa	any Code 72222
		1	2	3	4	5
	DIRECT PREMIUMS	0 "	Credit Life (Group			T
1.	AND ANNUITY CONSIDERATIONS	Ordinary 332,182	and Individual)	Group 792	Industrial	Total
2.						332,974
3.	Annuity considerations					
3. 4						
5.	Totals (Sum of Lines 1 to 4)			792		336.274
5.	DIRECT DIVIDENDS TO	335,482		192		330,274
	POLICYHOLDERS/REFUNDS TO MEMBERS					
Life in	surance:					
6.1	Paid in cash or left on deposit					
	''' '					
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4						
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					18,809
12.	Surrender values and withdrawals for life contracts	83,622				83,622
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	102,431				102,431
	DETAILS OF WRITE-INS					
1301.						
1303.						
1398.	Summary of Line 13 from overflow page					
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					
						<u> </u>

			_	Credit Life						
<u> </u>		Ordinary	(Group	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 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	336	121,749,965		(a)		75,000				
21. Issued during year	20	13,925,000							20	13,925,000
22. Other changes to in force	(00)	(4 570 000)							(00)	(4 570 000)
(Net)	(23)	(4,5/0,000)							(23)	(4,570,000)
23. In force December 31 of current year	333	131.104.965		(a)		75.000			333	131,179,965

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

## **ACCIDENT AND HEALTH INSURANCE**

	ACCIDENT AND HEAETH INSURANCE												
		1	2	3	4	5							
				Policyholder Dividends									
				Paid, Refunds to									
			Direct Premiums	Members or Credited		Direct Losses							
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred							
24.	Group Policies (b)												
24.1	Federal Employees Health Benefits Plan premium (b)												
24.2	Credit (Group and Individual)												
	Collectively renewable policies/certificates (b)												
	Medicare Title XVIII exempt from state taxes or fee												
	Other Individual Policies:												
25.1	Non-cancelable (b)												
	Guaranteed renewable (b)				••••••								
	Non-renewable for stated reasons only (b)				•••••	• • • • • • • • • • • • • • • • • • • •							
25.4													
			•••••			•••••							
	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)												



LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF New York

NAIC Group Code 0028

DURING THE YEAR 2022 NAIC Company Code 72222

, ., .,	0.04p 0040 0020				TW NO Compe	any code i LLLL
	DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.		7,603,686		, .		
2.		467,721				467,721
3.			XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	8,071,407		315,490		8,386,897
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life in	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	<u>-</u>					
6.5						
Annui	,					
7.1	Paid in cash or left on deposit					
7.2						
7.3	_1					
7.4						
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	5 679 254		280 500		5 959 754
10.	Matured endowments					-,,
11.	Annuity benefits					
12.		, ,-				, ,-
13.	Aggregate write-ins for miscellaneous direct claims					
14.		31.673				31.673
	Totals	9,409,999		280,500		9,690,499
	DETAILS OF WRITE-INS	0,100,000		200,000		0,000,.00
1301						
1303.						•••••
	Summary of Line 13 from overflow page					•••••
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

	(	Ordinary		Credit Life (Group and Individual)		Group		ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND	•	-	No. of	·				· ·		
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year	7	2,369,085							7	2,369,085
year	46	4,692,955			3	280,500			49	4,973,455
Settled during current year:										
18.1 By payment in full	43	5,679,254			3	280,500			46	5,959,754
18.2 By payment on compromised claims										
18.3 Totals paid	43	5.679.254			3	280.500			46	5.959.754
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	43	5.679.254			3	280.500			46	5.959.754
19. Unpaid Dec. 31, current										,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
year (16+17-18.6)	10	1,382,786							10	1,382,786
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior										
year	8, 181	3,0/2,832,188		(a)		29,868,900			8, 181	3, 102, 701, 088
21. Issued during year	312	167,603,613							312	167,603,613
22. Other changes to in force (Net)	(693)	(230,369,883)				(1,409,200)			(693)	(231,779,083
23. In force December 31 of current year	7.800	3.010.065.918		(a)		28.459.700			7.800	3.038.525.618

 current year
 7,800
 3,010,065,918
 (a)
 28,459,700
 7,800
 3,0

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

## **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF North Carolina

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	FE INSURANCE	NAIC Company Code 72222		
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.		4.763.631		22.222		4.860.53
2.		67.480		- /-		67.480
3.	· ·					
4.	_ : _ : _ : _ :					
5.	Totals (Sum of Lines 1 to 4)	4,831,111		96.900		4.928.01
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS	1,001,111		00,000		1,020,01
	nsurance:					
	·					
	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.		2,195,855		250,000		2,445,85
10.						
11.		396,424				396,42
12.		161,710				161,71
13.						
14.	• •	6,271				6,27
15.	Totals	2,760,260		250,000		3,010,26
	DETAILS OF WRITE-INS					
1302.						
1398.	Summary of Line 13 from overflow page					
1399.	. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

	(	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10	
BENEFITS AND	-	_	No. of	•			·	ŭ	Ū		
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	664,908							5	664,90	
17. Incurred during current year	15	1,679,448			2	250,000			17	1,929,448	
Settled during current year:											
18.1 By payment in full	16	2,195,855			2	250,000			18	2,445,85	
18.2 By payment on compromised claims											
18.3 Totals paid	16	2, 195,855			2	250,000			18	2,445,85	
18.4 Reduction by compromise											
18.5 Amount rejected					L						
18.6 Total settlements	16	2.195.855			2	250.000			18	2.445.855	
19. Unpaid Dec. 31, current		,,				,				, , , , ,	
year (16+17-18.6)	4	148,501							4	148,50	
POLICY EXHIBIT					No. of Policies						
20. In force December 31, prior	E 0E7	0 147 754 417		( )		0 100 000			E 0E7	0 150 050 41	
year	3,357	2, 147, 754, 417		(a)		9, 199,000			5,357	2, 100,903,41	
21. Issued during year	358	199,825,000							358	199,825,000	
22. Other changes to in force (Net)	(278)	(77,746,000)				(97, 100)			(278)	(77,843,10	
23. In force December 31 of current year	5 437	2.269.833.417		(a)		9.101.900			5.437	2.278.935.31	

 current year
 5,437
 2,269,833,417
 (a)
 9,101,900
 5,437
 2,3

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

## **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	FE INSURANC	E	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	20,723				20,723
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	20,723				20,723
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
	nsurance:					
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					
6.5	Totals (Sum of Lines 6.1 to 6.4)					
Annu	ities:					
7.1	Paid in cash or left on deposit					
7.2	A 10 14 14 14 14 14 14 14 14 14 14 14 14 14					
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.						
14.	All other benefits, except accident and health					
	Totals					
	DETAILS OF WRITE-INS					
1301	·					
1303						
	Summary of Line 13 from overflow page					
	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					
<b>—</b>		One dit I if-	1			T .
	Ordinary	Credit Life	ual) Grou	ın	Industrial	Total

				Credit Life	1					
		Ordinary	(Group	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										
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	00	40 400 000								40 400 000
year	23	13,430,000		(a)						13,430,000
21. Issued during year	4	1,425,000							4	1,425,000
22. Other changes to in force (Net)	2	657 000							2	657,000
23. In force December 31 of									2	
current year	29	15,512,000		(a)					29	15,512,000

 current year
 29
 15,512,000
 (a)
 29

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

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

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

## **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	<b>FE INSURANCE</b>	NAIC Company Code 72222		
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group	3	4	5
1.		1.342.554	and Individual)	Group 63.740	Industrial	Total 1.406.294
1. 2.		45.656		- /		, , , , , , ,
3.		45,030			XXX	., .
4.				= 1		
5.	Totals (Sum of Lines 1 to 4)	1.388.210		63.740		1,451,950
0.	DIRECT DIVIDENDS TO	1,000,210		00,740		1,401,300
Life ir	POLICYHOLDERS/REFUNDS TO MEMBERS asurance:					
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	ities:					
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3						
7.4	,					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	354,081				354,08
10.	Matured endowments					
11.		245,565				245,565
12.		149,169				149 , 169
13.						
14.	•	11,740				11,740
15.	Totals	760,555				760,555
i	DETAILS OF WRITE-INS					
1302						
	, ,					
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	·				, and the second		
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year	1	5,022								5,022
17. Incurred during current year	7	354,081							7	354,08
Settled during current year:										
18.1 By payment in full	7	354,081							7	354,08
18 2 By payment on										,
compromised claims										
compromised claims	7	354,081							7	354,081
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	7	354.081							7	354.081
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						1				
vear	1,559	638,238,504		(a)		6,034,600			1,559	644,273,104
21. Issued during year	96	41,490,000								41,490,000
22 Other changes to in force										
(Net)	(89)	(20,499,330)				159,900			(89)	(20,339,430
23. In force December 31 of										
current vear	1.566	659.229.174	1	(a)		6.194.500		l	1.566	665.423.67

 current year
 1,566
 659,229,174
 (a)
 6,194,500
 1,566
 66

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

#### **ACCIDENT AND HEALTH INSURANCE**

	ACCIDENT A		VAITOL		
	1	2	3	4	5
			Policyholder Dividends		
			Paid, Refunds to		
		Direct Premiums	Members or Credited		Direct Losses
	Direct Premiu	ms Earned	on Direct Business	Direct Losses Paid	Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits premium (b)	s Plan				
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/cert	tificates (b)				
24.4 Medicare Title XVIII exempt from si	tate taxes or fee				
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)				•••••	• • • • • • • • • • • • • • • • • • • •
25.3 Non-renewable for stated reasons					
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					



DIRECT BUSINESS IN THE STATE OF Oklahoma

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	<b>FE INSURANCE</b>		NAIC Comp	any Code 72222
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life insurance	196,377		388		196,765
2.	Annuity considerations					
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	196,377		388		196,765
6.1	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '					
6.2	11 12 1					
6.3	Other					
6.5	,					
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.						
10.						
11.	less.	6.820				2 020
12.		2.740				6,820
13.	Aggregate write-ins for miscellaneous direct claims	2,740				,
14.						
15.	Totals	9,560				9,560
	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		Industrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4	5	6	7	8	9	10
MATURED ENDOWMENTS	No. of Pols. &		Ind.Pols. & Gr.		No. of		No. of Pols. &		No. of Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior					Policies	-				
year	237	92 232 656		(a)		36 700			237	92,269,35
21. Issued during year	19	8 910 000		(α)						8,910,00
22 Other changes to in force										
(Net)	(17)	(6.874.000)	L		L	174 . 800			(17)	(6.699.20
23. In force December 31 of		, , , , , , , , , , , ,							. (,	(1,111,1
current year	239	94.268.656		(a)		211.500			239	94.480.1

 current year
 239
 94,268,656
 (a)
 211,500
 239

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

#### **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF Oregon

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	<b>FE INSURANCE</b>		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	1,100,727		52,991		1,153,718
2.	Annuity considerations	7,600				7,600
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	1,108,327		52,991		1,161,318
Life ir	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS asurance: 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					
6.5						
Annu	,					
7.1	Paid in cash or left on deposit					
7.2 7.3	Applied to provide paid-up annuities					
7.4 8.	Totals (Sum of Lines 7.1 to 7.3)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	206, 102				206,102
10.	Matured endowments					
11.	Annuity benefits	24,698				24,698
12.		6,414				6,414
13.	and benefits paid					
	•					6,896
15.	Totals	244,110				244,110
	DETAILS OF WRITE-INS					
	·					
1302.						
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										
year	1	1,000							1	1,000
17. Incurred during current year	4	268,418							4	268,418
Settled during current year:										
18.1 By payment in full	4	206 . 102							4	206.10
18.2 By payment on										
compromised claims	4	206 102							4	206 103
18.4 Reduction by compromise										200, 101
18.5 Amount rejected										
18.6 Total settlements	Λ	206 102							4	206.102
19. Unpaid Dec. 31. current		200, 102								200, 102
year (16+17-18.6)	1	63,316							1	63,316
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior										
year	1,251	552,023,220		(a)		5,016,900			1,251	557,040,120
21. Issued during year	75	42,750,000							75	42,750,000
22. Other changes to in force (Net)										
23. In force December 31 of	1.257			(a)		4.737.400			1.257	578.785.51

 current year
 1,257
 574,048,110
 (a)
 4,737,400
 1,257
 57

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

#### **ACCIDENT AND HEALTH INSURANCE**

	<i>F</i>	ACCIDENT AND	IILALIII III III	VAITOL		
		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)					
	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee		<b>.</b>			
	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



LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF Pennsylvania NAIC Group Code 0028

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	<b>FE INSURANCI</b>	E	NAIC Comp	any Code 72222
		1	2	3	4	5
	DIRECT PREMIUMS	<b>.</b>	Credit Life (Group			
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.		3,044,738		,		-, , -
2.	Annuity considerations	,				75,318
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	3,120,056		102,020		3,222,076
	DIRECT DIVIDENDS TO					
Life ir	POLICYHOLDERS/REFUNDS TO MEMBERS 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	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	807,206				807,206
10.	Matured endowments					
11.	Annuity benefits	288,964				288,964
12.	Surrender values and withdrawals for life contracts	296,901				296,901
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health	3,736				3,736
15.	Totals	1,396,807				1,396,807
	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>

