

The logo for the National Association of Insurance Commissioners (NAIC) features the acronym "NAIC" in a bold, white, sans-serif font, set against a dark blue rectangular background.

National Association of
Insurance Commissioners

Official NAIC Annual Statement Blank

**Life, Accident & Health/
Fraternal**

For the 2019 reporting year

Not for Distribution



National Association of
Insurance Commissioners

The NAIC is the authoritative source for insurance industry information. Our expert solutions support the efforts of regulators, insurers and researchers by providing detailed and comprehensive insurance information. The NAIC offers a wide range of publications in the following categories:

Accounting & Reporting

Information about statutory accounting principles and the procedures necessary for filing financial annual statements and conducting risk-based capital calculations.

Consumer Information

Important answers to common questions about auto, home, health and life insurance — as well as buyer's guides on annuities, long-term care insurance and Medicare supplement plans.

Financial Regulation

Useful handbooks, compliance guides and reports on financial analysis, company licensing, state audit requirements and receiverships.

Legal

Comprehensive collection of NAIC model laws, regulations and guidelines; state laws on insurance topics; and other regulatory guidance on antifraud and consumer privacy.

Market Regulation

Regulatory and industry guidance on market-related issues, including antifraud, producer filing requirements, producer licensing and market analysis.

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NAIC member directories, in-depth reporting of state regulatory activities and official historical records of NAIC national meetings and other activities.

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Valuable and in-demand insurance industry-wide statistical data for various lines of business including auto, home, health and life insurance.

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Guidance manuals, handbooks, surveys and research on a wide variety of issues.

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Information regarding portfolio values and procedures for complying with NAIC reporting requirements.

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Relevant studies, guidance and NAIC policy positions on a variety of insurance topics.

For more information about NAIC publications, visit us at:

http://www.naic.org/prod_serv_home.htm

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NAIC Executive Office
444 North Capitol Street, NW
Suite 700
Washington, DC 20001
202.471.3990

NAIC Central Office
1100 Walnut Street
Suite 1500
Kansas City, MO 64106
816.842.3600

NAIC Capital Markets
& Investment Analysis Office
One New York Plaza, Suite 4210
New York, NY 10004
212.398.9000

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ANNUAL STATEMENT

OF THE

of _____

in the state of _____

TO THE

Insurance Department

OF THE

STATE OF

FOR THE YEAR ENDED
DECEMBER 31, 2019

| | LIFE, ACCIDENT AND HEALTH | | FRATERNAL BENEFIT SOCIETIES

2019

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Attach Form 990-A here

ANNUAL STATEMENT
For the Year Ended December 31, 2019
 OF THE CONDITION AND AFFAIRS OF THE

NAC Group Code _____ NAC Company Code _____ Employee's ID Number _____
 (Capital Receipt) (Form Action)

Organized under the laws of _____ State or Territory, Post Office _____
 Country of America _____

Licensed to business in: Life, Accident, and Health **Insurance License Number:** _____
Insurance License State: Illinois **Insurance License Class:** _____

Insurance Office _____
 Main Administrative Office _____

_____ (Street Number) _____ (City, Town, or Village and State) _____
 _____ (Street Number) _____ (City, Town, or Village and State) _____

_____ (Street Number) _____ (City, Town, or Village and State) _____
 _____ (Street Number) _____ (City, Town, or Village and State) _____

_____ (Street Number) _____ (City, Town, or Village and State) _____
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_____ (Street Number) _____ (City, Town, or Village and State) _____
 _____ (Street Number) _____ (City, Town, or Village and State) _____

OFFICERS			
Name	Title	Name	Title
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

DIRECTORS OR TRUSTEES			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

State of _____
 County of _____

The Officers of this reporting entity being duly sworn, depose and say that they are the true and lawful officers of said reporting entity, and that on the reporting period stated above all of the books, records and accounts are the exclusive property of the reporting entity, and that they have examined the same, and the same are true and correct, and that the statements, reports, schedules and exhibits and supplemental financial statements, records and exhibits, and all other information contained in this report, and all of the assets and liabilities and of the condition and affairs of the reporting entity as of the reporting period stated above, and all of the income and disbursements therefor for the period stated, and have been compared in accordance with the NAC Annual Statement Instructions and Accounting Procedures Manual (except in the extent that (1) state law may differ or (2) that the nature or requirements require differences in reporting practices and procedures, according to the best of their information, knowledge and belief, and in accordance with the best of the information by the described entity, and that the related computerized electronic filing with the NAC, when required, that is an exact copy (except for formatting differences) of the electronic filing of the enclosed statement. The electronic filing may be required by various regulators in lieu of or in addition to the enclosed statement.

_____ (Signature)	_____ (Signature)	_____ (Signature)
_____ Print Name	_____ Print Name	_____ Print Name
_____ Title	_____ Title	_____ Title

Substantial and sworn to before me this _____ day of _____, 2019.

Not a public official? Yes No

If Yes: State the name of your employer Date of day Name of page attached

ASSETS

	Current Year			Year Year
	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 3)	Net Admitted Assets
1. Bonds (Schedule B)				
2. Stocks (Schedule C)				
2.1 Preferred stocks				
2.2 Common stocks				
3. Mortgage loans on real estate (Schedule D)				
3.1 First liens				
3.2 Other than first liens				
4. Real estate (Schedule E)				
4.1 Properties occupied by the company (less \$..... encumbrances)				
4.2 Properties held for the production of income (less \$..... encumbrances)				
4.3 Properties held for sale (less \$..... encumbrances)				
5. Cash (\$....., Schedule E-Part 1); cash equivalents (\$....., Schedule E-Part 2) and short-term investments (\$....., Schedule DAI)				
6. Contract loans (including \$..... premium notes)				
7. Derivatives (Schedule DB)				
8. Other invested assets (Schedule BA)				
9. Receivables for securities				
10. Securities lending, reinvested collateral assets (Schedule DE)				
11. Aggregate write-ins for investment assets				
12. Submits, cash and invested assets (Lines 1 to 11)				
13. Title points less \$..... charges (for Title insurers only)				
14. Investment income due and accrued				
15. Premiums and considerations				
15.1 Unallocated premiums and agents' balances in the course of collection				
15.2 Deferred premiums, agents' balances and installments, pocket but deferred and not yet due (including \$..... earned but unbilled premiums)				
15.3 Accrued retrospective premiums (\$.....) and contracts subject to retrocession or (if.....)				
16. Reinsurance				
16.1 Amounts receivable from reinsurers				
16.2 Funds held by or deposited with reinsured companies				
16.3 Other amounts receivable under reinsurance contracts				
17. Amounts receivable relating to unissued claims				
18.1 Current federal and foreign income tax receivable and other tax receivable				
18.2 Not deferred tax asset				
19. Guaranty funds receivable or on deposit				
20. Electronic data processing equipment and software				
21. Furniture and equipment, including health care delivery costs (\$.....)				
22. Net adjustment in assets and liabilities due to foreign exchange rates				
23. Receivables from parents, subsidiaries and affiliates				
24. Health care (\$.....) and other services receivable				
25. Aggregate write-ins for other than investment assets				
26. Total assets including Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 1 to 25)				
27. Less: Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28. Total (Lines 26 and 27)				
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1104.				
1198. Summary of remaining write-ins from 11 from overflow page				
1199. Totals (Lines 1101 through 1104 plus 1198) (Line 11 above)				
2501.				
2502.				
2503.				
2504.				
2598. Summary of remaining write-ins from 25 from overflow page				
2599. Totals (Lines 2501 through 2504 plus 2598) (Line 25 above)				

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LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Aggregate reserve for life contracts \$..... (Exhibit 3, Line 0909090) less \$..... included in Line 6.3 (including \$..... Modern Reserve).....		
2. Aggregate reserve for accident and health contracts (including \$..... Modern Reserve).....		
3. Liability for deposit-type contracts (Exhibit 3, Line 14, Col. 1) (including \$..... Modern Reserve).....		
4. Contract claims:		
4.1 Life (Exhibit 8, Part 1, Line 4.4, Col. 1 less sum of Dels. 9, 10 and 11).....		
4.2 Accident and health (Exhibit 8, Part 1, Line 4.4, sum of Dels. 9, 10 and 11).....		
5. Policyholders' dividends, refunds to members \$..... and expense \$..... due and unpaid (Exhibit 6, Line 10)		
6. Provision for policyholder dividends, refunds to members and expense payable in following calendar year—estimated amount:		
6.1 Policyholders' dividends and refunds to members apportioned for payment (including \$..... Modern).....		
6.2 Policyholders' dividends and refunds to members not yet apportioned (including \$..... Modern).....		
6.3 Contingent and similar benefits (including \$..... Modern).....		
7. Amount provisionally held for deferred dividend policies not included in Line 6.....		
8. Premiums and maturity considerations for life and accident and health contracts received in advance less \$..... discount, including \$..... receded and health premiums (Exhibit 1, Part 1, Col. 1, sum of Lines 9 and 11).....		
9. Contract liabilities not included elsewhere:		
9.1 Surrender values on canceled contracts.....		
9.2 Provision for expense reserve refunds, including the liability of \$..... accident and health expense (a net refund of which \$..... is for medical expense value per the Public Health Service Act).....		
9.3 Other amounts payable on reinsurance, including \$..... assumed and \$..... ceded.....		
9.4 Interest Maintenance Reserve (IMR, Line 6).....		
10. Commissions to agents due on accident-life and annuity contracts \$..... accident and health \$..... and deposit-type contract funds.....		
11. Commissions and expense allowances payable on nonrenewal account.....		
12. General expense due or earned (Exhibit 9, Line 19, Col. 2).....		
13. Transfers to Separate Accounts due or accrued (via) (including \$..... accrued for expense allowance recognition in reserves, net of minimal allowances).....		
14. Taxes, licenses and franchise or special, excluding federal income taxes (Exhibit 3, Line 9, Col. 6).....		
15. Current federal and foreign income taxes, including \$..... on realized capital gains taxes.....		
16. Net deferred tax liability.....		
17. Unearned investment income.....		
18. Amounts withheld or retained by recording entity re agent or trustee.....		
19. Amounts held for agents' account, including \$..... agents' credit balances.....		
20. Reaffirmance and items not allocated.....		
21. Net adjustment in assets and liabilities due to foreign exchange rates.....		
22. Liability for benefits for employees and agents if not included above.....		
23. Borrowed money \$..... and interest thereon \$.....		
24. Dividends to stockholders declared and unpaid.....		
25. Miscellaneous liabilities:		
25.01 Asset valuation reserve (AVR, Line 16, Col. 7).....		
25.02 Reinsurance in unaffiliated and certified (S.....) companies.....		
25.03 Funds held under reinsurance treaties with unaffiliated and certified (S.....) reinsurers.....		
25.04 Payable to parents, subsidiaries and affiliates.....		
25.05 Due to related party.....		
25.06 Liability for amounts held under universal plans.....		
25.07 Funds held under reinsurance.....		
25.08 Derivatives.....		
25.09 Payable for securities.....		
25.10 Payable for securities lending.....		
25.11 Current notes \$..... and interest thereon \$.....		
26. Aggregate write-ups for liabilities.....		
27. Total liabilities (including Separate Accounts held for (Form 1025)).....		
28. Even Separate Accounts agreement.....		
29. Total liabilities (Lines 26 and 27).....		
30. Common capital stock.....		
31. Preferred capital stock.....		
32. Aggregate write-ups for other than special surplus funds.....		
33. Surplus notes.....		
34. Gross paid in and contribution in excess (Page 3, Line 35, Col. 3, plus Page 4, Line 51.1, Col. 1).....		
35. Aggregate write-ups for special surplus funds.....		
36. Unassigned funds (complex).....		
37. Less treasury stock, at cost:		
37.1..... shares not owned (value included in Line 29 \$.....)		
37.2..... shares owned (value included in Line 30 \$.....)		
38. Surplus (and Line 31.1)..... 31.1-25-36) (including \$..... in separate Accounts statement).....		
39. Totals of Lines 28, 30, 31.1-37 (Page 4, Line 55).....		
40. Totals (Lines 28, 30, 31.1-37) (Page 4, Line 55).....		
41. Totals (Lines 28, 30, 31.1-37) (Page 4, Line 55).....		
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4202.....		
4203.....		
4208. Summary of remaining writings for Line 25 (from overline page).....		
4209. Totals (Lines 4201 through 4205 plus 4208) (Line 25 above).....		
4301.....		
4302.....		
4303.....		
4308. Summary of remaining writings for Line 31 (from overline page).....		
4309. Totals (Lines 4301 through 4303 plus 4308) (Line 31 above).....		
4401.....		
4402.....		
4403.....		
4408. Summary of remaining writings for Line 34 (from overline page).....		
4409. Totals (Lines 4401 through 4403 plus 4408) (Line 34 above).....		