		Ordinary		Credit Life and Individual)		Group		ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND	-	_	No. of	·				· ·	Ū	
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	14	1,447,000							14	1,447,000
Settled during current year:										, ,
18.1 By payment in full	10								10	807,206
18 2 By payment on										
compromised claims										
compromised claims	10	807,206							10	807,206
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	10	807,206							10	807,206
19. Unpaid Dec. 31, current		,								,
year (16+17-18.6)	4	639,794							4	639,794
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	2,915	1, 181, 493, 959		(a)		9,658,700			2,915	1, 191, 152, 659
21. Issued during year	109	49,147,000							109	49,147,000
22 Other changes to in force										
(Net)	(197)	(59,442,665)				(548,900)			(197)	(59,991,56
23. In force December 31 of		=								
current vear	2.827	1.171.198.294	ĺ	(a)	l	9.109.800			2.827	1.180.308.09

current year 2,827 1,171,198,294 (a)

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

#### **ACCIDENT AND HEALTH INSURANCE**

	-	ACCIDENT AND	IILALIII IIIOOI	VAIIOL		
		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)					
	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee		<b>.</b>			
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)				••••••	
25.4					•••••	• • • • • • • • • • • • • • • • • • • •
	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)			1		



DIRECT BUSINESS IN THE STATE OF Rhode Island

DURING THE YEAR 2022 NAIC Company Code 72222

	Group Code 0028	LI	FE INSURANCE			ny Code 72222
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life insurance	7,491,362		2,708,195		10,199,557
2.	Annuity considerations	449,095				449,095
3.	Deposit-type contract funds	8,000	XXX		XXX	8,000
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	7,948,457		2,708,195		10,656,652
Life ir	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS asurance:					
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	,					
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			1,201,800		6,726,394
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	693,382				693,382
13.						
	·	35,006				35,006
15.	Totals	13, 189, 171		1,201,800		14,390,971
	DETAILS OF WRITE-INS					
1301. 1302.						
					······	
	Summary of Line 13 from overflow page					

	(	Ordinary		Credit Life and Individual)		Group		ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND		-	No. of				·	ŭ	Ū	
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year	3	2,211,632			3	200,000			6	2,411,63
year	43	3,915,851			14	1,151,800			57	5,067,65
Settled during current year:										
18.1 By payment in full	39	5.524.594			15	1.201.800			54	6.726.394
18.2 By payment on compromised claims										
18.3 Totals paid	39	5,524,594			15	1,201,800			54	6,726,39
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	39	5.524.594			15	1.201.800			54	6.726.394
19. Unpaid Dec. 31. current										
year (16+17-18.6)	7	602,889			2	150,000			9	752,889
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	0.055	2 024 051 027		(-)		277 177 900			0.056	2 102 120 62
year	9,000	100 600 404		(a)		211, 111,800		•••••	9,000	102, 129,03
21. Issued during year	4 18	102,089,494							4 18	102,089,494
22. Other changes to in force (Net)	(524)	(142,896,548)				(4,007,500)			(524)	(146,904,04
23. In force December 31 of current year	8.949	2.864.744.783		(a)	1	273.170.300			8.950	3.137.915.08

 
 current year
 8,949
 2,864,744,783
 (a)
 1

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

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

#### **ACCIDENT AND HEALTH INSURANCE**

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



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

DURING THE YEAR 2022

NAIC G	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. l	Life insurance	1,162,839		84,335		1,247,17
2. /	Annuity considerations	24,551				24,55
3. [	Deposit-type contract funds		XXX		XXX	
4. (	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	1,187,390		84,335		1,271,72
Life insi						
	Applied to pay renewal premiums					
6.3	endowment or premium-paying period					
6.4	- 1					
Annuitie	,					
7.1 F	Paid in cash or left on deposit					
7.3	Other					
7.4	Totals (Sum of Lines 7.1 to 7.3)					
	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9. [	Death benefits	764,935		174,000		938,93
	Annuity benefits					168,08
		60,511				60,51
15.		993,530		174,000		1,167,53
_	DETAILS OF WRITE-INS					
	, ,					
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					
	<del>-</del>	Cradit Life	<del>-</del>			

		S 12		Credit Life		0				T
		Ordinary		and Individual)		Group		ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND			No. of							
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior	•	07.500								07.500
year	2	37,592							2	37,592
17. Incurred during current year	6	1,239,000			2	174,000			8	1,413,000
Settled during current year:										
18.1 By payment in full	5	764,935			2	174,000			7	938,935
18.2 By payment on		,				,				,
compromised claims										
18.3 Totals paid	5	764,935			2	174,000			7	938,935
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	5	764,935			2	174,000			7	938,935
19. Unpaid Dec. 31, current										
year (16+17-18.6)	3	511,657							3	511,657
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
vear	1 , 178	420,646,289		(a)		8,059,400			1, 178	428,705,689
21. Issued during year	54	20,095,000							54	20,095,000
22 Other changes to in force										
(Net)	(25)	(13,572,324)				37,900			(25)	(13,534,424)
23. In force December 31 of										
current year	1,207	427,168,965		(a)		8,097,300			1,207	435,266,265

(	a) Includes Individual Credit Life I	nsurance prior	year \$	, cui	rrent year \$	 		
	Includes Group Credit Life Insu	urance Loans le	ess than or equa	al to 60 months at issue	, prior year \$	 , curren	t year \$	 
	Loans greater than 60 months	at issue BUT N	NOT GREATER	R THAN 120 MONTHS,	prior year \$	 , curren	tyear\$	 

#### **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	FE INSURANCE	<b>.</b>	NAIC Comp	any Code 72222
	DIDECT DESMUMO	1	2	3	4	5
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1.		27.164	and individual)	587	industriai	
2.	Annuity considerations	27,104				21,10
3.	Deposit-type contract funds		XXX		XXX	
4.						
5.	Totals (Sum of Lines 1 to 4)	27,164		587		27.75
	DIRECT DIVIDENDS TO	,		55.		
l ifa in	POLICYHOLDERS/REFUNDS TO MEMBERS insurance:					
	Paid in cash or left on deposit  Applied to pay renewal premiums					
	Applied to provide paid-up additions or shorten the					
0.5	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	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.						
10.						
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts					
13.	Aggregate write-ins for miscellaneous direct claims					
14.	and some para					
15.	Totals					
	DETAILS OF WRITE-INS					
1301						
1302				•		
1303						
	0					
	. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

		Ordinary		Credit Life and Individual)		Group		ndustrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4	5	6	7	8	9	10
MATURED ENDOWMENTS	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										
year17. 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	22	10 050 060		(-)		EE 600			22	18,115,46
year21. Issued during year	აა	1 200 000		(a)					33	1 200 00
	2	1,300,000							2	1,300,00
22. Other changes to in force (Net)	2	(1.118.000)				64 . 300			2	(1.053.70
23. In force December 31 of						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
current vear	37	18.241.862		(a)		119.900			37	18.361.76

 current year
 37
 18,241,862
 (a)
 119,900
 37

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

#### **ACCIDENT AND HEALTH INSURANCE**

	-	ACCIDENT AND	IILALIII IIIOOI	VAIIOL		
		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)					
	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee		<b>.</b>			
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)				••••••	
25.4					•••••	• • • • • • • • • • • • • • • • • • • •
	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)			1		

(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 Tennessee

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	FE INSURANCE		NAIC Compa	ny Code 72222
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life insurance	934,003		19,636		953,639
2.	Annuity considerations	14 , 140				14,140
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	948,143		19,636		967,779
Life ir 6.1	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS asurance: Paid in cash or left on deposit					
6.2	Applied to pay renewal premiums					
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period  Other					
6.5						
Annu	,					
7.1	Paid in cash or left on deposit					
7.2 7.3	_1.1					
7.4 8.	Totals (Sum of Lines 7.1 to 7.3)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	143,266		34,400		177,666
10.	Matured endowments					
11.	Annuity benefits	14,348				14,348
12.	Surrender values and withdrawals for life contracts	211,214				211,214
13.	and benefits paid					
	· '	766				766
15.	Totals	369,594		34,400		403,994
	DETAILS OF WRITE-INS					
	·					
1302						
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	•			·	ŭ		
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year	1	50,032							1	50,03
17. Incurred during current year	4	245,000			1	34,400			5	279,40
Settled during current year:										
18.1 By payment in full	3	143,266			1	34,400			4	177,66
compromised claims										
18.2 By payment on compromised claims 18.3 Totals paid	3	143,266			1	34,400			4	177,66
18.4 Reduction by compromise										
18.5 Amount rejected			l		L					
18.6 Total settlements	3	143,266			1	34,400			4	177,66
19. Unpaid Dec. 31, current		,				,				,
year (16+17-18.6)	2	151,766							2	151,76
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	994	420,363,038		(a)		2,005,800			994	422,368,83
21. Issued during year	69	32,840,000							69	32,840,00
										,
22. Other changes to in force (Net)	(51)	(14,381,507)				(56,300)			(51)	( 14 , 437 , 80
23. In force December 31 of										
current vear	1.012	438.821.531	l	(a)	1	1.949.500			1.012	440.771.0

 current year
 1,012
 438,821,531
 (a)
 1,949,500
 1,012
 44

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

#### **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2022

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.		10, 181, 973		,		10,574,097
2.	<u> </u>	188,807				188,807
3.			XXX		XXX	
4.						
5.	Totals (Sum of Lines 1 to 4)	10,370,780		392,124		10,762,904
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS asurance:					
	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4						
	,					
Annu	ities:					
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3						
7.4						
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	8,254,533		81,100		8,335,633
10.	Matured endowments					
11.	Annuity benefits	736,605				736,605
12.	Surrender values and withdrawals for life contracts	451,129				451, 129
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health	12, 173				12, 173
15.	Totals	9,454,440		81,100		9,535,540
	DETAILS OF WRITE-INS					
1301.						
1302.						
1303.						
	0 (11) 40 (					
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

	(	Ordinary		Credit Life and Individual)		Group	ı	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	7	1,095,026			2	81,600			9	1, 176, 626
year	39	8,226,786			1	81,100			40	8,307,886
Settled during current year:						,				, ,
18.1 By payment in full	41	8,254,533			1	81,100			42	8,335,633
18.2 By payment on compromised claims										
18.3 Totals paid	41	8 254 533			1	81 100			42	8 335 633
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	41	8 254 533			1	81 100			42	8 335 633
19. Unpaid Dec. 31, current										, , , , , , , , , , , , , , , , , ,
year (16+17-18.6)	5	1,067,279			2	81,600			7	1,148,879
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior										
year	10,601	4,918,951,283		(a)		37,246,600			10,601	4,956,197,883
21. Issued during year	673	349,278,000							673	349,278,000
22. Other changes to in force (Net)					1					
23. In force December 31 of current year	10.612	5.018.564.196		(a)		38.267.000			10.612	5.056.831.196

 current year
 10,612
 5,018,564,196
 (a)
 38,267,000
 10,612
 5,05

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

#### **ACCIDENT AND HEALTH INSURANCE**

	<i>F</i>	ACCIDENT AND	IILALIII III III	VAITOL		
		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)					
	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee		<b>.</b>			
	Other Individual Policies:					
25.1	Non-cancelable (b)					
	Guaranteed renewable (b)					
	Non-renewable for stated reasons only (b)					
	Other accident only				•••••	
	All other (b)					
	Totals (sum of Lines 25.1 to 25.5)					
26.	Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					



DIRECT BUSINESS IN THE STATE OF Utah

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	<b>FE INSURANCE</b>		NAIC Compa	ny Code 72222
	DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
1.	AND ANNUITY CONSIDERATIONS	Ordinary 272.360	and Individual)	Group1.780	Industrial	Total 274 .140
1. 2.		, -		,		274, 140
3.	, , , , , , , , , , , , , , , , , , ,		XXX		XXX	
3. 4.				****		
4. 5.	Totals (Sum of Lines 1 to 4)	272.360				274 146
5.	DIRECT DIVIDENDS TO	272,300		1,780		274,140
Life in	POLICYHOLDERS/REFUNDS TO MEMBERS asurance:					
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	ities:					
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3						
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	2,694				2,694
10.	Matured endowments					
11.		12,897				12,897
12.		730				730
13.	and ponente para					
14.	All other benefits, except accident and health					
15.	Totals	16,321				16,32°
	DETAILS OF WRITE-INS					
1302.						
1303.						
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					, and the second	, and	
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	2,689							1	2,689
17. Incurred during current year	3	103,449							_	103,449
Settled during current year:										
18.1 By payment in full	2	2.694							2	2.694
18.2 By payment on										, -
compromised claims										
compromised claims	2	2,694							2	2,694
18.4 Reduction by compromise			l							
18.5 Amount rejected										
18.6 Total settlements	2	2.694							2	2.694
19. Unpaid Dec. 31, current		, , , ,								_,,
year (16+17-18.6)	2	103,444							2	103,444
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior						1				
vear	342	185,719,734		(a)		168,500			342	185,888,234
21. Issued during year	16	10,565,000								10,565,000
00 04					1					
(Net)	(26)	(17,699,449)				6,300			(26)	(17,693,149
23. In force December 31 of										
current vear	332	178.585.285	l	(a)	I	174.800			332	178.760.08

 current year
 332
 178,585,285
 (a)
 174,800
 332

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

#### **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF Vermont

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	<b>FE INSURANCI</b>	E	NAIC Comp	any Code 72222
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.	Life insurance			853		
2.	Annuity considerations					24,500
3.	Deposit-type contract funds		XXX			
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	470,071		853		470,924
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS issurance:					
6.1						
6.2						
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.5	Totals (Sum of Lines 6.1 to 6.4)					
Annu						
7.1	Paid in cash or left on deposit					
7.2	Applied to provide paid-up annuities					
7.3	Other					
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits					
10.	Matured endowments					
11.	Annuity benefits					
12.	Surrender values and withdrawals for life contracts	403,922				403,922
	Aggregate write-ins for miscellaneous direct claims and benefits paid					
	All other benefits, except accident and health	-				
15.	Totals	1,839,558		55,800		1,895,358
	DETAILS OF WRITE-INS					
1302.						
1303.						
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

	(	Ordinary		Credit Life and Individual)		Group	ı	ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND	•	-	No. of	•		Ŭ	'	Ü		10
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior										
year										
17. Incurred during current year	4	1,420,000			1	55,800			5	1,475,800
Settled during current year:										
18.1 By payment in full	3	1,370,056			1	55,800			4	1,425,856
compromised claims										
18.2 By payment on compromised claims	3	1,370,056			1	55,800			4	1,425,856
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	3	1,370,056			1	55,800			4	1,425,856
19. Unpaid Dec. 31, current						,				, ,
year (16+17-18.6)	1	49,944							1	49,944
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
year	515	192,518,515		(a)		80,800			515	192,599,315
21. Issued during year	20	7,805,000							20	7,805,000
00 00 1 1 1 1										
(Net)	(40)	(6,922,978)				(55,800)			(40)	(6,978,778
23. In force December 31 of	405	100 100 507				05.000			405	100 105 50
current vear	495	193.400.537	I	(a)	1	25.000	l		495	193.425.53

 current year
 495
 193,400,537
 (a)
 25,000
 495
 1

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

#### **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF Virginia

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	FE INSURANCE		NAIC Compar	ny Code 72222
	DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
1.	AND ANNUITY CONSIDERATIONS  Life insurance	Ordinary 2 . 115 . 967	and Individual)	Group 33.814	Industrial	<u>Total</u> 2.149.781
1. 2.		69.320		,		69.320
3.	,	09,320				
4.						
5.	Totals (Sum of Lines 1 to 4)	2,185,287		33.814		2.219.101
0.	DIRECT DIVIDENDS TO	2,105,207		50,014		2,213,101
Life ir	POLICYHOLDERS/REFUNDS TO MEMBERS asurance:					
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	ities:					
7.1	l less					
7.2						
7.3						
7.4	, ,					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.		1,255,807		61,200		1,317,007
10.						
11.		419,895				419,895
12.		43,038				43,038
13.						
14.	, ,					
15.	Totals	1,718,740		61,200		1,779,940
	DETAILS OF WRITE-INS					
1302.						
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	·				, and the second	, and	
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	7,321							1	7,321
17. Incurred during current year	15	1,476,700			2	61,200			17	1,537,900
Settled during current year:										
18.1 By payment in full	13	1,255,807			2	61,200			15	1,317,007
18.2 By payment on compromised claims										
compromised claims										
18.3 Lotals paid	13	1,255,807			2	61,200			15	1,317,007
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	13	1,255,807			2	61,200			15	1,317,007
19. Unpaid Dec. 31, current										
year (16+17-18.6)	3	228,214							3	228,214
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior					1 Olloics					
year	2 . 142	1.064.855.202		(a)		3.201.300			2 . 142	1.068.056.502
21. Issued during year	123	65.200.000		()		.,,,,			123	65.200.000
					l l					
(Net)	(100)	(43, 199, 908)				21,500			(100)	(43, 178, 408
23. In force December 31 of										
current vear	2.165	1.086.855.294		(a)	I	3.222.800			2.165	1.090.078.094

 current year
 2,165
 1,086,855,294
 (a)
 3,222,800
 2,165
 1,0

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

#### **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF Washington

DURING THE YEAR 2022

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.		2,387,687				2,530,134
2.		83.700				, ,
3.	,					
4.						
5.	Totals (Sum of Lines 1 to 4)	2.471.387		142.447		2,613,834
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS surance:					
6.1						
	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
	Totals (Sum of Lines 6.1 to 6.4)					
Annui						
7.1	Paid in cash or left on deposit					
7.2						
7.3						
7.4	Totals (Sum of Lines 7.1 to 7.3)					
8.	Grand Totals (Lines 6.5 plus 7.4)					
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	1 973 321		125 000		2 098 32
10.						
11.	[**·	46.016				46.016
12.		356,372				356,372
13.	Aggregate write-ins for miscellaneous direct claims					,
14.	All other benefits, except accident and health	5,291				5,29 <sup>-</sup>
15.	Totals	2,381,000		125,000		2,506,000
	DETAILS OF WRITE-INS					
1301.						
1302.						
1303.						
1398.	0 (11 40 (					
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	•	•	· ·	·	ŭ	Ū	
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	8	1,710,218							8	1,710,218
17. Incurred during current year	8	808 , 150			1	125,000			9	933, 150
Settled during current year:										
18.1 By payment in full	15	1.973.321			1	125.000			16	2.098.32
18.2 By payment on compromised claims										
18.3 Totals paid	15	1,973,321			1	125,000			16	2,098,32
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	15	1 973 321			1	125 000			16	2 098 32
19. Unpaid Dec. 31. current										,,,,,,
year (16+17-18.6)	1	545,047							1	545,047
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior	2 650	1 270 425 000		(a)	4	12 /07 721			2 650	1 202 012 62
year21. Issued during year	∠,000	100 041 000		(a)		13,467,731			2,009	100 041 00
00 00 1 1 1										
22. Other changes to in force (Net)	(177)	(65,992,345)				(7,500)			(177)	(65,999,84
23. In force December 31 of current year	2 658	1.322.274.555		(a)	1	13.480.231			2.659	1.335.754.78

 current year
 2,658
 1,322,274,555
 (a)
 1
 13,480,231
 2,659
 1,33

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

#### **ACCIDENT AND HEALTH INSURANCE**

	•	COUDEIN / UID		V 1110E		
		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		<b>.</b>			
	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)			1		l



DIRECT BUSINESS IN THE STATE OF West Virginia NAIC Group Code 0028

DURING THE YEAR 2022 NAIC Company Code 72222

NAIC	Group Code 0028	LI	<b>FE INSURANCE</b>	<b>E</b>	NAIC Compa	any Code 72222
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1.		112.072	and individual)			112.072
2.	Annuity considerations					
3.			XXX			
4.						
5.	Totals (Sum of Lines 1 to 4)	118.672				118.672
	DIRECT DIVIDENDS TO	,				,
	POLICYHOLDERS/REFUNDS TO MEMBERS insurance:					
6.1						
6.2	11 12 1					
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.5						
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	299,000				299,000
10.	Matured endowments					
11.	Annuity benefits	20,893				20,893
12.	Surrender values and withdrawals for life contracts	220,971				220,971
13.	Aggregate write-ins for miscellaneous direct claims and benefits paid					
14.	All other benefits, except accident and health					
15.	Totals	540,864				540,864
	DETAILS OF WRITE-INS					
1303						
1399	. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

		. r		Credit Life		0				T
		Ordinary		and Individual)		Group		ndustrial		Total
DIRECT DEATH	1	2	3	4	5	6	7	8	9	10
BENEFITS AND			No. of							
MATURED	No. of		Ind.Pols.				No. of		No. of	
ENDOWMENTS	Pols. &		& Gr.		No. of		Pols. &		Pols. &	
INCURRED	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
16. Unpaid December 31, prior	0	000 000								000 000
year	2	299,000							2	299,000
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full	2	299,000							2	299,000
18.2 By payment on										
compromised claims										
18.3 Totals paid	2	299.000							2	299.000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	2	299,000								299,000
19. Unpaid Dec. 31, current										
year (16+17-18.6)										
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
vear	119	43,291,000		(a)					119	43,291,000
21. Issued during year	4	1,000,000								1,000,000
22. Other changes to in force										
(Net)	(2)	(901,000)							(2)	(901,000)
23. In force December 31 of	40.	40.000.000							40:	40.000.000
current year	121	43,390,000		(a)					121	43,390,000

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

#### **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF Wisconsin

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	<b>FE INSURANCE</b>		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.		599,029		18,134		617,163
2.	Annuity considerations	16,000				16,000
3.	Deposit-type contract funds		XXX		XXX	
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	615,029		18,134		633,163
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS issurance:					
6.1						
	Applied to pay renewal premiums					
	endowment or premium-paying period					
Annui	, ,					
7.1	Paid in cash or left on deposit					
7.2						•••••
7.3	_11					
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	699.000				
10.	Matured endowments					
11.		3.148				3.148
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	702,148				702,148
	DETAILS OF WRITE-INS					
1302.						
1303.						
1398.	Summary of Line 13 from overflow page					
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

				Credit Life		•				
		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	5	699,000							5	699,000
Settled during current year:										
18.1 By payment in full	5	699,000							5	699,000
18.2 By payment on										
compromised claims										
18.3 Totals paid	5	699,000							5	699,000
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements	5	699,000							5	699,000
19. Unpaid Dec. 31, current										
year (16+17-18.6)										
					No. of					
POLICY EXHIBIT					Policies					
20. In force December 31, prior										
vear	768	315, 262, 185		(a)		1,716,800			768	316,978,985
21. Issued during year	32	17,250,000							32	17,250,000
22. Other changes to in force										
(Net)	(51)	(15,096,676)				(428,500)			(51)	(15,525,176)
23. In force December 31 of	740	047 445 500				4 000 000			740	040 700 000
current year	749	317,415,509		(a)		1,288,300			749	318,703,809

#### **ACCIDENT AND HEALTH INSURANCE**

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



DIRECT BUSINESS IN THE STATE OF Wyoming

DURING THE YEAR 2022

NAIC	Group Code 0028	LI	FE INSURANCE		NAIC Compa	ny Code 72222
	DIDECT DESMITIMO	1	2	3	4	5
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1.	Life insurance			Gloup		
2.						
3.	_ : : : : : : : : : : : : : : : : : : :					
4.	, ,,					
5.	Totals (Sum of Lines 1 to 4)	60.958				60.958
	DIRECT DIVIDENDS TO	,				,
	POLICYHOLDERS/REFUNDS TO MEMBERS					
Life ir	surance:					
6.1						
6.2						
6.3	Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4	Other					
6.5	- · · · · - · · · · · · · · · · · · · ·					
Annu	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					840
12.	Surrender values and withdrawals for life contracts	33,584				33,584
13.						
14.						
15.	Totals	34,424				34,424
	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	1	Credit Life and Individual)		Group		Industrial		Total
DIRECT DEATH BENEFITS AND	1	2	3 No. of	4	5	6	7	8	9	10
MATURED ENDOWMENTS INCURRED	No. of Pols. &	Amazint	Ind.Pols. & Gr.	Amazint	No. of	Amazunt	No. of Pols. &	Amazint	No. of Pols. &	Amazunt
16. Unpaid December 31, prior	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount	Certifs.	Amount
year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior										
year21. Issued during year	56	30,108,999		(a)					56	30,108,99
21. Issued during year	3	1,350,000							3	1,350,00
22. Other changes to in force (Net)	4	3,085,000								3,085,00
23. In force December 31 of current year	63	34.543.999		(a)					63	34.543.99

 current year
 63
 34,543,999
 (a)
 63

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

#### **ACCIDENT AND HEALTH INSURANCE**

	-	CODEIL AIL	IILALIII IIIOOI	VAIIOL		
		1	2	3	4	5
				Policyholder Dividends		
				Paid, Refunds to		
			Direct Premiums	Members or Credited		Direct Losses
		Direct Premiums	Earned	on Direct Business	Direct Losses Paid	Incurred
24.	Group Policies (b)					
24.1	Federal Employees Health Benefits Plan premium (b)					
24.2	Credit (Group and Individual)					
24.3	Collectively renewable policies/certificates (b)					
	Medicare Title XVIII exempt from state taxes or fee					
	Other Individual Policies:					
25 1	Non-cancelable (b)					
	Guaranteed renewable (b)				•••••	
	Non-renewable for stated reasons only (b)					
	Other accident only					
	All other (b)					
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