SUMMARY OF OPERATIONS

	I Current Year	II Prior Year
1. Premiums and credits (see instruction 5b) from accident and health contracts (Table 1, Part I, Line 204, Col. 1, less Col. 11).....		
2. Cancellations for application contracts with 12-month policies.....		
3. Net loss reserve increase (FD-100-107) for loss contracts from Line 17).....		
4. Adjustments of Unearned Premium Reserve (UMR) (Line 5).....		
5. Separate Account net gain from operations including realized gain or losses.....		
6. Loss reserve and expense adjustment on reinsurance ceded (Table 1, Part I, Line 56, Col. 1).....		
7. Reserve adjustments on reinsurance ceded.....		
8. Miscellaneous income:		
8.1. Income from fees associated with investment, management, maintenance, and services, primarily from Separate Accounts.....		
8.2. Charges and fees on deposit-type contracts.....		
8.3. Aggregate write-ins for miscellaneous income.....		
9. Total (Line 1-8).....		
10. Death benefits.....		
11. Matured annuities including guaranteed annual payments contracts.....		
12. Annuity benefits (Table 3, Part I, Line 64, Col. 1-8).....		
13. Disability benefits and benefits from reserves and health contracts.....		
14. Property guaranteed annuity purchase contracts and death benefits.....		
15. Surrender benefits and withdrawals for life contracts.....		
16. Group annuities.....		
17. Investment adjustments on contracts or deposits (negative contract debit).....		
18. Payments on term contracts (negative) and life contracts (positive).....		
19. Increase in aggregate reserves for life and accident and health contracts.....		
20. Total (Lines 10-19).....		
21. Cancellations of policies, annuity cancellations and deposit-type contract death proceeds (not business only) (Table 1, Part I, Line 31, Col. 1).....		
22. Cancellations and expense adjustments on contracts or deposits (negative) (FD-100-107, Part I, Line 26, Col. 1).....		
23. General insurance expense and financial expense (Table 5, Line 7, Columns 1, 2, 3, Line 2).....		
24. Insurance sales, losses and fees, including Saver income taxes (Table 1, Line 7, Col. 1-3, 1-5).....		
25. Increase or (decrease) in deferred and unearned premium.....		
26. Net transfer to or from Separate Accounts net of reinsurance.....		
27. Aggregate write-ins for debits.....		
28. Total (Lines 20-27).....		
29. Net gain from operations on income distribution to policyholders, retirees to members and federal income taxes (Line 8 plus Line 28).....		
30. Dividends to policyholders and retirees to members		
31. Net gain from operations after dividends to policyholders, retirees to members and before federal income taxes (Line 29 minus Line 30).....		
32. Federal tax charge on income tax and withholding tax on capital gain.....		
33. Net gain from operations after dividends to policyholders, retirees to members , and Saver income taxes, federal and capital gain or (loss) (Line 29 minus Line 32).....		
34. Net realized capital gain (loss) (realized gain (loss) transferred to the IRR) less capital gain or (loss) transferred to the IRR.....		
35. Net income (Line 33 plus Line 34).....		
CAPITAL AND SURPLUS ACCOUNTS		
36. Loans and supplies, December 31, prior year (Page 5, Line 40, Col. 1).....		
37. Net income (Line 35).....		
38. Change in net realized capital gain (loss) less net capital gain or (loss).....		
39. Change in net realized losses (other negative gain (loss)).....		
40. Change in net deferred income tax.....		
41. Change in reinsurance income.....		
42. Change in liability for reinsurance in annuities and certain contracts.....		
43. Change in reserve on account of change in valuation basis (increase or decrease).....		
44. Change in asset valuation reserve.....		
45. Change in loan or stock (Page 3, Lines 25.1 and 26.2 Col. 2 minus Col. 1).....		
46. Surplus (available) on withdrawal from Separate Accounts during year.....		
47. Other changes to surplus in Separate Accounts column.....		
48. Change in surplus plus.....		
49. Transfer to other accounts in supporting principle.....		
50. Dividend charges:		
50.1. Paid in.....		
50.2. Transferred from surplus (stock transfer).....		
50.3. Transferred to surplus.....		
51. Surplus adjustment:		
51.1. Paid in.....		
51.2. Transferred to capital (Saver, Dividend).....		
51.3. Transferred from capital.....		
51.4. Change in surplus as a result of transfers.....		
52. Dividend to stockholders.....		
53. Aggregate write-ins for surplus and capital gain.....		
54. Net change in capital and surplus for 12 months (Lines 29 through 52).....		
55. Capital and surplus, December 31, current year (Line 36 plus Line 54) (Page 3, Line 38).....		
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24-503.....		
24-504 Summary of reinsurance contracts (see FD-100-107 over five pages).....		
24-505 Total (Line 16, 21, 22 plus 24-501 through 24-504) (Line 6, Table 1).....		
2500.....		
2501.....		
2502.....		
2503.....		
2549 Summary of reinsurance contracts (see FD-100-107 over five pages).....		
2545 Total (Line 2501 through 2503 plus 2549) (Line 7, Table 1).....		
3100.....		
3101.....		
3102.....		
3150 Summary of reinsurance contracts (see Line 29 over five pages).....		
3155 Total (Line 3101 through 3103 plus 3150) (Line 8, Table 1).....		

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected (net of reinsurance)		
2. Net investment income		
3. Miscellaneous income		
4. Total (Lines 1 through 3)		
5. Benefit and loss related payments		
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7. Commissions, expenses paid and aggregate write-ins for deductions		
8. Dividends paid to policyholders		
9. Federal and foreign income taxes paid (recovered) net of S..... tax on capital gains (losses)		
10. Total (Lines 5 through 9)		
11. Net cash from operations (Line 4 minus Line 10)		
Cash from Investments		
12. Proceeds from investments sold, matured or repaid		
12.1 Bonds		
12.2 Stocks		
12.3 Mortgage loans		
12.4 Real estate		
12.5 Other invested assets		
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		
12.7 Miscellaneous proceeds		
12.8 Total investment proceeds (Lines 12.1 to 12.7)		
13. Cost of investments acquired (long term only)		
13.1 Bonds		
13.2 Stocks		
13.3 Mortgage loans		
13.4 Real estate		
13.5 Other invested assets		
13.6 Miscellaneous applications		
13.7 Total investments acquired (Lines 13.1 to 13.6)		
14. Net increase (decrease) in contract loans and premium rates		
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)		
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied)		
16.1 Surplus notes, capital notes		
16.2 Capital and paid in surplus, less treasury stock		
16.3 Borrowed funds		
16.4 Net deposits on deposit-type contracts and other insurance loans		
16.5 Dividends on stock holdings		
16.6 Other cash provided (applied)		
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.6 minus Line 16.3 plus Line 16.6)		
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Lines 15 and 17)		
19. Cash, cash equivalents and short-term investments		
19.1 Beginning of year		
19.2 End of year (Line 18 plus Line 19.1)		
Note: Supplemental disclosure of cash flow information for the cash transactions:		
20.001		
20.002		
20.003		
20.996		

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS – INDIVIDUAL LIFE INSURANCE ^(b)

	1	2	3	4	5	6	7	8	9	10	11	12
	Total	Individual Life	Whole Life	Term Life	Indexed Life	Universal Life	Universal Life with Secondary Guarantees	Variable Life	Variable Universal Life	Civil Life &	Other Individual Life	YRT Monthly Rbt Only
1 Premiums for life contracts ⁽¹⁾	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2 Excess charges for supplementary contracts with life and accident and health benefits												
3 Net investment income												
4 Amortization of Unearned Premiums Reserve (UPR)												
5 Separate Account net gain from operations including unrealized gains or losses												
6 Lease income and expense all contracts on reinsurance basis												
7 Revenue adjustments on reinsurance sold												
8 Other income less expense												
9 2.1 Income from fees associated with investment management, administrative and contract guarantees from Separate Accounts												
10 Charge and fees for deposit-type contracts												
11 Aggregate income for miscellaneous income												
12 Total Gains (Losses)												
13 Death benefits												
14 Net asset encumbrance (including guaranteed annual pure endowment)												
15 Annuity benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
16 Death benefits for accident and health contracts												
17 Corporate payments of annuity, pure endowment and death benefits												
18 Surrender benefits and withdrawal benefits for investments												
19 Group annuities												
20 Interest and adjustments on contract deposits on contract funds												
21 Payments on term annuity contracts with life contingencies												
22 Increase in aggregate reserves for life and accident and health contracts												
23 Total (Loss) Gains ⁽²⁾												
24 Commission on policies, annuities and benefits and deposit-type contracts (including contract charges on 23)												XXX
25 Lease income and expense all contracts on reinsurance basis												
26 General insurance expense												
27 Lease income, benefits and fees including federal income taxes, benefits including un-declared and undeclared portions												
28 Federal taxes on final Separate Account net of adjustments												
29 Aggregate income for distributions												
30 Total Gains (Losses) ⁽³⁾												
31 Net gain from operations before distribution to policyholders, refunds to members and other income less (line 30 minus line 29)												
32 Dividends to policyholders and amounts to members												
33 Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (line 30 minus line 31)												
34 Federal income taxes incurred (including tax on capital gains)												
35 Net gain from operations after dividends to policyholders, refunds to members and federal income taxes and before federal capital gains tax (line 31 minus line 32)												
36 State income taxes on individual year												
DETAILS OF WRITE-INS												
18.901												
18.902												
18.903												
18.904 Summary of remaining entries for Line 5.1 from schedule page 18.901 thru (line 18.901) through 18.904 plus 18.901 (line 5.2 above)												
2190												
2191												
2192 Summary of remaining entries on line 21 from schedule page 2190												
2193 Total (line 2191) through 2192 plus 2191 (line 21 above)												

(1) Includes separate account deposits following schedule 1001.
 (2) Includes the total of the entries on lines 1 through 35. The total gain or loss is the sum of the entries on lines 1 through 35. The total gain or loss is the sum of the entries on lines 1 through 35.
 (3) Includes the total of the entries on lines 1 through 35. The total gain or loss is the sum of the entries on lines 1 through 35. The total gain or loss is the sum of the entries on lines 1 through 35.

NEW PAGE

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS – GROUP LIFE INSURANCE

	1	2	3	4	5	6	7	8	9
	TNA	Write-Ins	Term Life	Universal Life	Variable Universal Life	Fixed Life (d)	Other Group Life (a)	TRF Member Life Only	
1. Premiums on life contracts ⁽¹⁾	ANY	ANY	N/A	ANY	ANY	ANY	ANY	ANY	ANY
2. Conditional first-year premiums on contracts with life contingencies.....	ANY	ANY	N/A	ANY	ANY	ANY	ANY	ANY	ANY
3. Net investment income.....									
4. Acquisition of Unpaid Minimum Reserve (UMR).....									
5. Expense Accounts not paid (See instructions regarding non-leased party of loss).....									
6. Conditional annual expense allowances (See instructions).....									
7. Reserve adjustments on non-leased party.....									
8. Miscellaneous items.....									
8.1 Interest from investments with investment guarantees, annuities and contract guarantees from separate accounts.....									
8.2 Charge and fee for deposit-type contracts.....									
8.3 Aggregate net gain for individual contracts.....									
9. "Days of loss" (Line 17).....									
10. Death benefits.....									
11. Mailed notices to beneficiaries of insured party (endorsement).....									
12. Annuity benefits.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Death benefits and benefits to beneficiaries with contracts.....									
14. Corporate, partnership, annuity, pension, and other benefits.....									
15. Remainder benefits and payments for life contracts.....									
16. Group term life.....									
17. Interest and adjustments on contracts on non-leased party (contract loans).....									
18. Payments on supplementary contracts with life contingencies.....									
19. Increase in aggregate reserves for life and contract and health contracts.....									
20. "Days of loss" (Line 19).....									
21. Commissions on premiums, annuities, pension, and other contracts (direct business only).....									ANY
22. Commissions and expense allowances on non-leased party.....									
23. General insurance expenses.....									
24. Insurance taxes, interest and fees, including federal income taxes.....									
25. Interest on funding on deposits and invested premiums.....									
26. Net investment income (See instructions regarding non-leased party).....									
27. Aggregate net gain for deposits.....									
28. "Days of loss" (Line 27).....									
29. Net gain from operations before federal and state taxes, including federal income taxes (Line 28 minus Line 26).....									
30. Incidents to policyholders and related to members.....									
31. Net gain from operations after federal and state taxes, including federal income taxes (Line 29 minus Line 30).....									
32. Federal income taxes payable (including tax on capital gains).....									
33. Net gain from operations after demands to policyholders, refunds to members and return of premiums and other capital gains on the year (Line 31 minus Line 32).....									
34. Federal net income in force at year end.....									
DETAILS OF WRITE-INS									
35. 301.....									
36. 302.....									
37. 303.....									
38. 304 Summary of inventory on account for Line 35 from our first party.....									
39. 305 Total net (Line 301) minus (Line 302) plus (Line 303) (Line 35 answer).....									
40. 306.....									
41. 307.....									
42. 308 Summary of inventory on account for Line 36 from our first party.....									
43. 309 Total net (Line 306) minus (Line 307) plus (Line 308) (Line 36 answer).....									

(a) Indicate the following amounts for FBGLS/OLI: Line 1..... Line 19..... Line 26..... Line 28.....
 (b) Indicate premium amounts for covered plans included in Line 1.
 (c) Indicate "Days of loss" if the loss is more than 25% of reserves and Line 14 (d) An aggregated set of contracts with a total face of \$100 million or more and which are not affiliated.
 (d) Indicate total Group Term Life Insurance and total of other..... (e) Indicate whether included with Individual or Group.

NEW PAGE

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS – INDIVIDUAL ANNUITIES¹⁾

	1 Total	2-7 Ceded				6 Life Contingent Future Premiums and Amortization	7 Other Annuities
		2 Total Annuities	3 Fixed Annuities	4 Variable Annuities with Fixed Top	5 Variable Annuities without Guarantees		
1. Premiums for individual annuity contracts							
2. Consideration for applications contracts with life contingencies		XXX	XXX	XXX	XXX		XXX
3. Net investment income							
4. Amortization of Internal Mortarbank Reserve (IMR)							
5. Separate Accounts net gain/loss operations including unrealized gains or losses							
6. Commissions and expense allowances on contracts sold							
7. Reserve adjustments on insurance risks							
8. Miscellaneous items							
8.1 Income from the ceding office with investment expense, administrative and contract guarantee float							
8.2 Changes and float for deposit-type contracts							
8.3 Aggregate net income from other lines of business							
9. Total (Lines 1-8)							
10. Death benefits							
11. Maturity surrenders (including guaranteed maturity rate endowment)							
12. Annuity benefits							
13. Disability benefits and benefits under accelerated death benefits							
14. Corporate guaranteed annuity payments and death benefits							
15. Surrender benefits and death benefits for life contracts							
16. Group term life							
17. Interest and adjustments on premium deposits/contract loans							
18. Payments on supplementary contracts with life contingencies							
19. Income on mortgage reserves for life and accident and health contracts							
20. Total (Lines 9-19)							
21. General account premiums, annuity considerations and deposit-type contract funds (fixed premium only)							
22. General account and reserve allowances on non-annuity contracts							
23. General insurance expenses							
24. Insurance taxes, license and fees, including federal income taxes							
25. Increase in holding or reserve and uncollected premiums							
26. Net income from long-term investments of investments							
27. Aggregate write-ups for distributions							
28. Total (Lines 21-27)							
29. Net gain from operations before dividend policy/allowance refunds to members and before federal income taxes (Line 28 minus Line 20)							
30. Federal income taxes (amount including tax on capital gains)							
31. Net gain from operations after allocation to policyholders, refunds to members and federal income taxes (Line 29 minus federal capital gains or losses (Line 21) and Line 30)							
32. Total (Lines 1-31)							
DETAILED BREAKDOWN							
03 201							
03 303							
03 303							
03 358 Summary of operating results for Line 8-9 from one-line page							
03 359 Total (Lines 28-30) minus (Line 30) plus (Line 31) from one-line page							
2301							
2302							
2303							
2304 Summary of operating results for Line 27 from one-line page							
2305 Total (Lines 2301) minus (Line 2302) plus (Line 2303)							

1) Indicate if blocks of business in one-off-line, comprising less than 1% of premium and less than 1% of reserves, are aggregated with an initial block of business that such columns are affected

NEW PAGE

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS – GROUP ANNUITIES (09)

	1 Total	2-7 Inland				6 Life Contingent Future Pensions and Annuities	7 Other Annuities
		2 Fixed Annuities	3 Fixed Annuities	4 Variable Annuities with Fixed Fee	5 Variable Annuities with Guarantees		
1. Premiums for group annuity contracts							
2. Commissions for applications contracts with life contingencies		XXX	XXX	XXX	XXX		XXX
3. Net investment income							
4. Amortization of Internal Mortgages Assured (IMI)							
5. Separate Accounts net gain from operations including unrealized gains or losses							
6. Commissions and expense allowances on contracts sold							
7. Reserve adjustments on insurance risks							
8. Miscellaneous items							
8.1 Income from the operations with investment guarantee, administration and contract guarantee from Separate Accounts							
8.2 Changes and fees for deposit-type contracts							
8.3 Aggregate net income from other financial services							
9. "Other Plans" (net)							
10. Death benefits							
11. Maturity surrenders (including guaranteed annual rate endowment)							
12. Annuity benefits							
13. Disability benefits and benefits under accelerated death benefits							
14. Corporate guaranteed annual premium returns and death benefits							
15. Surrender benefits and death benefits for life contracts							
16. Group conversions							
17. Interest and adjustments on premium deposits type contract loans							
18. Payments on supplementary contracts with life contingencies							
19. Income on mortgage reserves for life and accident and health contracts							
20. "Other Plans" (net)							
21. General account premiums, annuity considerations and deposit-type contract fees (fixed premium only)							
22. Commissions and expense allowances on non-annuity contracts							
23. General insurance expenses							
24. Insurance taxes, interest and fees, including federal income taxes							
25. Increase in holding or reserve and uncollected premiums							
26. Net income from long-term investments of investments							
27. Gains or losses on distributions							
28. "Other Plans" (net)							
29. Net gain from operations before dividend policyholders, refunds to members and before federal income taxes (Line 25 minus Line 26)							
30. Dividends on policyholders and refunds to members							
31. Net gain from operations after dividends to policyholders, refunds to members and before federal income taxes (Line 29 minus Line 30)							
32. Federal income taxes (including tax on capital gains)							
33. Net gain from operations after income tax on policyholders, refunds to members and federal income taxes (Line 31 minus federal capital gains or losses (Line 32) minus Line 32)							
34. Federal refunds to members or policyholders							
DEBITS OF WRITING							
03 201							
03 303							
03 303							
03 358 Summary of operating activities for Line 8-9 from one-line page							
03 359 Total (Line 33) minus (Line 30) plus (Line 34) minus (Line 35) minus							
2301							
2302							
2303							
2304 Summary of operating activities for Line 27 from one-line page							
2305 Total (Line 2301) minus (Line 2302) plus (Line 2303) minus							

If an asterisk (*) beside a business name on this summary line item, the operations and line item 2% of reserves on same liability are aggregated with internal blocks of business that such columns are affected.