LIFE INSURANCE

DIRECT BUSINESS IN THE STATE OF Grand Total

NAIC Group Code 0028

DURING THE YEAR 2022 NAIC Company Code 72222

, ., .,	0.04p 0040 0020				1 to the Comp	any code 1 LLLL
	DIRECT PREMIUMS	1	2 Credit Life (Group	3	4	5
	AND ANNUITY CONSIDERATIONS	Ordinary	and Individual)	Group	Industrial	Total
1.		103,804,832		, - ,		110,726,442
2.	Annuity considerations					
3.		8,000	XXX		XXX	8,000
4.	Other considerations					
5.	Totals (Sum of Lines 1 to 4)	107,726,174		6,921,610		114,647,784
	DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life in	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	<u>-</u>					
Annui	,					
7.1	Paid in cash or left on deposit					
7.2						
7.3	21.1					
7.4	<b> </b>					
8.	Grand Totals (Lines 6.5 plus 7.4)					
0.	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits	50 770 777		A 521 075		64 202 652
10.	Matured endowments			1 ' '		, ,
11.	Annuity benefits					
12.						
13.	Aggregate write-ins for miscellaneous direct claims	12,000,900				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
14.		313.094				040.004
	Totals	93,338,563		4,531,875		97,870,438
	DETAILS OF WRITE-INS	00,000,000		4,001,070		07,070,400
1301						
1302.						
	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	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	92	16,229,494			12	1,066,800			104	17,296,294
year	422	57,938,283			40	3,977,900			462	61,916,183
Settled during current year:										
18.1 By payment in full	420	59.770.777			44	4.531.875			464	64.302.652
18.2 By payment on compromised claims										
18.3 Totals paid	420	59,770,777			44	4,531,875			464	64,302,652
18.4 Reduction by compromise										
18.5 Amount rejected			l							
18.6 Total settlements	420	59.770.777			44	4.531.875			464	64.302.652
19. Unpaid Dec. 31, current		,				, , , ,				, , ,
year (16+17-18.6)	94	14,397,000			8	512,825			102	14,909,825
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior					_					
year	110, 142	46,684,100,368		(a)	2	683,733,431			110, 144	47, 367, 833, 799
21. Issued during year	6, 140	3,204,475,107							6, 140	3,204,475,107
22. Other changes to in force (Net)	(6,817)	(2,228,710,345)				2,594,800			(6,817)	(2,226,115,545
23. In force December 31 of current year	109.465	47.659.865.130		(a)	2	686.328.231			109.467	48.346.193.361

 current year
 109,465
 47,659,865,130
 (a)
 2
 686,328,231
 109,467
 48,3

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

#### **ACCIDENT AND HEALTH INSURANCE**

	<i>F</i>	ACCIDENT AND	IILALIII III III	VAITOL		
		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)					
	Collectively renewable policies/certificates (b)					
24.4	Medicare Title XVIII exempt from state taxes or fee		<b>.</b>			
	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

24.GT

## FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

#### INTEREST MAINTENANCE RESERVE

		1 Amount
1.	Reserve as of December 31, Prior Year	11,427,441
2.	Current year's realized pre-tax capital gains/(losses) of \$	(5,116,559)
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)	6,310,882
5.	Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)	1,440,683
6.	Reserve as of December 31, current year (Line 4 minus Line 5)	4,870,199

#### AMORTIZATION

		1	2	3	4
	Year of Amortization	Reserve as of December 31, Prior Year	Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	Balance Before Reduction for Current Year's Amortization (Cols. 1 + 2 + 3)
1.	2022	1,700,404	(259,721)		1,440,683
2.	2023	1,529,375	(662,216)		867, 159
3.	2024	1,371,805	(645,933)		725,872
4.	2025	1,154,674	(537,610)		617,064
5.	2026	952,704	(427,279)		525,425
6.	2027	756,761	(311,826)		444,935
7.	2028	533,599	(239,887)		293,712
8.	2029	390,891	(217,796)		173,095
9.	2030	305 , 163	(193,597)		111,566
10.	2031	245,451	(167,653)		77,798
11.	2032	239,114	(141,288)		97,826
12.	2033	242,703	(125,119)		117,584
13.	2034	241,251	(117,587)		123,664
14.	2035	228,611	(110,707)		117,904
15.	2036	218,473	(101,414)		117,059
16.	2037	209,421	(95,259)		114,162
17.	2038	193,772	(88,836)		104,936
18.	2039	179,940	(86,071)		93,869
19.	2040	166,073	(84,336)		81,737
20.	2041		(81,334)		67,019
21.	2042	121,436	(78, 180)		43,256
22.	2043	98,254	(71,760)		26,494
23.	2044	73,504	(64,068)		9,436
24.	2045	51,733	(53,201)		(1,468)
25.	2046		(44,295)		(10,463)
26.	2047	21,917	(34,305)		(12,388)
27.	2048	13,506	(26,538)		(13,032)
28.	2049	,	(21,122)		(15,645)
29.	2050	-,	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		(15,407)
30.	2051	(513)	, , ,		(9,720)
31.	2052 and Later	(\$13)	(3,250)		(3,250)
32.	Total (Lines 1 to 31)	11,427,441	(5,116,559)		6,310,882

## **ASSET VALUATION RESERVE**

		Default Component			Equity Component		
	1	2	3	4	5 Real Estate and	6	7
	Other Than Mortgage Loans	Mortgage Loans	Total (Cols. 1 + 2)	Common Stock	Other Invested Assets	Total (Cols. 4 + 5)	Total Amount (Cols. 3 + 6)
Reserve as of December 31, prior year	3,675,388	826,752	4,502,141	13,172,848	14,303,014	27,475,862	31,978,002
Realized capital gains/(losses) net of taxes - General Account				(2,641,757)	(30,362).	(2,672,119)	(2,672,119)
Realized capital gains/(losses) net of taxes - Separate Accounts							
Unrealized capital gains/(losses) net of deferred taxes - General Account				(13,083,512)	(3,012,934).	(16,096,446)	(16,096,446)
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	671,638	123,910	795,549				795,549
8. Accumulated balances (Lines 1 through 5 - 6 + 7)	4,347,027	950,663	5,297,689	(2,552,421)	11,259,718	8,707,297	14,004,986
9. Maximum reserve	3,779,257	611,852	4,391,108	8,297,490	17,958,342	26,255,832	30,646,940
10. Reserve objective	2,057,683	469,869	2,527,552	8,294,772	17,958,342	26,253,115	28,780,666
11. 20% of (Line 10 - Line 8)	(457,869)	(96, 159)	(554,028)	2,169,439	1,339,725	3,509,164	2,955,136
12. Balance before transfers (Lines 8 + 11)	3,889,158	854,504	4,743,662	(382,983)	12,599,443	12,216,460	16,960,122
13. Transfers				382,983	(382,983).		
14. Voluntary contribution							
15. Adjustment down to maximum/up to zero	(109,901)	(242,652)	(352,553)				(352,553)
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	3,779,257	611,852	4,391,109		12,216,460	12,216,460	16,607,569

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

	DEI AGET COMPONENT										
		1	2	3	4	Basic (	Contribution	Reserv	e Objective	Maximu	um Reserve
					Balance for	5	6	7	8	9	10
Line NAI			Reclassify		AVR Reserve						•
Num- Design		Book/Adjusted	Related Party	Add Third Party	Calculations		Amount		Amount		Amount
ber natio	l l	Carrying Value	Encumbrances	Encumbrances	(Cols. 1 + 2 + 3)	Factor	(Cols.4 x 5)	Factor	(Cols. 4 x 7)	Factor	(Cols. 4 x 9)
	LONG-TERM BONDS										
1.	Exempt Obligations		XXX	XXX	178,381,916	0.0000		0.0000		0.0000	
2.1 1	NAIC Designation Category 1.A	427,069,813	XXX	XXX	427,069,813	0.0002	85,414	0.0007	298,949	0.0013	555 , 191
2.2 1	NAIC Designation Category 1.B	131,803,609	XXX	XXX		0.0004	52,721	0.0011	144,984	0.0023	303 , 148
2.3 1	NAIC Designation Category 1.C	4,999,965	XXX	XXX	4,999,965	0.0006	3,000	0.0018	9,000	0.0035	17,500
2.4 1	NAIC Designation Category 1.D		XXX	XXX		0.0007	12,943	0.0022	40,677	0.0044	81,354
2.5 1	NAIC Designation Category 1.E		XXX	XXX		0.0009	29,873	0.0027	89,618	0.0055	182,554
2.6 1	NAIC Designation Category 1.F	64,447,694	XXX	XXX	64,447,694	0.0011	70,892	0.0034	219, 122	0.0068	438,244
2.7 1	NAIC Designation Category 1.G	71,596,082	XXX	XXX	71,596,082	0.0014	100,235	0.0042	300,704	0.0085	608,567
2.8	Subtotal NAIC 1 (2.1+2.2+2.3+2.4+2.5+2.6+2.7)	751,598,320	XXX	XXX	751,598,320	XXX	355,078	XXX	1,103,053	XXX	2,186,558
3.1 2	NAIC Designation Category 2.A		XXX	XXX.	88,423,983	0.0021	185,690	0.0063	557,071	0.0105	928,452
3.2 2	NAIC Designation Category 2.B	49,470,551	XXX	XXX		0.0025	123,676	0.0076	375,976	0.0127	628,276
3.3 2	NAIC Designation Category 2.C	1.998.392	XXX	XXX	1.998.392	0.0036	7.194	0.0108	21.583	0.0180	35.971
3.4	Subtotal NAIC 2 (3.1+3.2+3.3)	139,892,926	XXX	XXX	139,892,926	XXX	316,561	XXX	954,630	XXX	1,592,699
4.1 3	NAIC Designation Category 3.A	,,.	XXX	XXX		0.0069	, , ,	0.0183		.0.0262	
4.2 3	NAIC Designation Category 3.B		XXX	XXX		0.0099		0.0264		0.0377	
4.3 3	NAIC Designation Category 3.C			XXX		0.0131		0.0350		0.0500	
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		0.0184		0.0430		0.0615	
5.2 4	NAIC Designation Category 4.B		XXX	XXX		0.0238		0.0555		0.0793	
5.3 4	NAIC Designation Category 4.C			XXX		0.0310		0.0724		0.1034	
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		0.0472		0.0846		0.1410	
6.2 5	NAIC Designation Category 5.B			XXX		0.0663		0.1188		0.1980	
6.3 5	NAIC Designation Category 5.C			XXX		0.0836		0.1498		0.2496	
6.4	Subtotal NAIC 5 (6.1+6.2+6.3)		XXX	XXX		XXX		XXX		XXX	
7. 6	NAIC 6		XXX	XXX		0.0000		0.2370		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)	1.069.873.162	XXX	XXX	1.069.873.162	XXX	671.638	XXX	2.057.683	XXX	3.779.257
9.	PREFERRED STOCKS	1,003,073,102	^^^	^^^	1,009,073,102	^^^	071,000	^^^	2,007,000	^^^	5,115,251
10. 1	Highest Quality		XXX	XXX		0.0005		0.0016		0.0033	
11. 2	High Quality		XXX	XXX		0.0021		0.0064		0.0106	
12. 3	Medium Quality		XXX	XXX		0.0021		0.0263		0.0376	
13. 4	Low Quality		XXX	XXX		0.0245		0.0572		0.0376	
13. 4	Lower Quality		XXX	XXX		0.0630		0.1128		0.1880	
15. 6	In or Near Default		XXX	XXX		0.0000		0.2370		0.2370	
16.	Affiliated Life with AVR		XXX	XXX		0.0000		0.0000		0.0000	
17.	Total Preferred Stocks (Sum of Lines 10 through 16)		XXX	XXX		XXX		XXX			
17.	Total Preferred Stocks (Sum of Lines To through 16)		XXX	XXX		XXX		XXX		XXX	