NEW PAGE

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS – ACCIDENT AND HEALTH

	1 Total	2 Corporations		3 Mutual Separation	4 Mutual Only	5 Total Only	6 Foreign Employers Health Benefits Plan	7 TOL III Mutual	8 TOL XIV Mutual	9 Other AHE	10 Health Insurance	11 Long Term Care	12 Other Benefits
		Individual	Group										
1. Premium for accident and health contracts													
2. Consideration for reinsurance contracts with third-party reinsurers	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Net investment income													
4. Amortization of Unearned Premium Reserve (UPR)													
5. Expense Accounts and gain from operations including unearned gains or losses													
6. Contingent and expense allowances on reinsurance ceded													
7. Adjusted gain/loss on reinsurance ceded													
8. Miscellaneous income													
9. Income from loss assumed with treatment management, termination and contract guarantees from separate Accounts													
8.1 Charge and fee for deposit-type contracts	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8.2 Aggregate surplus for miscellaneous income													
9. Totals (Lines 1-8.2)													
10. Death benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
11. Medical reimbursement (per policy) guaranteed issue (non-indemnity)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
12. Sickness benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Disability benefits and benefits for accident and health contracts													
14. Corporate, guaranteed annual premium contracts and life benefits	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
15. Reimburse benefits and death benefits for life contracts													
16. Group term policies													
17. Interest and adjustments on annuities or term-type contract loans													
18. Payments on supplementary contracts with life contingencies	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
19. Income in appropriate reserve for life and accident and health contracts													
20. Totals (Lines 10-19)													
21. Commissions on annuities, annuity contractizations and term-type contract loans (direct business only)													
22. Contingent and expense allowances on reinsurance ceded													
23. General insurance expenses													
24. Insurance taxes, license and fees, including federal income taxes													
25. Income in holding out reserve and unearned premium													
26. Net income (over cost) of separate Accounts net of reinsurance													
27. Aggregate surplus for accidents													
28. Totals (Lines 21-27)													
29. Net gain from operations, net of dividends to policyholders, and refunds to contract holders in connection with Section 79 and Line 30													
30. The holding out of profits and refunds to contract holders													
31. Net gain from operations after dividends to policyholders, refunds to contract holders and before Section 79 and Line 30													
32. Federal income taxes incurred (including an on capital gains)													
33. Net gain from operations after dividends to policyholders, refunds to contract holders and federal income taxes and before Section 79 and Line 30													
34. Total (Lines 1 through 33)													
35. Details of Dividends to Policyholders (Line 34)													
36. DETAILS OF WITHHELD													
36.001													
36.002													
36.003													
36.004 Recovery of overpayment with Line 8.2 (see instruction 2)													
36.005 Total (Lines 36.001 through 36.004) (see instruction 2)													
37.01													
37.02													
37.03													
37.04 Summary of remaining withholds for line 27 (see instruction 2)													
37.05 Total (Lines 37.01 through 37.04) plus 27.01 (Line 27 instruction 2)													

(a) Indicate if None of entries in cell off the balance sheet. % of positive and (over) % of reserve and (over) liability are appropriate with mutual funds of income and which occurs an amount

ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR – INDIVIDUAL LIFE INSURANCE ^(a)

	1	2	3	4	5	6	7	8	9	10	11	12
	Total	Industrial Life	Whole Life	Term Life	Indexed Life	Universal Life	Universal Life With Surrender Charge	Variable Universal Life	Variable Universal Life	Credit Life ^(b) (N/A Present)	Other Individual Life	VRT Mortality Risk Only
Involving Life or Disability Contingencies (Reserves) (No. of Reinsurance Ceded)												
1. Reserve December 31, prior year.....												
2. Termination premiums or considerations.....												
3. Present value of disability claims incurred.....												
4. Termination reserve.....												
5. Termination actual reserves released.....												
6. Increase in reserve on account of change in valuation basis.....												
7. Change in reserve of 5M-70 determined/contract basis reserve over net premium reserve.....		XXX								XXX		
8. Other increases (net).....												
9. Total (lines 1 to 8).....												
10. Termination cost.....												
11. Reserves released by death.....												
12. Reserves released by other terminations (net).....												
13. Annuity, supplementary contract, and disability payments including life contingencies.....												
14. Net transfers to or (from) Separate Accounts.....												
15. Reserve December 31, current year.....												
Cash Surrender Value and Policy Loans												
16. Cash ending balance December 31, current year.....												
17. Amount Available for Policy Loans (Line 16 CSV).....												

^(a) Individual blocks of business in excess of total contract less than 2% of premiums and less than 2% of reserves and loans. Policy are not rated. Separate blocks of business and search columns are allowed.

^(b) Individual Credit Group Cash Life reserves and loans include net charge (if block is other and 0% of block is group).

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ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR – GROUP LIFE INSURANCE¹⁰⁰ (N/A Fraternal)

	1	2	3	4	5	6	7	8	9
	Total	Whole Life	Term Life	Variable Life	Universal Life	Variable Universal Life	Credit Life ¹⁰¹	Other Group Life	YRT Mortality Risk Only
Involving Life or Disability Contingencies (Reserves) (Net of Reinsurance Ceded)									
1. Reserve December 31 of prior year									
2. Premium net payments and considerations									
3. Present value of disability claims incurred									
4. Tabular interest									
5. Tabular less actual reserves released									
6. Increase in reserve on account of change in valuation basis									
7. Other increases (net)									
8. Totals (Lines 1 to 7)									
9. Surrender cost									
10. Reserves released by death									
11. Reserves released by other terminations (net)									
12. Annuity, supplementary contract, and disability payments involving life contingencies									
13. Net transfers to or (from) Separate Accounts									
14. Total reductions (Lines 9 to 13)									
15. Reserve December 31 of current year									
Cash Surrender Value and Policy Loans									
16. CSV Ending balance December 31, current year									
17. Amount Available for Policy Loans Based upon Line 16 CSV									

(a) Indicate if both of the above items are not completed for the 95% of policies and less than 95% of reserves and how the 5% are reported and to whom (by type of business and which reference is affected)

(b) Fraternal and Group Credit Life not reported and not used on page. (Indicate whether not listed with fraternal or Group)

NEW PAGE

ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR – INDIVIDUAL ANNUITIES (1)

	1	2	3	4	5	6	7
	Total	Fixed Annuities	Traditional Annuities	Variable Annuities with Guarantees	Variable Annuities without Guarantees	Life Contingent Payout (Immediate and Annuitizations)	Other Annuities
Involving Life or Disability Contingencies (Reserves)							
<i>(Net of Reinsurance Ceded)</i>							
1. Reserve December 31 of prior year							
2. Tabular net premiums and considerations							
3. Present value of disability claims incurred	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4. Tabular interest							
5. Tabular less actual reserves released							
6. Increase in reserves on account of change in valuation basis							
7. Other increases (net)							
8. Totals (Lines 1 to 7)							
9. Tabular net							
10. Reserves released by death	XXX	XX	XXX	XXX	XXX	XXX	XXX
11. Reserves released by other terminations (net)							
12. Annuity, supplementary contract, and disability payments involving life contingencies							
13. Net transfers to or (from) Separate Accounts							
14. Total deductions (Lines 9 to 13)							
15. Reserve December 31 of current year							
Cash Surrender Value and Policy Loans							
16. CSV Ending Balance December 31, current year							
17. Amount Available for Policy Loans Based upon Line 16 CSV							

(1) Includes or blocks of business in which the contract has less than 0% of premiums and less than 0% of reserves and loans (including any amount for terminal reserve) of business and which columns are affected.

NEW PAGE

ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR – GROUP ANNUITIES (9) (N/A Fraternal)

	1 Total	2 Fixed Annuities	3 Fraternal Annuities	Reserve		6 Life Contingent Payout (Immediate and Annuitizations)	7 Other Annuities
				4 Variable Annuities with Guarantees	5 Variable Annuities without Guarantees		
Involving Life or Disability Contingencies (Reserves) (No. of Policies/Contracts)							
1. Reserve December 31 of prior year							
2. Tabular premium and considerations							
3. Present value of disability claims incurred	XXX	YYY	ZZZ	XXX	XXX	XXX	YYY
4. Tabular interest							
5. Tabular less actual reserve released							
6. Increase in reserve on account of change in valuation basis							
7. Other increases (net)							
8. Total of lines 1 to 7							
9. Tabular cost							
10. Reserves released by death	XXX	YYY	ZZZ	XXX	XXX	XXX	YYY
11. Reserves released by other terminations (net)							
12. Annuity, supplementary contract, and death by payment involving life contingencies							
13. Net transfers to or (from) Separate Accounts							
14. Total deductions (Lines 9 to 13)							
15. Reserve December 31 of current year							
Cash Surrender Value and Policy Loans							
16. CSV ending balance December 31, current year							
17. Amount Available for Policy Loans Based upon Line 16 CSV							

(9) To know if "locks of reserves" are applied for the 5% of premium and for the 5% of reserve of the liability, are applied to the total base of the reserve and 5% of the base of the reserve.

EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Lined During Year
1. U.S. Government bonds	(a)	
1.1 Bonds exempt from U.S. tax	(a)	
1.2 Other bonds (non-filiated)	(a)	
1.3 Bonds of affiliates	(a)	
2.1 Preferred stocks (non-filiated)	(b)	
2.1.1 Preferred stocks of affiliates	(b)	
2.2 Common stocks (non-filiated)	(c)	
2.2.1 Common stocks of affiliates	(c)	
3. Mortgage loans	(d)	
4. Real estate	(d)	
5. Contract loans	(e)	
6. Cash, cash equivalents and short-term investments	(e)	
7. Derivative instruments	(f)	
8. Other invested assets	(f)	
9. Aggregate write-ins for investment income		
10. Total gross investment income		
11. Investment expenses		(g)
12. Investment taxes, licenses and fees, including federal income taxes		(g)
13. Interest expense		(h)
14. Depreciation on real estate and other invested assets		(i)
15. Aggregate write-ins for deductions from investment income		
16. Total deductions (Lines 11 through 15)		
17. Net investment income (Line 10 minus Line 16)		
DETAILS OF WRITE-INS		
0900		
0901		
0902		
0998 Summary of remaining write-ins for Line 9 from overflow page		
0999 Totals (Lines 0901 through 0905 plus 0998) (Line 9 above)		
1500		
1501		
1502		
1598 Summary of remaining write-ins for Line 15 from overflow page		
1599 Totals (Lines 1501 through 1505 plus 1598) (Line 15 above)		

- (a) Includes \$ _____ accrual of discount less \$ _____ amortization of premium and less \$ _____ paid for accrued interest on purchases
- (b) Includes \$ _____ accrual of discount less \$ _____ amortization of premium and less \$ _____ paid for accrued dividends on purchases
- (c) Includes \$ _____ accrual of discount less \$ _____ amortization of premium and less \$ _____ paid for accrued interest on purchases
- (d) Includes \$ _____ for company's occupancy of its own buildings, and excludes \$ _____ interest on circumstances
- (e) Includes \$ _____ accrual of discount less \$ _____ amortization of premium and less \$ _____ paid for accrued interest on purchases
- (f) Includes \$ _____ accrual of discount less \$ _____ amortization of premium
- (g) Includes \$ _____ investment expenses and \$ _____ investment taxes, licenses and fees, excluding federal income taxes, all payable to segregated and Separate Accounts
- (h) Includes \$ _____ interest on surplus notes and \$ _____ interest on capital notes
- (i) Includes \$ _____ depreciation on real estate and \$ _____ depreciation on other invested assets

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1 Realized Gain (Loss) On Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds					
1.1 Bonds exempt from U.S. tax					
1.2 Other bonds (non-filiated)					
1.3 Bonds of affiliates					
2.1 Preferred stocks (non-filiated)					
2.1.1 Preferred stocks of affiliates					
2.2 Common stocks (non-filiated)					
2.2.1 Common stocks of affiliates					
3. Mortgage loans					
4. Real estate					
5. Contract loans					
6. Cash, cash equivalents and short-term investments					
7. Derivative instruments					
8. Other invested assets					
9. Aggregate write-ins for capital gains (losses)					
10. Total capital gains (losses)					
DETAILS OF WRITE-INS					
0901					
0902					
0903					
0998 Summary of remaining write-ins for Line 9 from overflow page					
0999 Totals (Lines 0901 through 0905 plus 0998) (Line 9 above)					

EXHIBIT 1 – PART 1 – PREMIUMS AND ANNUITY CONSIDERATIONS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

	1	2	3		4	5		6			7	8	
			Contract			Cash Value (Incorporated In-Shell)	Group		Accident and Health				
			Individual Life	Life Insurance			Term	Annual	Costs (Guaranteed Issue/Death)	Other			Aggregate of All Group Lines of Business
FIRST YEAR (other than single)													
1. Unaffiliated													
2. Related and unaffiliated													
3. Related, affiliated and unaffiliated													
3.1 Death													
3.2 Reinsurance assumed													
3.3 Reinsurance ceded													
3.4 No. (Line 1 - Line 2)													
4. Annuity													
5. Line 2.4 - Line 4													
6. Collected during year													
6.1 Death													
6.2 Reinsurance assumed													
6.3 Reinsurance ceded													
6.4 No.													
7. Line 5 - Line 6													
8. First year (incorporated) - defined and assumed - statutory													
9. First year premiums and annuities are													
9.1 Death													
9.2 Reinsurance assumed													
9.3 Reinsurance ceded													
9.4 No. (Line 7 - Line 8)													
SINGLE													
10. Single contracts and considered first year													
10.1 Death													
10.2 Reinsurance assumed													
10.3 Reinsurance ceded													
10.4 No.													
RENEWAL													
11. Unaffiliated													
12. Related and unaffiliated													
13. Related, affiliated and unaffiliated													
13.1 Death													
13.2 Reinsurance assumed													
13.3 Reinsurance ceded													
13.4 No. (Line 11 - Line 13)													
14. Annuity													
15. Line 13.4 - Line 14													
16. Collected during year													
16.1 Death													
16.2 Reinsurance assumed													
16.3 Reinsurance ceded													
16.4 No.													
17. Line 15 - Line 16													
18. First year (incorporated) - defined and assumed - statutory													
19. Renewal premiums and annuities are													
19.1 Death													
19.2 Reinsurance assumed													
19.3 Reinsurance ceded													
19.4 No. (Line 17 - Line 19)													
TOTAL													
20. Total premiums and annuity considerations													
20.1 Death													
20.2 Reinsurance assumed													
20.3 Reinsurance ceded													
20.4 No. (Line 20 - Line 20)													

Not for Distribution

EXHIBIT 1 – PART 2 – POLICYHOLDERS' DIVIDENDS, REFUNDS TO MEMBERS AND COUPONS APPLIED, REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES AND COMMISSIONS INCURRED (Direct Business Only)

	1	2	Ordinary		5	Group		Accident and Health			11	12
			3	4		6	7	8	9	10		
POLICYHOLDERS' DIVIDENDS, REFUNDS TO MEMBERS AND COUPONS APPLIED (included in Part 1)												
21. To pay renewal premiums.....												
22. All other.....												
REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES INCURRED												
23. First year (other than single):												
23.1 Reinsurance ceded.....												
23.2 Reinsurance assumed.....												
23.3 Net ceded less assumed.....												
24. Single:												
24.1 Reinsurance ceded.....												
24.2 Reinsurance assumed.....												
24.3 Net ceded less assumed.....												
25. Renewal:												
25.1 Reinsurance ceded.....												
25.2 Reinsurance assumed.....												
25.3 Net ceded less assumed.....												
26. Totals:												
26.1 Reinsurance ceded (Page 6, Line 6)												
26.2 Reinsurance assumed (Page 6, Line 22)												
26.3 Net ceded less assumed.....												
COMMISSIONS INCURRED (direct business only)												
27. First year (other than single).....												
28. Single.....												
29. Renewal.....												
30. Deposit-type mutual funds.....												
31. Totals (to agree with Page 6, Line 21)												

Not for Distribution

EXHIBIT 2 - GENERAL EXPENSES

	1 Life	Insurance Subscribers' Benefits		4 All Other Lines of Business	5 Investment	6 Federal	7 Total
		2 Cost of Acquisition	3 All Other				
1. Rent							
2. Salaries and wages							
1.01. Commissions for solicitation and for other work							
1.02. Commissions for solicitation and for general							
1.03. Agreements with employees under non-funded benefit plans							
1.04. Agreements with agents under non-funded benefit plans							
2.01. Office supplies and office							
2.02. Office agent self-insurance							
3. Travel and expenses							
4. Medical insurance and fees							
4.01. Insurance report fees							
4.02. Costs of public accountants and auditors' services							
4.03. Expense of investigations and maintenance of policy claims							
5. Printing expenses							
6. Advertising							
7. Postage, express, telegraph and telephone							
8. Printing and stationery							
9. Cost of depreciation of furniture and equipment							
10. Rental of equipment							
11. Cost of depreciation of PDP equipment and software							
12. Books and periodicals							
13. Interest and insurance on fees							
14. Insurance, except on real estate							
15. Miscellaneous costs							
16. Collection and bank service charges							
17. Rental general expenses							
18. Office service and administration fees							
19. Subscriptions by individual plans							
20. Agency expenses otherwise							
21. Agency expenses charged off (by self or reinsurer)							
22. Agency commissions other than policy premiums							
3.01. Office commissions (Federal Health Insurance Claims)	XXX	XXX	XXX	XXX	XXX		
3.02. Expense of expense charge returned (Federal Health Insurance Claims)	XXX	XXX	XX		XXX		
4.1. Real estate expenses							
4.2. Investment expenses not included elsewhere							
4.3. Aggregate write-ins for expenses							
17. General expenses reported December 31, prior year						21	63
18. General expenses reported December 31, current year							
19. Amounts receivable relating to unreported prior year							
20. Amounts receivable relating to unreported prior year							
21. General expenses paid during year (Lines 10 + 11 + 12 + 13 + 14)							
DETAILS OF WRITE-INS							
8.01							
8.02							
8.03							
8.04							
8.05							
8.06							
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9.99							
10.00							

EXHIBIT 3 - TAXES, LICENSES AND FEES (EXCLUDING FEDERAL INCOME TAXES)

	Insurance			4 Investment	5 Federal	6 Total
	1 Life	2 Nonlife and Health	3 All Other Lines of Business			
1. Real estate taxes						
2. State insurance department license and fees						
3. State taxes on premiums						
4. Sales tax on goods and services						
5. U.S. Social Security taxes						
6. All other taxes						
7. Taxes, licenses and fees reported						
8. Taxes, licenses and fees reported December 31, prior year						
9. Taxes, licenses and fees reported December 31, current year						
10. Taxes, licenses and fees paid during year (Lines 7 + 8)						

EXHIBIT 4 - DIVIDENDS OR REFUNDS

	Insurance	
	1 Life	2 Nonlife and Health
1. Applied to pay premium arrears		
2. Applied to shorten the endowment or term insurance period		
3. Applied to provide for interest on loans		
4. Applied to provide for unpaid dividends		
5. Total (Lines 1 through 4)		
6. Paid in cash		
7. Let on deposit		
8. Aggregate write-ins for dividends or refund arrears		
9. Total (Lines 2 through 5)		
10. Amount reported applied		
11. Provided for by the dividend or refund payable to the policyowner or beneficiary		
12. Total (Lines 9 and 10)		
13. Dividends or refunds held in trust for the policyowner		
14. Arrears provisions held in trust for dividend or refund arrears (not included in Line 11)		
15. Total (Lines 12 through 14)		
16. Total (Lines 12 through 15)		
17. Total (Lines 15 and 16)		
DETAILS OF WRITE-INS		
8.01		
8.02		
8.03		
8.04		
8.05		
8.06		
8.07		
8.08		
8.09		
8.10		
8.11		
8.12		
8.13		
8.14		
8.15		

EXHIBIT 6 – AGGREGATE RESERVES FOR ACCIDENT AND HEALTH CONTRACTS ^(a)

	1 Total	Comprehensive		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employee Health Benefits Plan	8 Title XXVII Medicare	9 Data XLX Contract	10 Credit AMLI	11 Disability Income	12 Long-Term Care	13 Other Health
		2 Individual	3 Group										
ACTIVE LIFE RESERVE													
1. Unearned premium reserves													
2. Additional contract reserves ^(b)													
3. Additional actuarial reserves - Asset Liability Analysis													
4. Reserve for future contingent benefits													
5. Reserve for rate credits													
6. Aggregate write-ins for reserves													
7. Totals (gross)													
8. Reinsurance ceded													
9. Totals (Net)													
CLAIM RESERVE													
10. Present value of amounts not yet due on claims													
11. Additional actuarial reserves-Asset Liability analysis													
12. Reserve for future contingent benefits													
13. Aggregate write-ins for reserves													
14. Totals (Gross)													
15. Reinsurance ceded													
16. Totals (Net)													
17. TOTAL (Net)													
18. FAIR EAR FUND INTEREST													
DETAILS OF WRITE-INS													
0601.													
0602.													
0603.													
0608. Summary of remaining write-ins for Line 6 from overflow page													
0699. Totals (Lines 0601 through 0603 plus 0608) (Line 6 above)													
1301.													
1302.													
1303.													
1308. Summary of remaining write-ins for Line 13 from overflow page													
1399. Totals (Lines 1301 through 1303 plus 1308) (Line 13 above)													

(a) Includes 1) tracks of business in rates; 2) contracts less than 2% of premium; and less than 2% of reserves; and 3) rate tables for unassigned sets (maximal block of business and which column is affected).

(b) Allow payment on a valuation standard used in valuing the contract, applying reserve basis, interest rate and method.

EXHIBIT 7 – DEPOSIT-TYPE CONTRACTS

	1	2	3	4	5	6
	Total	Guaranteed Interest Contracts	Annuities Contracts	Supplemental Contracts	Dividend Accumulations or Refunds	Premium and Other Deposit Items
1. Balance at the beginning of the year (including interest)						
2. Deposits received during the year						
3. Investment earnings credited to the account						
4. Other net change in reserves						
5. Fees and other charges assessed						
6. Surrender charges						
7. Net surrenders or withdrawn payments						
8. Other net transfers to or (from) Separate Accounts						
9. Balance at the end of current year before reinsurance (Lines 1-2+3+4-5-6+7-8)						
10. Reinsurance balance at the beginning of the year						
11. Net change in reinsurance assumed						
12. Net change in reinsurance ceded						
13. Reinsurance balance at the end of the year (Lines 10+11-12)						
14. Net balance at the end of current year after reinsurance (Lines 9-13)						

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EXHIBIT 8 – CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

PART 1 – Liability End of Current Year

	1	2	Ordinary			6	7		Accident and Health		
			3	4	5		7	8	9	10	11
	Total	Industrial Life	Life Insurance	Individual Annuities	Supplementary Contracts	Credit Life (Group and Individual)	Life Insurance	Annuities	Group	Credit (Group and Individual)	Other
1. Due and unpaid:											
1.1 Direct.....											
1.2 Reinsurance assumed.....											
1.3 Reinsurance ceded.....											
1.4 Net.....											
2. In course of settlement:											
2.1 Reputed.....											
2.1.1 Direct.....											
2.1.2 Reinsurance assumed.....											
2.1.3 Reinsurance ceded.....											
2.1.4 Net.....			(b)	(b)		(b)	(b)				
2.2 Other.....											
2.2.1 Direct.....											
2.2.2 Reinsurance assumed.....											
2.2.3 Reinsurance ceded.....											
2.2.4 Net.....			(b)	(b)		(b)	(b)	(b)	(b)	(b)	(b)
3. Incurred but unreported:											
3.1 Direct.....											
3.2 Reinsurance assumed.....											
3.3 Reinsurance ceded.....											
3.4 Net.....				(b)		(b)	(b)		(b)	(b)	(b)
4. TOTALS.....											
4.1 Direct.....											
4.2 Reinsurance assumed.....											
4.3 Reinsurance ceded.....											
4.4 Net.....			(b)	(b)		(b)	(b)		(b)	(b)	(b)

(a) Including matured endowments (but not guaranteed annual pure endowments) and unpaid amounts to \$..... in Column 2, \$..... in Column 3 and \$..... in Column 7.

(b) Include only portion of disability and accident and health claim liabilities for eligible "base" and "base plus" benefits. Reserves (including reinsurance assumed and net of reinsurance ceded) for unaccrued benefits for Ordinary Life Insurance \$..... Individual Annuities \$..... Credit Life (Group and Individual) \$..... and Group Life \$..... are included in Page 3, Line 1, (See Exhibit 3, Section on Disability/Disabled Lives); and for Group Accident and Health \$..... Credit (Group and Individual) Accident and Health \$..... and Other Accident and Health \$..... are included in Page 3, Line 2, (See Exhibit 3, Claim Reserves).

EXHIBIT 8 – CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS
PART 2 – Incurred During the Year

	1 Total	2 Individual Life (a)	Ordinary			6 Credit Life (Group and Individual)	Accident and Health				
			3 Life Insurance (b)	4 Individual Accidents	5 Supplementary Contracts		7 Annuities (Individual)	8 Annuities Group	9 Group	10 Credit (Group and Individual)	11 Other
1. Settlements during the year:											
1.1 Direct.....											
1.2 Reinsurance assumed.....											
1.3 Reinsurance ceded.....											
1.4 Net.....	(d)										
2. Liability December 31, current year from Part 1:											
2.1 Direct.....											
2.2 Reinsurance assumed.....											
2.3 Reinsurance ceded.....											
2.4 Net.....											
3. Amounts receivable from reinsurers December 31, current year.....											
4. Liability December 31, prior year:											
4.1 Direct.....											
4.2 Reinsurance assumed.....											
4.3 Reinsurance ceded.....											
4.4 Net.....											
5. Amounts receivable from reinsurers December 31, prior year.....											
6. Internal benefits:											
6.1 Direct.....											
6.2 Reinsurance assumed.....											
6.3 Reinsurance ceded.....											
6.4 Net.....											

- (a) Including manual endorsements (but not guaranteed annual pure endorsements) amounting to \$..... in Line 1, 1, 5..... in Line 1, 4
in Line 6.1 and 5..... in Line 6.4.
- (b) Including manual endorsements (but not guaranteed annual pure endorsements) amounting to \$..... in Line 1, 1, 5..... in Line 1, 4
in Line 6.1 and 5..... in Line 6.4.
- (c) Including manual endorsements (but not guaranteed annual pure endorsements) amounting to \$..... in Line 1, 1, 5..... in Line 1, 4
in Line 6.1 and 5..... in Line 6.4.
- (d) Includes \$..... premiums waived under total and permanent disability benefits.

Not for Distribution

EXHIBIT OF NONADMITTED ASSETS

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D1).....			
2. Stocks (Schedule D2)			
2.1 Preferred stocks.....			
2.2 Common stocks.....			
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens.....			
3.2 Other than first liens.....			
4. Real estate (Schedule A):			
4.1 Properties occupied by the company.....			
4.2 Properties held for the production of income.....			
4.3 Properties held for sale.....			
5. Cash (Schedule F-Part 1), cash equivalents (Schedule F-Part 2) and short-term investments (Schedule IA).....			
6. Contract loans.....			
7. Derivatives (Schedule DF).....			
8. Other investment assets (Schedule IA)			
9. Receivables for securities.....			
10. Securities pending retirement collateral assets (Schedule M)			
11. Aggregate write-ins for invested assets.....			
12. Securities, cash and invested assets (Lines 1 to 11).....			
13. Title points (for title insurers only).....			
14. Investment income due not accrued.....			
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection.....			
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.....			
15.3 Accrued retrospective premiums and contracts subject to re-determination.....			
16. Reinsurance:			
16.1 Amounts receivable from reinsurers.....			
16.2 Funds held by or deposited with reinsurer companies.....			
16.3 Other amounts receivable under reinsurance contracts.....			
17. Amounts receivable relating to minimal plans.....			
18.1 Current federal and foreign income tax receivable and interest thereon.....			
18.2 Refundable tax asset.....			
19. Guaranty funds receivable or on deposit.....			
20. Electronic data processing equipment and software.....			
21. Furniture and equipment, including health care delivery assets.....			
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			
23. Receivables from parties, other divisions and affiliates.....			
24. Health care and other amounts receivable.....			
25. Aggregate write-ins for other than invested assets.....			
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Accounts (Lines 12 to 25).....			
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			
28. Total (Lines 26 and 27).....			
DETAILS OF WRITE-INS			
1101.....			
1102.....			
1103.....			
1198. Summary of remaining write-ins for Line 11 from overflow page.....			
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....			
2501.....			
2502.....			
2503.....			
2598. Summary of remaining write-ins for Line 25 from overflow page.....			
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....			

NOTES TO FINANCIAL STATEMENTS

Not for Distribution

GENERAL INTERROGATORIES

PART I – COMMON INTERROGATORIES

GENERAL

- 1.1 Is the reporting entity a member of an Insurance Holding Company system consisting of two or more affiliated persons, one or more of which is an insurer? Yes | | No | |
 If yes, complete Schedule Y, Parts I, IA and 2.
- 1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal office in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations containing therein, or is the reporting entity subject to standard and disclosure requirements substantially similar to those required by such Act and regulations? Yes | | No | | NA | |
- 1.3 State Regulating? _____
- 1.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes | | No | |
- 1.5 If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. _____
- 2.1 Has any change been made during the year of this statement in the charter, bylaws, articles of incorporation, or similar documents of the reporting entity? Yes | | No | |
- 2.2 If yes, state of change? _____
- 3.1 State as of who date the latest financial examination of the reporting entity was made or is being made. _____
- 3.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examination balance sheet and not the date the report was completed and filed. _____
- 3.3 State as of what date the latest financial examination report became available to other states of the domicile from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). _____
- 3.4 By what department or departments? _____
- 3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Department? Yes | | No | | NA | |
- 3.6 Have all of the recommendations within the latest financial examination report been adopted? Yes | | No | | NA | |
- 4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for a contract a substantial part (more than 20 percent of any one or line of business measured on direct premiums) of: Yes | | No | |
 4.11 sales of new business? Yes | | No | |
 4.12 renewals? Yes | | No | |
- 4.2 During the period covered by this statement, did any salesperson, agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for a contract a substantial part (more than 20 percent of any major line of business measured on direct premiums) of: Yes | | No | |
 4.21 sales of new business? Yes | | No | |
 4.22 renewals? Yes | | No | |
- 5.1 Has the reporting entity been a party to a merger or acquisition during the period covered by this statement? Yes | | No | |
 If yes, complete and file the merger history schedule with the NAIC.
- 5.2 If yes, provide the name of the entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that has entered into a contract as a result of the merger or acquisition.