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

BLI AGET COMPONENT												
			1	2	3	4	Basic (	Contribution	Reserv	ve Objective	Maximu	ım Reserve
						Balance for	5	6	7	8	9	10
Line	NAIC			Reclassify		AVR Reserve						
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)
		SHORT-TERM BONDS										
18.		Exempt Obligations		XXX		2,935,721	0.0000		0.0000		0.0000	
19.1	1	NAIC Designation Category 1.A		XXX	XXX		0.0002		0.0007		0.0013	
19.2	1	NAIC Designation Category 1.B					0.0004		0.0011		0.0023	
19.3	1	NAIC Designation Category 1.C			XXX		0.0006		0.0018		0.0035	
19.4	1	NAIC Designation Category 1.D		XXX			0.007		0.0022		0.0044	
19.5	1	NAIC Designation Category 1.E		XXX			0.0009		0.0027		0.0055	
19.6	1	NAIC Designation Category 1.F		XXX	XXX		0.0011		0.0034		0.0068	
19.7	1	NAIC Designation Category 1.G		XXX	XXX		0.0014		0.0042		0.0085	
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	2	NAIC Designation Category 2.A		XXX	XXX		0.0021		0.0063		0.0105	
20.2	2	NAIC Designation Category 2.B		XXX	XXX		0.0025		0.0076		0.0127	
20.3	2	NAIC Designation Category 2.C		XXX	XXX		0.0036		0.0108		0.0180	
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		0.0069		0.0183		0.0262	
21.2	3	NAIC Designation Category 3.B			XXX		0.0099		0.0264		0.0377	
21.3	3	NAIC Designation Category 3.C			XXX		0.0131		0.0350		0.0500	
21.4	J	Subtotal NAIC 3 (21.1+21.2+21.3)		XXX	XXX		XXX		XXX		XXX	
22.1	4	NAIC Designation Category 4.A			XXX		0.0184		0.0430		0.0615	
22.1	4	NAIC Designation Category 4.B			XXX		0.0238		0.0555		0.0793	
22.2	4	NAIC Designation Category 4.6		XXX	XXX		0.0310		0.0724		0.1034	
	4	NAIC Designation Category 4.C					XXX					
22.4	-	Subtotal NAIC 4 (22.1+22.2+22.3)		XXX	XXX XXX		0.0472		XXX 0.0846		XXX 0.1410	
23.1	5	NAIC Designation Category 5.A		XXX			0.0472		0.0846		0. 1410	
23.2	5	NAIC Designation Category 5.B			XXX		0.0836					
23.3	5	NAIC Designation Category 5.C							0.1498		0.2496	
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	
25.		Total Short-Term Bonds (18+19.8+20.4+21.4+22.4+23.4+24)	2,935,721	XXX	XXX	2,935,721	XXX		XXX		XXX	
		DERIVATIVE INSTRUMENTS										
26.		Exchange Traded		XXX	XXX		0.0005		0.0016		0.0033	
27.	1	Highest Quality		XXX	XXX		0.0005		0.0016		0.0033	
28.	2	High Quality		XXX	XXX		0.0021		0.0064		0.0106	
29.	3	Medium Quality		XXX	XXX		0.0099		0.0263		0.0376	
30.	4	Low Quality		XXX	XXX		0.0245		0.0572		0.0817	
31.	5	Lower Quality		XXX	XXX		0.0630		0.1128		0.1880	
32.	6	In or Near Default		XXX	XXX		0.0000		0.2370		0.2370	
33.		Total Derivative Instruments		XXX	XXX		XXX		XXX		XXX	<del></del>
34.		Total (Lines 9 + 17 + 25 + 33)	1,072,808,883	XXX	XXX	1,072,808,883	XXX	671,638	XXX	2,057,683	XXX	3,779,257

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

					I AOLI O	CIVII CIVEI						
			1	2	3	4	Basic C	Contribution	Reserve	Objective	Maximu	m Reserve
						Balance for	5	6	7	8	9	10
Line	NAIC			Reclassify		AVR Reserve						
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)
		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		0.0069		0.0200		0.0257	
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			XXX		0.0015		0.0034		0.0046	
42.		Commercial Mortgages - Insured or Guaranteed			XXX		0.0003		0.0007		0.0011	
43.		Commercial Mortgages - All Other - CM1 - Highest Quality	45.506.610		XXX	45.506.610	0.0011	50.057	0.0057	259.388	0.0074	336.749
44.		Commercial Mortgages - All Other - CM2 - High Quality					0.0040	73.853	0.0114	210.481	0.0149	275 . 103
45.		Commercial Mortgages - All Other - CM3 - Medium Quality .	, ,				0.0069		0.0200		0.0257	
46.		Commercial Mortgages - All Other - CM4 - Low Medium										
		Quality			XXX		0.0120		0.0343		0.0428	
47.		Commercial Mortgages - All Other - CM5 - Low Quality			XXX		0.0183		0.0486		0.0628	
		Overdue. Not in Process:										
48.		Farm Mortgages			XXX		0.0480		0.0868		0.1371	
49.		Residential Mortgages - Insured or Guaranteed					0.0006		0.0014		0.0023	
50.		Residential Mortgages - All Other					0.0029		0 0066		0.0103	
51.		Commercial Mortgages - Insured or Guaranteed			XXX		0.0006		0.0014		0.0023	
52.		Commercial Mortgages - All Other					0.0480		0.0868		0.1371	
02.		In Process of Foreclosure:										
53.		Farm Mortgages			XXX		0.0000		0.1942		0.1942	
54.		Residential Mortgages - Insured or Guaranteed					0.0000		0.0046		0.0046	
55.		Residential Mortgages - All Other					0.0000		0 0149		0.0149	
56.		Commercial Mortgages - Insured or Guaranteed			XXX		0.0000		0.0046		0.0046	
57.		Commercial Mortgages - All Other			XXX		0.0000		0.1942		0.1942	
57. 58.		Total Schedule B Mortgages (Sum of Lines 35 through 57)	63.969.885		XXX	63.969.885	XXX	123.910	XXX	469.869	XXX	611.852
			00,505,000			00,808,000	0.0034	120,910	0.0114	403,009	0.0149	011,032
59.		Schedule DA Mortgages	00 000 005		XXX	00,000,000		100 010		400.000		014 050
60.		Total Mortgage Loans on Real Estate (Lines 58 + 59)	63,969,885		XXX	63,969,885	XXX	123,910	XXX	469,869	XXX	611,852

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE AMICA LIFE INSURANCE COMPANY

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

			1	2	3	4	Basic Co	ontribution	Reserve (	Objective	Maximum Reserve	
Line Num-	Desig-		Book/Adjusted	Reclassify Related Party	Add Third Party	Balance for AVR Reserve Calculations	5	6 Amount	7	8 Amount	9	10 Amount
ber	nation		Carrying Value	Encumbrances	Encumbrances	(Cols. 1 + 2 + 3)	Factor	(Cols.4 x 5)	Factor	(Cols. 4 x 7)	Factor	(Cols. 4 x 9)
		COMMON STOCK										
1.		Unaffiliated - Public		XXX		65,690,713	0.0000			8,290,168		8,290,16
2.		Unaffiliated - Private		XXX	XXX		0.0000		0.1945		0.1945	
3.		Federal Home Loan Bank	754,800	XXX		754,800	0.0000			4,604	0.0097	7,3
4.		Affiliated - Life with AVR		XXX	XXX		0.0000		0.0000		0.0000 .	
		Affiliated - Investment Subsidiary:										
5.		Fixed Income - Exempt Obligations										
6.		Fixed Income - Highest Quality					XXX				XXX	
7.		Fixed Income - High Quality					XXX				XXX	
8.		Fixed Income - Medium Quality					XXX				XXX	
9.		Fixed Income - Low Quality					XXX				XXX	
10.		Fixed Income - Lower Quality					XXX				XXX	
l1.		Fixed Income - In/Near Default					XXX		XXX		XXX	
12.		Unaffiliated Common Stock - Public					0.0000		0.1262 (a)		0.1262 (a)	
13.		Unaffiliated Common Stock - Private					0.0000		0.1945		0.1945	
14.		Real Estate					(b)		(b)		(b)	
15.		Affiliated - Certain Other (See SVO Purposes and Procedures Manual)		XXX	xxx		0.0000		0.1580		0.1580	
16.		Affiliated - All Other		XXX	XXX		0.0000		0.1945		0.1945	
17.		Total Common Stock (Sum of Lines 1 through 16)	66,445,513			66,445,513	XXX		XXX	8,294,772	XXX	8,297,4
		REAL ESTATE					0.0000		2 2040		0.0040	
18.		Home Office Property (General Account only)					0.0000		0.0912		0.0912	
19.		Investment Properties					0.0000		0.0912		0.0912	
20.		Properties Acquired in Satisfaction of Debt					0.0000		0.1337		0.1337	
21.		Total Real Estate (Sum of Lines 18 through 20)					XXX		XXX		XXX	
		OTHER INVESTED ASSETS INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS										
22.		Exempt Obligations		XXX	XXX		0.0000				0.0000 .	
23.	1	Highest Quality			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		0.0099		0.0263		0.0376	
26.	4	Low Quality		XXX	XXX		0.0245		0.0572		0.0817	
27.	5	Lower Quality		XXX	XXX		0.0630		0.1128		0.1880	
28.	6	In or Near Default		XXX	XXX		0.0000		0.2370		0.2370	
29.		Total with Bond Characteristics (Sum of Lines 22 through 28)		XXX	XXX		XXX		XXX		XXX	

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

				AND OTH	HER INVESTED ASSET COMPONENT								
			1	2	3	4	Basic C	Contribution	Reserv	e Objective	Maximu	m Reserve	
						Balance for	5	6	7	8	9	10	
Line				Reclassify		AVR Reserve							
Num-			Book/Adjusted	Related Party	Add Third Party	Calculations		Amount	_	Amount		Amount	
ber	nation	Description	Carrying Value	Encumbrances	Encumbrances	(Cols. 1 + 2 + 3)	Factor	(Cols.4 x 5)	Factor	(Cols. 4 x 7)	Factor	(Cols. 4 x 9)	
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS											
		OF PREFERRED STOCKS											
30.	1	Highest Quality		XXX	XXX		0.0005		0.0016		0.0033		
31.	2	High Quality		XXX	XXX		0.0021		0.0064		0.0106		
32.	3	Medium Quality		XXX	XXX		0.0099		0.0263		0.0376		
33.	4	Low Quality		XXX	XXX		0.0245		0.0572		0.0817		
34.	5	Lower Quality		XXX	XXX		0.0630		0.1128		0.1880 .		
35.	6	In or Near Default		XXX	XXX		0.0000		0.2370		0.2370		
36.		Affiliated Life with AVR		XXX	XXX		0.0000		0.0000		0.0000		
37.		Total with Preferred Stock Characteristics (Sum of Lines 30		1001			1001		1001		1004		
		through 36)		XXX	XXX		XXX		XXX		XXX		
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS											
		OF MORTGAGE LOANS											
		In Good Standing Affiliated:					0 0044		0.0057		0.0074		
38.		Mortgages - CM1 - Highest Quality			XXX		0.0011		0.0057		0.0074		
39.		Mortgages - CM2 - High Quality			XXX		0.0040		0.0114		0.0149		
40.		Mortgages - CM3 - Medium Quality Mortgages - CM4 - Low Medium Quality			XXX		0.0069		0.0200		0.0257		
41.		Mortgages - CM4 - Low Medium Quality			XXX		0.0120		0.0343		0.0428		
42.		Mortgages - CM5 - Low Quality			XXX		0.0183		0.0486		0.0628		
43.		Residential Mortgages - Insured or Guaranteed					0.0003		0.0007		0.0011		
44.		Residential Mortgages - All Other			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:					0.0400		0.0000		0.4074		
46.		Farm Mortgages					0.0480		0.0868		0.1371		
47.		Residential Mortgages - Insured or Guaranteed			XXX		0.0006		0.0014		0.0023		
48.		Residential Mortgages - All Other			XXX		0.0029		0.0066 0.0014		0.0103		
49.		Commercial Mortgages - Insured or Guaranteed			XXX		0.0006		0.0014		0.0023		
50.		Commercial Mortgages - All Other			XXX		0.0480		0.0868		0.1371		
		In Process of Foreclosure Affiliated:			2001		0.0000		0 . 1942		0.1942		
51.		Farm Mortgages			XXX		0.0000		0.046		0.1942		
52.		Residential Mortgages - Insured or Guaranteed			XXXXXX		0.0000		0.0149		0.0046		
53.		Residential Mortgages - All Other					0.0000		0.0149		0.0149		
54.		Commercial Mortgages - Insured or Guaranteed			XXX		0.0000		0.1942		0.1942		
55.		Commercial Mortgages - All Other											
56.		Total Affiliated (Sum of Lines 38 through 55)			XXX		XXX		XXX		XXX		
57.		Unaffiliated - In Good Standing With Covenants			XXX		(c)		(c)		(c)		
58.		Unaffiliated - In Good Standing Defeased With Government Securities			XXX		0.0011		0.0057		0.0074		
50		Unaffiliated - In Good Standing Primarily Senior					0.0011		0.0114		0.0149		
59.		Unaffiliated - In Good Standing Primarily Senior			XXX		0.0040		0.0114		0.0149		
60. 61.		Unaffiliated - In Good Standing All Other			XXXXXX		0.0069		0.0200		0.0257		
61. 62.		Unaffiliated - Overdue, Not in Process					0.0000		0.1942		0.1942		
		l -			XXX								
63.		Total Unaffiliated (Sum of Lines 57 through 62)			XXX		XXX		XXX		XXX		
64.		Total with Mortgage Loan Characteristics (Lines 56 + 63)			XXX		XXX		XXX		XXX		