Name of Entity	² NAIC Company Code	¹ State of Domicile

- 6.1 Has the reporting entity had any Certificates of Authority, license or registrations (including contracts registration, if applicable) suspended or revoked from any external legal entity during the reporting period? Yes | | No | |
- 6.2 If yes, provide information: _____
- 7.1 Does any foreign (an Unincorporated State) person or entity directly or indirectly own 10% or more of the reporting entity? Yes | | No | |
- 7.2 If yes, _____

- 7.21 State the percentage of foreign control.
- 7.22 State the nationality(s) of the foreign person(s) or entity(s), or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).

¹ Nationality	² Type of Entity

GENERAL INTERROGATORIES

8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes No
 8.2 If response to 8.1 is yes, please identify the name of the bank holding company:

8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes No

8.4 If response to 8.3 is yes, please provide the names and locations (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary (federal) regulator.

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC
.....
.....
.....

9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?

10.1 Has the insurer been granted any exemptions or the prohibitions on such services provided by the certified independent professional accounting requirements as allowed in Section 7(f) of the Annual Financial Reporting Model Regulation (Model Auth. Rule), or comparable similar state law or regulation? Yes No

10.2 If the response to 10.1 is yes, provide information related to this exemption:

10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 15A of the Model Regulation, or substantially similar state law or regulation? Yes No

10.4 If the response to 10.3 is yes, provide information related to this exemption:

10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? Yes No N/A

10.6 If the response to 10.5 is no or N/A, please explain:

11. What is the name, address and affiliation (office/employee of the reporting entity or a consultant associated with an external consulting firm) of the individual providing the statement of account responsibilities?

12.1 Does the reporting entity own any securities of a real estate holding company or otherwise own real estate indirectly? Yes No

12.1.1 Name of real estate holding company: _____

12.1.2 Number of parcels involved: _____

12.1.3 Total book-adjusted carrying value: \$ _____

12.2 If yes, provide explanation:

FOR UNITED STATES BRANCHES OF A FOREIGN REPORTING ENTITY (ONLY):

13.1 What changes have been made during the year in the United States branch or the United States insurers of the reporting entity?

13.2 Does the government concern all business transacted for the reporting entity through its United States Branch on risks wherever located? Yes No

13.3 Have there been any changes made to any of the laws, rules or regulations during the year? Yes No

13.4 If answer to 13.3 is yes, has the domiciliary reporting entity state approved the changes? Yes No N/A

14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes No

- a. Honest and ethical conduct, including the careful handling of actual or apparent conflicts of interest between personal and professional relationships;
- b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
- c. Compliance with applicable governmental laws, rules and regulations;
- d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
- e. Accountability for adherence to the code.

14.2 If the response to 14.1 is no, please explain:

14.2 Has the code of ethics been amended? Yes No

14.2.1 If the response to 14.2 is yes, provide information related to amendment(s):

14.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes No

14.3.1 If the response to 14.3 is yes, provide the nature of any waiver(s):

GENERAL INTERROGATORIES

- 15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SWD Bank List? Yes [] No []
- 15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is original.

1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount

BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subcommittee committee thereof? Yes [] No []
17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subcommittee committees thereof? Yes [] No []
18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material information known or the put of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person? Yes [] No []

FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles or, Uniformly Accepted Accounting Principles? Yes [] No []
- 20.1 Total amount liberal during the year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.11 To directors and/or officers \$ _____
 - 20.12 To stockholders not officers \$ _____
 - 20.13 To stockholders, spouse or grand (interest only) \$ _____
- 20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.21 To directors or other officers \$ _____
 - 20.22 To stockholders not officers \$ _____
 - 20.23 To trustees, spouse or grand (interest only) \$ _____
- 21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? Yes [] No []
- 21.2 If yes, state the amount thereof at December 31 of the current year:
- 21.21 Received from others \$ _____
 - 21.22 Borrowed from others \$ _____
 - 21.23 Lended from others \$ _____
 - 21.24 Other \$ _____
- 22.1 Does this statement include payments by reason of a default in the Annual Statement by amounts other than guaranty fund or guaranty association assessments? Yes [] No []
- 22.2 If answer is yes:
- 22.21 Amount paid as losses or risk adjustment \$ _____
 - 22.22 Amount paid as expenses \$ _____
 - 22.23 Other amounts paid \$ _____
- 23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [] No []
- 23.2 If yes, indicate any amounts received from parent included in the Page 2 amount: \$ _____

INVESTMENT

- 24.01 Were all the stocks, bonds, and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity or its agent? (Other than securities lending programs addressed in 24.02) Yes [] No []
- 24.02 If no, give full and complete information, including dates, _____
- 24.03 For securities lending programs, provide a description of the program including value for collateral and amount of liberal securities, and whether collateral is carried in an off-balance sheet (an alternative is to reference Note 17 where this information is also provided) _____
- 24.04 Does the company's securities lending program meet the requirements for a conforming program as outlined in the Risk-Based Capital Instructions? Yes [] No [] N/A []
- 24.05 If answer to 24.04 is yes, report amount of collateral for conforming programs. \$ _____
- 24.06 If answer to 24.04 is no, report amount of collateral for other programs. \$ _____
- 24.07 Does your securities lending program require 102% (denom. securities) and 103% (single securities) from the counterparty at the onset of the contract? Yes [] No [] N/A []
- 24.08 Does the reporting entity re-stimul when the collateral received from the counterparty falls below 100%? Yes [] No [] N/A []
- 24.09 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending? Yes [] No [] N/A []

GENERAL INTERROGATORIES

24.00 For the reporting entity's security lending program, state the amount of the following as of December 31 of the current year:

24.100	Total fair value of borrowed collateral assets reported on Schedule DL, Parts 1 and 2	\$ _____
24.101	Total book adjusted/carrying value of borrowed collateral assets reported on Schedule DL, Parts 1 and 2	\$ _____
24.102	Total payable for securities lending reported on the liability page	\$ _____

25.01 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 21.03)

Yes | | No | |

25.02 If yes, state the amount owned at December 31 of the current year:

25.21	Subject to repurchase agreements	\$ _____
25.22	Subject to reverse repurchase agreements	\$ _____
25.23	Subject to dollar repurchase agreements	\$ _____
25.24	Subject to reverse dollar repurchase agreements	\$ _____
25.25	Placed under option agreements	\$ _____
25.26	Letter stock or securities restricted as to sale – excluding FHEB Capital Stock	\$ _____
25.27	FHEB Capital Stock	\$ _____
25.28	On deposit with state	\$ _____
25.29	On deposit with other regulatory bodies	\$ _____
25.30	Pledged as collateral – excluding collateral pledged to an FHEB	\$ _____
25.31	Pledged as collateral – FHEB – including reverse backing funding agreements	\$ _____
25.32	Other	\$ _____

25.03 For category (25.25) provide the following:

1 Nature of Restriction	2 Description	3 Amount

26.01 Does the reporting entity have any hedging transactions reported on Schedule DB?

Yes | | No | |

26.02 If yes, has a comprehensive description of the hedging program been made available to the department/state?

Yes | | No | | N/A | |

If no, attach a description with this statement.

LINTS 26.03-26.05: FORTUITE/FRACTIONAL REPORTING ENTITIES ONLY:

26.03 Does the reporting entity utilize derivatives to hedge variable annuity assets as a result of interest rate sensitivity?

Yes | | No | |

26.04 If the response to 26.03 is YES, does the reporting entity utilize:

26.41	Actuarial certification provision of SSAP No. 108	Yes <input type="checkbox"/> No <input type="checkbox"/>
26.42	Professional accounting practice	Yes <input type="checkbox"/> No <input type="checkbox"/>
26.43	Other actuarial guidance	Yes <input type="checkbox"/> No <input type="checkbox"/>

26.05 By reporting YES to 26.41, regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following:

Yes | | No | |

- The reporting entity has obtained explicit approval from the department/state.
- Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM 21.
- Actuarial certification has been obtained which certifies that the hedging strategy is incorporated within the establishment of VM-21 reserves, and is the result of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Assumptions.
- Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM 21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company for annual day-to-day risk mitigation efforts.

27.01 Were any preferred stocks or bonds issued on December 31 of the current year mandatorily convertible into equity or, at the option of the issuer, convertible into equity?

Yes | | No | |

27.02 If yes, state the amount issued at December 31 of the current year.

\$ _____

28 Excluding items on Schedule DL, Part 2 – Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities owned throughout the current year held pursuant to a custodial agreement with a bank or trust company in accordance with Section 1, III – General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC *Financial Condition Examination Handbook*?Yes | | No | |28.01 For signatories that comply with the requirements of the NAIC *Financial Condition Examination Handbook*, complete the following:

1 Name of Custodian(s)	2 Custodian's Address

GENERAL INTERROGATORIES

28.02 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

28.03 Have there been any changes, including name changes, in the custodian(s) listed in 28.01 during the current year?

Yes No

28.04 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason

28.05 Investment management Identify all investment advisers, investment managers, broker-dealers, including individuals that have authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. ("...that have access to the investment accounts", "...handle securities")

1 Name of Firm or Individual	2 Affiliated

28.057 For those firms/individuals listed in the table for Question 28.05, do any firms/individuals affiliated with the reporting entity (i.e., designated with a "Y") manage more than 10% of the reporting entity's **invested assets**?

Yes No

28.058 For firms/individuals affiliated with the reporting entity (i.e., designated with a "Y") listed in the table for Question 28.05, does the total assets under management aggregate to more than 50% of the reporting entity's **invested assets**?

Yes No

28.06 For those firms or individual/s listed in the table for 28.05 with an affiliation code of "Y" (or "Y" and "U" (see Filings)), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Number (LEIN)	4 Registered With	5 Investment Management Agreement (IMA) Filed

29.1 Does the reporting entity have any direct (or indirect) funds reported on Schedule D – Part 2 (diversified) according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 (15 U.S.C. 80(a)(1))?

Yes No

29.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
202099	TOTAL	

29.3 For each mutual fund listed in the table above, complete the following schedule:

1 Name of Mutual Fund (CUSIP # in table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation

GENERAL INTERROGATORIES

30. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1	2	3
	Statement (Adjusted) Value	Fair Value	Excess of Statement over Fair Value (-) or Fair Value over Statement (+)
30.1 Bonds			
30.2 Preferred Stocks			
30.3 Totals			

30.4 Describe the sources or methods utilized in determining the fair values:

- 31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes No
- 31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes No
- 31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a suitable pricing source for purposes of disclosure for Schedule D:

32.1 Have all the filing requirements of the *Payment and Forfeitures Manual of the NAIC Investment Policy Officer* been followed? Yes No

32.2 If no, list exceptions:

33. By self-designating SGI securities, the reporting entity is certifying the following elements of each self-designated SGI security:

- Documentation necessary to permit a full credit analysis of the security does not exist, or a NAIC CRP credit rating for an FF or PL security is unavailable.
- Issuer or obligor is current on all estimated interest and principal payments.
- The issuer has no actual expectation of default payment of all estimated interest and principal.