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

			1	2	3	4	Basic C	Contribution	Reserve	e Objective	Maximu	m Reserve
						Balance for	5	6	7	8	9	10
Line	NAIC		D = =1./A =1:=4==1	Reclassify	Add Third Down	AVR Reserve Calculations		A		A 4		Amount
Num- ber	Desig- nation	Description	Book/Adjusted Carrying Value	Related Party Encumbrances	Add Third Party Encumbrances	(Cols. 1 + 2 + 3)	Factor	Amount (Cols.4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	(Cols. 4 x 9)
bei	папоп	INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS	Carrying value	Encumbrances	Eliculibrances	(COIS. 1 + 2 + 3)	Facioi	(COIS.4 X 3)	Factor	(COIS. 4 X 7)	Facioi	(COIS. 4 X 9)
		OF COMMON STOCK										
65.		Unaffiliated Public		XXX	VVV		0.0000		0.1580 (a)		0.1580 (a)	
66.		Unaffiliated Private		XXX	· · · · · · · · · · · · · · · · · · ·		0.0000		0.1360 (a) 0.1945		0.1360 (a) .	
67.		Affiliated Life with AVR		XXX	XXX		0.0000		0.0000		0.0000	
68.		Affiliated Certain Other (See SVO Purposes & Procedures										
00.		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		7000	7000		0.0000		0.1010		01.10.10	
		through 69)		XXX	XXX		XXX		XXX		XXX	
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS										
		OF REAL ESTATE										
71.		Home Office Property (General Account only)					0.0000		0.0912		0.0912	
72.		, , ,					0.0000		0.0912		0.0912	
73		Properties Acquired in Satisfaction of Debt					0.0000		0.1337		0.1337	
74.		Total with Real Estate Characteristics (Sum of Lines 71 through									11.000	
		73)					XXX		XXX		XXX	
		LOW INCOME HOUSING TAX CREDIT INVESTMENTS										
75.		Guaranteed Federal Low Income Housing Tax Credit					0.0003		0.0006		0.0010	
76.		Non-guaranteed Federal Low Income Housing Tax Credit					0.0063		0.0120		0.0190	
77.		Guaranteed State Low Income Housing Tax Credit					0.0003		0.0006		0.0010	
78.		Non-guaranteed State Low Income Housing Tax Credit					0.0063		0.0120		0.0190	
79.		All Other Low Income Housing Tax Credit					0.0273		0.0600		0.0975	
80.		Total LIHTC (Sum of Lines 75 through 79)					XXX		XXX		XXX	
		RESIDUAL TRANCHES OR INTERESTS										
81.		Fixed Income Instruments - Unaffiliated		XXX	XXX		0.0000 .		0.1580		0 . 1580	
82.		Fixed Income Instruments - Affiliated					0.0000 .		0.1580		0 . 1580	
83.		Common Stock - Unaffiliated		XXX	XXX		0.0000		0 . 1580		0 . 1580	
84.		Common Stock - Affiliated		XXX			0.0000		0 . 1580		0 . 1580	
85.		Preferred Stock - Unaffiliated		XXX	XXX		0.0000		0 . 1580		0 . 1580	
86.		Preferred Stock - Affiliated		XXX	XXX		0.0000 .		0 . 1580		0 . 1580	
87.		Real Estate - Unaffiliated					0.0000 .		0.1580		0 . 1580	
88.		Real Estate - Affiliated					0.0000 .		0.1580		0 . 1580	
89.		Mortgage Loans - Unaffiliated		XXX	XXX		0.0000 .		0.1580		0 . 1580	
90.		Mortgage Loans - Affiliated		XXX	XXX		0.0000 .		0 . 1580		0 . 1580	
91.		Other - Unaffiliated		XXX	XXX		0.0000 .		0 . 1580		0 . 1580	
92.		Other - Affiliated		XXX	XXX		0.0000		0.1580		0.1580	
93.		Total Residual Tranches or Interests (Sum of Lines 81 through							1001		1001	
		92)					XXX		XXX		XXX	
		ALL OTHER INVESTMENTS										
94.		NAIC 1 Working Capital Finance Investments		XXX			0.0000		0.0042		0.0042	
95.		NAIC 2 Working Capital Finance Investments		XXX			0.0000		0.0137		0.0137	
96.		Other Invested Assets - Schedule BA	113,660,395	XXX		113,660,395	0.0000		0.1580	17,958,342	0.1580	17,958,342
97.		Other Short-Term Invested Assets - Schedule DA	440.000.000	XXX		440.000.000	0.0000		0.1580	/= asa - : -	0.1580	47 AFA 7 17
98.		Total All Other (Sum of Lines 94, 95, 96 and 97)	113,660,395	XXX		113,660,395	XXX		XXX	17,958,342	XXX	17,958,342
99.		Total Other Invested Assets - Schedules BA & DA (Sum of Lines				110 000 005	VVV		V///	47 000 040	VVV	47 050 040
	ĺ	29, 37, 64, 70, 74, 80, 93 and 98)	113,660,395			113,660,395	XXX		XXX	17,958,342	XXX	17,958,342

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

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

<sup>(</sup>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

## NONE

Schedule H - Part 1 - Analysis of Underwriting Operations

NONE

Schedule H - Part 2 - Reserves and Liabilities

NONE

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

NONE

Schedule H - Part 4 - Reinsurance

NONE

Schedule H - Part 5 - Health Claims

NONE

Schedule S - Part 1 - Section 1

NONE

Schedule S - Part 1 - Section 2

NONE

## **SCHEDULE S - PART 2**

Poincurance Pocoverable on Paid and Unnaid Losses	Listed by Reinsuring Company as of December 31. Current Year
Nelligulative Necoverable off Faid and Offbaid Losses	LISTER DA L'EUROUIUR COUIDAIN AS OF DECEUDE 31. CALLEUR LEAF

1	2	3	A	5 5	6	7
NAIC	2	3	4	3	0	į
Company	ID	Effective		Domiciliary		
Code	Number	Date	Name of Company	Jurisdiction	Paid Losses	Unpaid Losses
		Annuity - U.S. A		Julisalction	1 ald Losses	Oripaid Losses
		Annuity - Non-U				
		nnuity - Affilia				
66346	58-0828824	10/11/2013	Munich American Reassurance Company	GA		
66346	58-0828824	09/01/2015	Munich American Reassurance Company	GA		275,625
		09/01/2020	Munich American Reassurance Company		, .	91,250
		09/01/2020	Optimum Re Insurance Company	TX		108, 150
			RGA Reinsurance Company			336,875
	75-6020048	04/01/2004	Scor Global Life Americas Reinsurance Company		. , .	2,840,450
	75-6020048	05/01/2009	Scor Global Life Americas Reinsurance Company			264,600
		10/31/2011	Scor Global Life Americas Reinsurance Company	DE		180,000
	75-6020048	10/10/2013	Scor Global Life Americas Reinsurance Company	DE		131,200
97071		09/01/2015	Scor Global Life USA Reinsurance Company			315,000
		09/01/2020	Scor Global Life Americas Reinsurance Company	DE	20,360	111,650
82627		07/29/1988	Swiss Re Life & Health America, Inc.	MO		2,500
82627	06-0839705	01/01/1996	Swiss Re Life & Health America, Inc.	MO		1,500,000
82627		09/19/1997	Swiss Re Life & Health America, Inc.			417,000
	06-0839705	05/03/1999	Swiss Re Life & Health America, Inc.	MO		40,000
82627	06-0839705	06/15/2000	Swiss Re Life & Health America, Inc.		133,297	
82627	06-0839705	07/10/2010	Swiss Re Life & Health America, Inc.	MO	79,061	176,300
82627	06-0839705	05/13/2013	Swiss Re Life & Health America, Inc.	MO		
82627	06-0839705	09/01/2020	Swiss Re Life & Health America, Inc.	MO	20,360	153,450
66133	41-1760577	08/01/2008	Wilton Reassurance Company	MN		22,500
0899999. Li	ife and Annuit	y - U.S. Non-A	ffiliates	'	1.320.048	8.292.700
		nnuity - Non-A			1,320,048	8,292,700
	otal Life and A				1,320,048	8,292,700
		and Health - U	S. Affiliatos		1,020,040	0,202,700
			on-U.S. Affiliates			
		and Health - A				
		and Health - N	on-Affiliates			
	otal Accident					
			0899999, 1499999 and 1999999)		1,320,048	8,292,700
2499999. To	otal Non-U.S.	(Sum of 06999	999, 0999999, 1799999 and 2099999)			
l						
[						
[						
9999999 To	otals - Life, An	nuity and Accid	dent and Health		1,320,048	8,292,700
		-		•	•	

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

		Reinsu	rance Ceded Life Insurance, Annuities, Deposit Funds and	Other Lia	bilities Without	Life or Disabi	lity Contingencies,	and Related Ber	nefits Listed by R	einsuring Compa	ny as of Decem	ber 31, Current	Year	
1	2	3	4	5	6	7	8	Reserve Cr	edit Taken	11	Outstanding S	Surplus Relief	14	15
				Domi-				9	10		12	13		
NAIC				ciliary	Type of	Type of							Modified	Funds Withheld
Company	ID	Effective		Juris-	Reinsurance	Business	Amount in Force						Coinsurance	Under
Code	Number	Date	Name of Company	diction	Ceded	Ceded	at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Reserve	Coinsurance
			uthorized U.S. Affiliates											
			uthorized Non-U.S. Affiliates											
			uthorized Affiliates											
82627			Swiss Re Life & Health America, Inc.	MO	YRT/I	OL	5,408,553	93,847	85,252	40,538				
82627			Swiss Re Life & Health America, Inc.	MO	YRT/I	OL	631,000	448	406	8,022				
82627				MO	0/1	OL	275,000	9,594	8,909	10,054				
82627			,	MO	YRT/IYRT/I	OL	356,567	7,862	7,008	5,069				
82627				MO	YRT/I	0L	100,000	5,637 121.131	5,131 90.311					
82627	06-0839705			MO		OL		8.914		9. 181				
82627				MO		01	19.055.000	160 429	164.757	269.680				
82627				MO		OL	500.000	14 .848		5.880				
82627				MO		0L	12,450,000	67,231	85,756	126, 195				
82627				MO		OL		4,616,790	5,220,918	1,340,832				
82627	06-0839705	06/15/2000 .	Swiss Re Life & Health America, Inc.	MO		XXXL		15,207,791	16,011,108	2,097,934				
82627		03/01/1979 .		MO		0L	50,000		528	1,239				
82627			01100 10 2110 4 104111 11101 104,	MO	YRT/I	0L		1,916	1,916	5,340				
82627				MO	YRT/I	0L		24,896	26,449					
82627				MO	00/1	XXXL		3,474,575	3,548,373	342,631				
82627				MO		XXXL		31,995,308	30,000,763	2, 153, 208				
82627 82627				MO	YRT/I	0L	34,446,900	95,574 10.230	112,487	254 , 357				
82627	06-0839705			MO	YRT/I	OL	36,329,113		8,936 9,988	15,494				
82627				MO	YRT/I	XXXL	1.515.233.764	504 .584		356.743				
82627				MO		XXXL	36.502.050	131.200	240,400	63.431				
65676			Lincoln National Life Insurance Company	IN	YRT/1	OL	4.798.502	990	2,143					
66133				MN		XXXL		11,918,750	12,065,264	1,024,228				
16535				NY	CAT/G	0L				28,750				
66346		01/01/1998 .		GA	YRT/G	0L	119, 182,600			323,585				
66346				GA	00/I	XXXL	1, 117, 216, 709	23,191,583	21, 115, 116	1,653,665				
66346				GA	0/1	XXXL		32,155,621	25,897,498	4,316,525				
66346				GA	YRT/I	XXXL		510,687	181,008	318, 185				
66346			Munich American Reassurance Company	GA	CO/I	XXXLXXXL	36,502,050	131,200	24,208,228	63,431				
93572		09/01/2015 . 11/16/2022 .	RGA Reinsurance Company	MO		XXXL	48.669.400	28,948,550	24,208,228	4, 194, 935				
64688		04/01/2004 .	Scor Global Life Americas Reinsurance Company	DF			4,034,839,686		50,709,350	5,522,602				
64688	75-6020048			DE		XXXL	2.405.721.189		51.641.608	3.934.210				
64688			Scor Global Life Americas Reinsurance Company			XXXL	1.988.800.360			2.906.992				
64688	75-6020048	10/10/2013 .	Scor Global Life Americas Reinsurance Company	DE		XXXL		26,289,914	23,882,528	2, 113, 723				
64688	75-6020048	08/04/2014 .	Scor Global Life Americas Reinsurance Company	DE	YRT/I	0L		21,470	24,263	236				
97071		09/01/2015 .	Scor Global Life USA Reinsurance Company	DE	00/I			37,033,634	31,389,916	4,917,520				
97071			Scor Global Life USA Reinsurance Company		YRT/I	XXXL		423,141	154,033	276,226				
88099			Optimum Re Insurance Company		YRT/I	XXXL		102,137	43,381	65,360				
21113				DE	CAT/G	0L								
			zed U.S. Non-Affiliates				29,011,237,643	361,754,177	338,453,399	38,978,551				
			uthorized Non-Affiliates				29,011,237,643	361,754,177	338,453,399	38,978,551				
	Total General						29,011,237,643	361,754,177	338,453,399	38,978,551				
			nauthorized U.S. Affiliates nauthorized Non-U.S. Affiliates											
			nauthorized Non-U.S. Affiliates nauthorized Affiliates											
			nauthorized Amiliates nauthorized Non-Affiliates											
	Total General													
			ertified U.S. Affiliates											
			ertified Non-U.S. Affiliates											
			ertified Affiliates											
			ertified Non-Affiliates											
0 <u>2</u> 33333.	, Juli Jellelal	, .500ant - Ot	oranioa i tori 7 tililiatos				1						l	

## **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

_		Remsu	rance Ceded Life Insurance, Annuities, Deposit Funds and C	Juner Lia	billiles without	Life of Disabil	ity Contingencies,			einsuring Compa	iny as of Decem	ber 31, Current	rear	
1	2	3	4	5	6	7	8	Reserve Cre	edit Taken	11	Outstanding S	Surplus Relief	14	15
				Domi-				9	10		12	13		
NAIC				ciliary	Type of	Type of							Modified	Funds Withheld
Company	ID	Effective		Juris-	Reinsurance	Business	Amount in Force						Coinsurance	Under
Code	Number	Date	Name of Company	diction	Ceded	Ceded	at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Reserve	Coinsurance
3399999.	Total General	Account Cer	tified											
3699999.	Total General	Account - Re	eciprocal Jurisdiction U.S. Affiliates											
3999999.	Total General	Account - Re	eciprocal Jurisdiction Non-U.S. Affiliates											
4099999.	Total General	Account - Re	eciprocal Jurisdiction Affiliates											
4399999.	Total General	Account - Re	eciprocal Jurisdiction Non-Affiliates											
4499999.	Total General	Account Red	ciprocal Jurisdiction											
4599999.	Total General	Account Aut	horized, Unauthorized, Reciprocal Jurisdiction and Certified				29,011,237,643	361,754,177	338,453,399	38,978,551				
4899999.	Total Separate	e Accounts -	Authorized U.S. Affiliates											
5199999.	Total Separate	e Accounts -	Authorized Non-U.S. Affiliates											
5299999.	Total Separate	e Accounts -	Authorized Affiliates											
5599999.	Total Separate	e Accounts -	Authorized Non-Affiliates											
5699999.	Total Separate	e Accounts A	Authorized											
5999999.	Total Separate	e Accounts -	Unauthorized U.S. Affiliates											
6299999.	Total Separate	e Accounts -	Unauthorized Non-U.S. Affiliates											
6399999.	Total Separate	e Accounts -	Unauthorized Affiliates											
6699999.	Total Separate	e Accounts -	Unauthorized Non-Affiliates											
6799999.	Total Separate	e Accounts L	Inauthorized											
7099999.	Total Separate	e Accounts -	Certified U.S. Affiliates											
			Certified Non-U.S. Affiliates											
7499999.	Total Separate	e Accounts -	Certified Affiliates											
7799999.	Total Separate	e Accounts -	Certified Non-Affiliates											
7899999.	Total Separate	e Accounts C	Certified											
			Reciprocal Jurisdiction U.S. Affiliates											
8499999.	Total Separate	e Accounts -	Reciprocal Jurisdiction Non-U.S. Affiliates											
			Reciprocal Jurisdiction Affiliates											
			Reciprocal Jurisdiction Non-Affiliates											
			Reciprocal Jurisdiction											
			authorized, Unauthorized, Reciprocal Jurisdiction and Certified								-			
91999999.			9, 0899999, 1499999, 1999999, 2599999, 3099999, 3699999, 41999	99, 489 <del>9</del> 9	99, 5399999, 599	9999, 6499999,								
			999 and 8699999)				29,011,237,643	361,754,177	338,453,399	38,978,551				
92999999.			99999, 0999999, 1799999, 2099999, 2899999, 3199999, 3999999, 42	299999, 5	199999, 549 <u>9</u> 999	, 6299999,								
		99999, 7699	999, 8499999 and 8799999)											
9999999 -	· Totals						29,011,237,643	361,754,177	338,453,399	38,978,551				

Schedule S - Part 3 - Section 2

## NONE

Schedule S - Part 4

NONE

Schedule S - Part 4 - Bank Footnote

NONE

Schedule S - Part 5

NONE

Schedule S - Part 5 - Bank Footnote

NONE

## **SCHEDULE S - PART 6**

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

	1		O Omitted)			
		1 2022	2 2021	3 2020	4 2019	5 2018
	A. OPERATIONS ITEMS					
1.	Premiums and annuity considerations for life and accident and health contracts	38,979	41,990	42,769	43,060	40,903
2.	Commissions and reinsurance expense allowances	7,899	8,486	10,866	11,276	11,075
3.	Contract claims	25,629	30 , 757	17,382	24,986	22,207
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	23,301	23,054	29,672	30,535	28,569
	B. BALANCE SHEET ITEMS					
8.	Premiums and annuity considerations for life and accident and health contracts deferred and uncollected	3,982	3,757	3,682	4,292	4,077
9.	Aggregate reserves for life and accident and health contracts	361,754	338 , 453	315,399	285,727	255, 192
10.	Liability for deposit-type contracts					
11.	Contract claims unpaid	8,813	10 , 151	7,642	4,649	3,854
12.	Amounts recoverable on reinsurance	1,320	4,453	517	1,051	3,856
13.	Experience rating refunds due or unpaid					284
14.	Policyholders' dividends and refunds to members (not included in Line 10)					
15.	Commissions and reinsurance expense allowances due	903	750	781	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 for Ceded Reinsurance

	Restatement of Balance Sheet to Identify Net Credi	1	e2	3
		As Reported (net of ceded)	Restatement Adjustments	Restated (gross of ceded)
ASSE	TS (Page 2, Col. 3)			
	and invested assets (Line 12)	1,344,392,599		1,344,392,599
2. Reinst	urance (Line 16)	2,222,904	(2,222,904)	
3. Premi	ums and considerations (Line 15)	35,971,836	3,981,578	39,953,414
4. Net cr	edit for ceded reinsurance	xxx	368,808,204	368,808,204
5. All oth	er admitted assets (balance)	50,658,556		50,658,556
6. Total a	assets excluding Separate Accounts (Line 26)	1,433,245,895	370,566,878	1,803,812,773
7. Separa	ate Account assets (Line 27)			
8. Total a	assets (Line 28)	1,433,245,895	370,566,878	1,803,812,773
LIABII	LITIES, CAPITAL AND SURPLUS (Page 3)			
	act reserves (Lines 1 and 2)	880, 185,325	361,754,178	1,241,939,503
	ty for deposit-type contracts (Line 3)			
	reserves (Line 4)			
	holder dividends/member refunds/reserves (Lines 5 through 7)			
	um & annuity considerations received in advance (Line 8)			
	contract liabilities (Line 9)			
	urance in unauthorized companies (Line 24.02 minus inset amount)			
16. Funds	held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset unt)			
17. Reinst	urance with Certified Reinsurers (Line 24.02 inset amount)			
	held under reinsurance treaties with Certified Reinsurers (Line 24.03 inset amount)			
	er liabilities (balance)			74,576,081
20. Total I	iabilities excluding Separate Accounts (Line 26)	1,067,365,001	370,566,878	1,437,931,879
21. Separa	ate Account liabilities (Line 27)			
•	iabilities (Line 28)		370,566,878	1.437.931.879
	al & surplus (Line 38)		XXX	365,880,894
·	iabilities, capital & surplus (Line 39)	1,433,245,895	370,566,878	1,803,812,773
	CREDIT FOR CEDED REINSURANCE	1, 100, = 10, 100		.,,
	act reserves	361 754 178		
	reserves			
	holder dividends/reserves			
_	um & annuity considerations received in advance			
	ty for deposit-type contracts			
	contract liabilities			
	urance ceded assets			
	ceded reinsurance recoverables			
	ceded reinsurance recoverables			
	ums and considerations			
	urance in unauthorized companies			
	held under reinsurance treaties with unauthorized reinsurers			
	urance with Certified Reinsurers			
	held under reinsurance treaties with Certified Reinsurers			
	ceded reinsurance payables/offsets	2 22/ 572		
	ceded reinsurance payable/offsets			
41. Total r	net credit for ceded reinsurance	368,808,204		

## **SCHEDULE T - PART 2**

## **INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN**

Allocated by States and Territories

Direct Business Only

			Allocated by	States and Term		siness Only		
			1 Life	2 Annuities	3 Disability Income	4 Long-Term Care	5	6
	States, Etc.		(Group and Individual)	(Group and Individual)	(Group and Individual)	(Group and Individual)	Deposit-Type Contracts	Totals
1.	Alabama		231,028	7,000				238,028
2.	Alaska		54,095					54,095
3.	Arizona		1,357,669	305,711				1,663,380
4.	Arkansas		118,450	7,000				
5.	California	-	6,297,622	80,821				6,378,443
6.	Colorado		2,334,142	60,147				2,394,289
7.	Connecticut		8,804,736	209,794				1
8.	Delaware		302,242	100				· · · · · · · · · · · · · · · · · · ·
9.	District of Columbia		376,985					376,985
10.	Florida		5,998,532	306,113				, , ,
11.	Georgia		4,901,233	99,711				5,000,944
12.	Hawaii		52,428					· · · · · · · · · · · · · · · · · · ·
13.	ldaho		243,437					
14.	Illinois		1,713,161	29,362				1,742,523
15.	Indiana		625,110	100				625,210
16.	lowa		146,268					146,268
17.	Kansas		180 , 190					180 , 190
18.	Kentucky		412,027					1
19.	Louisiana		295,630	32,100				,
20.	Maine		886,020	51,250				937,270
21.	Maryland		2,470,507	33,719				2,504,226
22.	Massachusetts		14,030,700	648,785				14,679,485
23.	Michigan		1,057,709	6,300				, , , -
24.	Minnesota		881,687	6,300				, -
25.	Mississippi		136,994	720				- ,
26.	Missouri		396,326	1,800				,
27.	Montana		95,406					95,406
28.	Nebraska		147,776	600				148,376
29.	Nevada		435,405	11,380				ĺ ,
30.	New Hampshire			315,034				
31.	New Jersey		4,437,327	155,707				4,593,034
32.	New Mexico		332,974	3,300				
33.	New York		7,919,176	467,721				1
34.	North Carolina		4,860,531	67,480				· · · · · ·
35.	North Dakota		20,723					
36.	Ohio		1,406,294	45,656				
37.	Oklahoma		196,765	7 000				1
38.	Oregon		1, 153,718	7,600				
39.	Pennsylvania		3,146,758	75,318				·
40.	Rhode Island		10,199,557	449,095			8,000	
41.	South Carolina							
42.	South Dakota		27,751	14 140				1
43.	Tennessee		953,639	14,140				1
44.	Texas			188,807				
45.	Utah		274,140	24 500				<u> </u>
46.	Vermont		446,424					l ·
47.	Virginia		2,149,781	69,320				
48.	Washington			83,700				
49.	West Virginia							, , , , , , , , , , , , , , , , , , ,
50.	Wisconsin		617, 163	16,000				633, 163
51.	Wyoming							,
52.	American Samoa							
53.	Guam							
54.	Puerto Rico							
55.	U.S. Virgin Islands							
56.	Northern Mariana Islands							
57.	Canada							
58.	Aggregate Other Alien	UΤ	110 700 440	0.040.040			0.000	444 047 704
59.	Total		110,726,442	3,913,342	l .		8,000	114,647,784

## 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
											Type	If			
											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	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)	*
. 0028	Amica Mutual Insurance Company	19976	05-0348344				Amica Mutual Insurance Company	RI	UDP					NO	
. 0028	Amica Mutual Insurance Company	72222	05-0340166				Amica Life Insurance Company	RI	RE	Amica Mutual Insurance Company	Ownership	100.000	Amica Mutual Insurance Company	NO	
							Amica Property and Casualty Insurance								
	Amica Mutual Insurance Company		26-0115568				Company	RI		Amica Mutual Insurance Company	Ownership		Amica Mutual Insurance Company	NO	
. 0028	Amica Mutual Insurance Company	00000	05-0430401				Amica General Agency, LLC.	RI	NI A	Amica Mutual Insurance Company	Ownership	100.000	Amica Mutual Insurance Company	NO	
				l									1	1	l

_							
	Asterisk			EX <sub>2</sub>	a e	1	
		 	 <i>J</i>				

## **SCHEDULE Y**

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

				• • • • • • • • • • • • • • • • • • • •			110110 11		·· · · · —	.,		
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/
					Loans, Securities,	Guarantees or		(Disbursements)		Activity Not in the		(Payable) on
NAIC					Real Estate,	Undertakings for	Management	Incurred Under		Ordinary Course of		Losses and/or
Company	ID	Names of Insurers and Parent.	Shareholder	Capital	Mortgage Loans or	the Benefit of any	Agreements and	Reinsurance		the Insurer's		Reserve Credit
Code	Number	Subsidiaries or Affiliates	Dividends	Contributions	Other Investments	Affiliate(s)	Service Contracts	Agreements	*	Business	Totals	Taken/(Liability)
19976	. 05-0348344	. Amica Mutual Insurance Company		(27,000,000)		,a.c(c)	18,195,573				(16,385,503)	
72222	05-0040044	. Amica Life Insurance Company	1,000,000	27,000,000			(5,844,891)				21, 155, 109	(03,017,302)
		. Allifea Life insurance company	·····	27,000,000			(5,044,091)				21, 155, 109	
12287	. 26-0115568	. Amica Property and Casualty Insurance										
		Company					(10,444,805)					69,817,582
	05-0430401	. Amica General Agency, LLC	(1,800,000)				(1,905,877)				(3,705,877)	
9999999 Cc	ontrol Totals	-							XXX			
0000000000	millor rotalo								^^^			

## **SCHEDULE Y**

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

PART 3 - ULTIMATE CONTROL	LLING PARTY AND LISTING OF O	THER U.S. INS	URANC	E GROUI	PS OR ENTITIES UNDER	THAT ULTIMATE CONTROLLING	PARTY'S CON	NIKOL
1	2	3	4		5	6	7	8
			Granted					Granted
			Disclaimer					Disclaimer
			of Control\					of Control\
			Affiliation of					Affiliation of
		Ownership	Column 2				Ownership	Column 5
		Percentage	Over				Percentage	Over
		Column 2 of	Column 1			U.S. Insurance Groups or Entities Controlled	(Column 5 of	Column 6
Insurers in Holding Company	Owners with Greater Than 10% Ownership	Column 1	(Yes/No)		Ultimate Controlling Party	by Column 5	Column 6)	(Yes/No)
Amica Mutual Insurance Company	Amica Mutual Insurance Company	100.000		. Amica Mutual	Insurance Company	N/A		. NO
Amica Life Insurance Company	Amica Mutual Insurance Company		NO		Insurance Company	N/A		NO
Amica Property and Casualty Insurance Company	Amica Mutual Insurance Company	100.000	NO	Amica Mutual	Insurance Company	N/A		NO
				-				
				-				
				.				

## SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

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

questioi	is	Responses
	MARCH FILING	
1.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
3.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	YES
4.	Will an actuarial opinion be filed by March 1?	YES
	APRIL FILING	
5.	Will Management's Discussion and Analysis be filed by April 1?	YES
6.	Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies)	YES
7.	Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
	JUNE FILING	
8.	Will an audited financial report be filed by June 1?	YES
9.	Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES
suppler specific	SUPPLEMENTAL FILINGS  owing supplemental reports are required to be filed as part of your annual statement filing if your company is engaged in the type of business nent. However, in the event that your company does not transact the type of business for which the special report must be filed, your responsinterrogatory 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 whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.  MARCH FILING	nse of NO to the
10.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? (Not applicable to fraternal benefit societies)	NO
11.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
12.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
13.	Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	NO
14.	Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	YES
15.	Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?	YES
16.	Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1?	NO
17.	Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1?	NO
18.	Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
19.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
20.	Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1?	NO
21.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
22.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
23.	Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?	YES
24.	Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?	NO

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? .....

N0

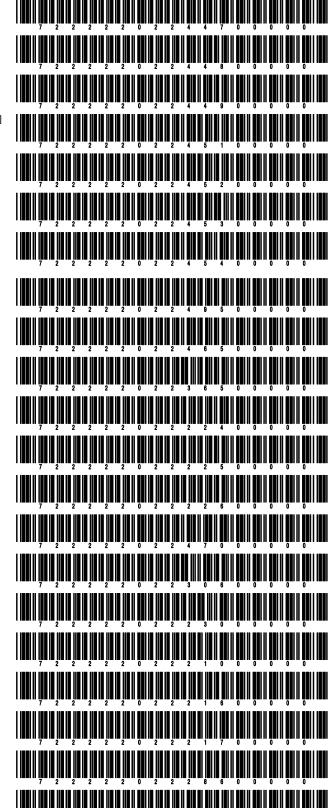
## SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

26.	NAIC by March 1?		NO
27.	Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities by March 1?	be filed with the state of domicile and electronically with the NAIC by	NO
28.	Will the Worker's Compensation Carve-Out Supplement be filed by March 1? (N	lot applicable to fraternal benefit societies)	NO
29.	Will Supplemental Schedule O be filed with the state of domicile and the NAIC b		NO
30.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile	•	NO
31.	Will an approval from the reporting entity's state of domicile for relief related to the electronically with the NAIC by March 1?	ne five-year rotation requirement for lead audit partner be filed	NO
32.	Will an approval from the reporting entity's state of domicile for relief related to the electronically with the NAIC by March 1?	he one-year cooling off period for independent CPA be filed	NO
33.	Will an approval from the reporting entity's state of domicile for relief related to the NAIC by March 1?	he Requirements for Audit Committees be filed electronically with the	NO
34.	Will the VM-20 Reserves Supplement be filed with the state of domicile and the	•	YES
35.	Will the Health Care Receivables Supplement be filed with the state of domicile	•	NO
36.	APRIL FILII Will the confidential Regulatory Asset Adequacy Issues Summary (RAAIS) requi	ired by the Valuation Manual be filed with the state of domicile by	VEC
37.	April 1?		YES NO
38.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile ar		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 sta		NO
41.	Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense April 1?		NO
42.	Will the confidential Actuarial Memorandum required by Actuarial Guideline XXX	• •	YES
43. 44.	Will the Supplemental Term and Universal Life Insurance Reinsurance Exhibit be Will the Variable Annuities Supplement be filed with the state of domicile and the	e NAIC by April 1?	YES NO
45.	Will the confidential Executive Summary of the PBR Actuarial Report be filed with	th the state of domicile by April 1?	SEE EXPLANAT
46.	Will the confidential Life Summary of the PBR Actuarial Report be filed with the		
47.	Will the confidential Variable Annuities Summary of the PBR Actuarial Report be AUGUST FIL		NO
48.	Will Management's Report of Internal Control Over Financial Reporting be filed v Explanations:	with the state of domicile by August 1?	SEE EXPLANAT
12. 13. 16. 17. 18. 19. 20. 21. 22. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 35. 37. 38. 39. 40. 41. 44. 44.	Not Required 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]		
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]		
18.	Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 445]		

 Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 446]

#### SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

- 20. Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI [Document Identifier 447]
- 21. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI [Document Identifier 448]
- Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) [Document Identifier 449]
- 24. C-3 RBC Certifications Required Under C-3 Phase II [Document Identifier 451]
- Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities [Document Identifier 452]
- 26. Modified Guaranteed Annuity Model Regulation [Document Identifier 453]
- Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities [Document Identifier 454]
- 28. Workers' Compensation Carve-Out Supplement [Document Identifier 495]
- 29. Supplemental Schedule O [Document Identifier 465]
- 30. Medicare Part D Coverage Supplement [Document Identifier 365]
- 31. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]
- Relief from the one-year cooling off period for independent CPA [Document Identifier 225]
- 33. Relief from the Requirements for Audit Committees [Document Identifier 226]
- 35. Health Care Receivables Supplement [Document Identifier 470]
- 37. Long-Term Care Experience Reporting Forms [Document Identifier 306]
- 38. Credit Insurance Experience Exhibit [Document Identifier 230]
- 39. Accident and Health Policy Experience Exhibit [Document Identifier 210]
- 40. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]
- 41. Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217]
- 44. Variable Annuities Supplement [Document Identifier 286]
- 47. Variable Annuities Summary of the PBR Actuarial Report [Document Identifier 459]



## **OVERFLOW PAGE FOR WRITE-INS**

Additional Write-ins for Assets Line 25

Addition	ai White-ins for Assets Line 25				
			Current Year		
		1	2	3	4
				Net Admitted Assets	Net Admitted
		Assets	Nonadmitted Assets	(Cols. 1 - 2)	Assets
2504.	Prepaid retired life reserve	528,723	528,723		
2597.	Summary of remaining write-ins for Line 25 from overflow page	528,723	528,723		

Additional Write-ins for Summary of Operations Line 53

		1	2
		Current Year	Prior Year
5304.	Miscellaneous surplus adjustment	1,953,802	398,333
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	1,953,802	(3,965,394)

## VM-20 Reserves Supplement - Part 1A NONE

VM-20 Reserves Supplement - Part 1B

## VM-20 RESERVES SUPPLEMENT - PART 2

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

1. Has the company been allowed a Life PBR Exemption from the reserve requirements of VM-20 of the Valuation Manual by their state of domicile?  2. If the response to Question 1 is "Yes", then check the source of the "Life PBR Exemption" definition? (Check either 2.1, 2.2 or 2.3)  2.1 NAIC Adopted VM [ 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?  b. If the answer to "a" above is "Yes", provide the criteria the state has used to allow the Life PBR Exemption (e.g., Group/Legal Entity criteria) and the minimum reserve requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS NAIC VM):  2.3 State Regulation [ ] Complete items "a" and "b" as appropriate.  a. Is the criteria in the State Regulation different from the NAIC adopted VM?  4. Yes [ ] No [ ]  b. If the answer to "a" above is "Yes", provide the criteria of the state's Life PBR Exemption that the company has met and the minimum reserve requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS NAIC VM):  3. If the criteria for the "Life PBR Exemption" is the same as or substantially similar to the NAIC adopted VM (i.e., Question 2.1 is checked or Question 2.2 a is "No") then provide the most recent year that the company filed a statement of exemption that was allowed. If such calendar year is not the current calendar year for this statement, also provide confirmation that the company meets the criteria for utilizing an ongoing statement of exemption, meaning that none of the following apply:  1) the company fails to meet either of the conditions in VM Section II, Subsection 1.G.2, 2) the policies exempted contain those in VM Section II, Subsection 1.G.3, or 3) the domiciliary commissioner contacted the company prior to Sept. 1 and notified them that the statement of exemption was not all		Life PBR Exemption as defined in the NAIC adopted Valuation Manual (VM)				
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?	1.		Yes [	( ] N	No [	]
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?	2.	If the response to Question 1 is "Yes", then check the source of the "Life PBR Exemption" definition? (Check either 2.1, 2.2 or 2.3)				
a. Is the criteria in the State Statute (SVL) different from the NAIC adopted VM?		2.1 NAIC Adopted VM [ X ]				
b. If the answer to "a" above is "Yes", provide the criteria the state has used to allow the Life PBR Exemption (e.g., Group/Legal Entity criteria) and the minimum reserve requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS NAIC VM):  2.3 State Regulation [ ] Complete items "a" and "b" as appropriate. a. Is the criteria in the State Regulation different from the NAIC adopted VM?		2.2 State Statute (SVL) [ ] Complete items "a" and "b" as appropriate.				
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?		a. Is the criteria in the State Statute (SVL) different from the NAIC adopted VM?	Yes [	]	No [	]
a. Is the criteria in the State Regulation different from the NAIC adopted VM?		and the minimum reserve requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the				
<ul> <li>b. If the answer to "a" above is "Yes", provide the criteria of the state's Life PBR Exemption that the company has met and the minimum reserve requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS NAIC VM):</li> <li>3. If the criteria for the "Life PBR Exemption" is the same as or substantially similar to the NAIC adopted VM (i.e., Question 2.1 is checked or Question 2.2 a is "No" or Question 2.3 a is "No"), then provide the most recent year that the company filed a statement of exemption that was allowed. If such calendar year is not the current calendar year for this statement, also provide confirmation that the company meets the criteria for utilizing an ongoing statement of exemption, meaning that none of the following apply: <ol> <li>the company fails to meet either of the conditions in VM Section II, Subsection 1.G.2,</li> <li>the policies exempted contain those in VM Section II, Subsection 1.G.3, or</li> <li>the domiciliary commissioner contacted the company prior to Sept. 1 and notified them that the statement of exemption was not allowed:</li> </ol> </li> </ul>	2.3	State Regulation [ ] Complete items "a" and "b" as appropriate.				
requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS NAIC VM):  3. If the criteria for the "Life PBR Exemption" is the same as or substantially similar to the NAIC adopted VM (i.e., Question 2.1 is checked or Question 2.2.a is "No" or Question 2.3.a is "No"), then provide the most recent year that the company filed a statement of exemption that was allowed. If such calendar year is not the current calendar year for this statement, also provide confirmation that the company meets the criteria for utilizing an ongoing statement of exemption, meaning that none of the following apply:  1) the company fails to meet either of the conditions in VM Section II, Subsection 1.G.2, 2) the policies exempted contain those in VM Section II, Subsection 1.G.3, or 3) the domiciliary commissioner contacted the company prior to Sept. 1 and notified them that the statement of exemption was not allowed:		a. Is the criteria in the State Regulation different from the NAIC adopted VM?	Yes [	]	No [	]
Question 2.2.a is "No" or Question 2.3.a is "No"), then provide the most recent year that the company filed a statement of exemption that was allowed. If such calendar year is not the current calendar year for this statement, also provide confirmation that the company meets the criteria for utilizing an ongoing statement of exemption, meaning that none of the following apply:  1) the company fails to meet either of the conditions in VM Section II, Subsection 1.G.2, 2) the policies exempted contain those in VM Section II, Subsection 1.G.3, or 3) the domiciliary commissioner contacted the company prior to Sept. 1 and notified them that the statement of exemption was not allowed:		requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS				
2022	3.	Question 2.2.a is "No" or Question 2.3.a is "No"), then provide the most recent year that the company filed a statement of exemption that was allowed. If such calendar year is not the current calendar year for this statement, also provide confirmation that the company meets the criteria for utilizing an ongoing statement of exemption, meaning that none of the following apply:  1) the company fails to meet either of the conditions in VM Section II, Subsection 1.G.2, 2) the policies exempted contain those in VM Section II, Subsection 1.G.3, or				
		2022				

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

Other Exclusions from Life PBR For The Year Ended December 31, 2022 (To Be Filed by March 1)

1A.	Has the company filed and been granted a Single State Exemption from the reserve requirements of VM-20 of the Valuation Manual by their state of domicile?	Yes [	]	No [	Х]
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	1	No [	1