Has the reporting entity self-designated SGI securities? Yes No

34. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:

- The security was purchased prior to January 1, 2018.
- The reporting entity is holding capital requirements in the NAIC Designation reported for the security.
- The NAIC Designation was derived from the credit rating assigned by a NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the issuer, or available for examination by state insurance regulators.
- The reporting entity is not permitted to share this credit rating with a PL security with the SVO.

Has the reporting entity self-designated PLGI securities? Yes No

35. By designating DE to a Schedule DA non-registered private fund, the reporting entity is certifying the following elements of each self-designated DE fund:

- The shares were purchased prior to January 1, 2019.
- The reporting entity is holding capital requirements with the NAIC Designation reported for the security.
- The security had a public credit rating with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
- The fund only or predominantly holds assets in its portfolio.
- The current reported NAIC Designation was derived from the public credit rating with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
- The public credit rating with annual surveillance assigned by an NAIC CRP has not lapsed.

Has the reporting entity self-designated DE to Schedule DA non-registered private funds that complied with the above criteria? Yes No

OTHER

36. Amount of payments to trade associations, service organizations and educational training programs, if any? \$ _____

36.1 List the names of the trade association and the amount paid if any such payment represented 1% or more of the total payments to trade associations, service organizations, and educational training programs during the period covered by this statement.

1	2
Name	Amount Paid
	\$
	\$
	\$
	\$

GENERAL INTERROGATORIES

- 55.1 Amount of payments for legal expenses, if any? \$ _____
- 55.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid
	\$ _____
	\$ _____
	\$ _____
	\$ _____

- 55.1 Amount of payments for expenditures in connection with issues before legislative bodies, officers, or departments of government, if any? \$ _____
- 55.2 List the name of the firm and the amount paid to any such payment represented 25% or more of the total payments expenditures in connection with issues before legislative bodies, officers, or departments of government during the period covered by this statement.

1 Name	2 Amount Paid
	\$ _____
	\$ _____
	\$ _____
	\$ _____

Not for Distribution

GENERAL INTERROGATORIES

PART 2—LIFE, ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES INTERROGATORIES

Life, Accident and Health Companies/Fraternal Benefit Societies

- 1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? Yes | | No | |
- 1.2 If yes, indicate premium earned on U.S. business only. \$ _____
- 1.3 What portion of item 1.2 is not reported on the Medicare Supplement Insurance Experience Exhibit?
1.3.1 Reason for excluding: _____ \$ _____
- 1.4 Indicate amount of annual premium attributable to Casualty and/or Other Alliances included in item 1.2 above. \$ _____
- 1.5 Indicate total incurred claims on all Medicare Supplement Insurance. \$ _____
- 1.6 Individual policies:
- Most current three years:
- 1.6.1 Total premium earned \$ _____
- 1.6.2 Total incurred claims \$ _____
- 1.6.3 Number of covered lives _____
- All years prior to most current three years:
- 1.6.4 Total premium earned \$ _____
- 1.6.5 Total incurred claims \$ _____
- 1.6.6 Number of covered lives _____
- 1.7 Group policies:
- Most current three years:
- 1.7.1 Total premium earned \$ _____
- 1.7.2 Total incurred claims \$ _____
- 1.7.3 Number of covered lives _____
- All years prior to most current three years:
- 1.7.4 Total premium earned \$ _____
- 1.7.5 Total incurred claims \$ _____
- 1.7.6 Number of covered lives _____
2. Health Test:
- | | Current Year | 2
Prior Year | |
|-------------------------------|--------------|-----------------|--|
| 2.1 Premium Revenue | \$ _____ | \$ _____ | |
| 2.2 Premiums from other | \$ _____ | \$ _____ | |
| 2.3 Premiums from (to) (A)(4) | \$ _____ | \$ _____ | |
| 2.4 Reserve Net Change | \$ _____ | \$ _____ | |
| 2.5 Reserve Decrease/Increase | \$ _____ | \$ _____ | |
| 2.6 Return Ratio (A)(2.1) | | | |
- 3.1 Does the reporting entity have Separate Accounts? Yes | | No | |
- 3.2 If yes, has a Separate Accounts statement been filed with this Department? Yes | | No | | N/A | |
- 3.3 What portion of capital and surplus funds of the reporting entity covered by assets in the Separate Accounts statement, is not currently distributable from the Separate Accounts to the general account for use by the general account? \$ _____
- 3.4 State the authority under which Separate Accounts are maintained: _____
- 3.5 Was any of the reporting entity's Separate Accounts business reinsured as of December 31? Yes | | No | |
- 3.6 Has the reporting entity assumed any reinsurance by Separate Accounts business as of December 31? Yes | | No | |
- 3.7 If the reporting entity has assumed Separate Accounts business, how much, if any, reinsurance is claimed receivable for reinsurance of Separate Accounts reserve expense allowances is included as a negative amount in the liability for "Transfers to Separate Accounts due to assumed (net)?" \$ _____
4. For reporting entities having reannuities in another state where the insurer purchasing the annuities has obtained a release of liability from the claimant (payer) as the result of the purchase of an annuity from the reporting entity only:
- 4.1 Amount of loss reserves established by the annuitant during the current year \$ _____
- 4.2 List the name and location of the insurance company purchasing the annuities and the statement value or the purchase price of the annuities:

1 P&C Insurance Company and Location	2 Statement Value (at Purchase Date of Annuity E.g., Present Value)
	\$ _____
	\$ _____
	\$ _____
	\$ _____

GENERAL INTERROGATORIES

PART 2 – LIFE, ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES INTERROGATORIES

- 5.1 Do you act as a custodian for health savings accounts? Yes No
- 5.2 If yes, please provide the amount of custodial funds held as of the reporting date. \$ _____
- 5.3 Do you act as an administrator for health savings accounts? Yes No
- 5.4 If yes, please provide the balance of the funds administered as of the reporting date. \$ _____
- 6.1 Are any of the captive affiliates reported on Schedule S, Part 2, authorized reinsurers? Yes No NA
- 6.2 If the answer to 6.1 is yes, please provide the following:

1 Company Name	2 NAIC Company Code	3 Jurisdiction	4 Reinsure Credit	Assets Surpassing Reserve Credit		
				5 Letters of Credit	6 Trust Agreements	7 Other

- 8 Provide the following for individual ordinary life insurance policies (U.S. business only) for the current year (prior to maturity, renewal or cash):
 - 8.1 Direct Premium Written \$ _____
 - 8.2 Total Internal Claims \$ _____
 - 8.3 Number of Unpaid Losses _____

*Ordinary Life Insurance Includes:
Term (whether full underwriting, limited underwriting, or issue only (see 10.1))
Whole Life (whether full underwriting, limited underwriting, or issue only (see 10.1))
Variable Life (with or without secondary guarantee)
Universal Life (with or without secondary guarantee)
Variable Universal Life (with or without secondary guarantee)

- 9 Is the reporting entity licensed or chartered, registered, qualified, eligible or licensed in more than one state? Yes No
- 10 If so, does the reporting entity assume reinsurer business that covers risks reported in other insurance state other than the state of domicile of the reporting entity? Yes No

Life, Accident and Health Companies Only:

- 11 Are personnel or facilities of this reporting entity used by another entity or entities or are personnel or facilities of another entity or entities used by this reporting entity (except for activities such as administration of group term life insurance, group term contracts and joint mortality or morbidity studies)? Yes No
- 12 Net reimbursement of such expenses between reporting entities:
 - 12.1 Paid \$ _____
 - 12.2 Received \$ _____
- 13.1 Does the reporting entity write any guaranteed issue contracts? Yes No
- 13.2 If yes, what amount pertaining to these contracts is included in:
 - 13.21 Page 3, Line 7 \$ _____
 - 13.22 Page 4, Line 7 \$ _____
- 13.3 For stock reporting entities only:
 - 13.3.1 Total amount paid in by stockholders for surplus funds since reorganization of the reporting entity: \$ _____
 - 13.3.2 Total dividends paid stockholders since reorganization of the reporting entity:
 - 13.3.2.1 Cash \$ _____
 - 13.3.2.2 Stock \$ _____
- 13.4 Does the reporting entity reinsure any Workers' Compensation Carry-Out business declared as Reinsurance (including non-accident reinsurance) assumed by life and health insurers of medical, wage loss and death benefits of the occupational injury exposures, but not the employer's liability exposures, of business originally written as workers' compensation insurance? Yes No
- 13.5 If yes, has the reporting entity completed the Workers' Compensation Carry-Out Supplement to the Annual Statement? Yes No
- 13.6 If 13.4 is Yes, the amounts of annual premiums and claims incurred in this statement are:

	1 Reinsurer Assumed	2 Reinsurer Ceded	3 Net Reinsured
13.6.1 Total premium	_____	_____	_____
13.6.2 Paid claims	_____	_____	_____
13.6.3 Claim liability and reserve (beginning of year)	_____	_____	_____
13.6.4 Claim liability and reserve (end of year)	_____	_____	_____
13.6.5 Incurred claims	_____	_____	_____

GENERAL INTERROGATORIES

PART 2 – LIFE, ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES INTERROGATORIES

13. If there are several required individual annuities with amount paid (above \$1,000.00), the distribution of the amounts reported in Lines 13.31 and 13.34 for Column (1) is as:

	Amount per Annuity	1 Lapsed Premium	2 Claim Liability and Reserve
13.41	<\$25,000	.....	.....
13.42	\$25,000 — 99,999	.....	.....
13.43	\$100,000 — 249,999	.....	.....
13.44	\$250,000 — 999,999	.....	.....
13.45	\$1,000,000 or more	.....	.....

13.5 What portion of earned premium reported in 13.31, Column 1, was assumed from pools? %

Fraternal Benefit Societies Only:

- 14. Is the reporting entity organized and conducted on the lodge system, with executive body of work and representative body of governance? Yes [] No []
- 15. How often are meetings of the subordinate branches required to be held?
- 16. How are the subordinate branches represented in the supreme or governing body?
- 17. What is the basis of representation in the governing body?
- 18.1 How often are regular meetings of the governing body held?
- 18.2 When was the last regular meeting of the governing body held?
- 18.3 When and where will the next regular or special meeting of the governing body be held?
- 18.4 How many members of the governing body attended the last regular meeting?
- 18.5 How many of the same were delegates of the subordinate branches?
- 19. How are the expenses of the governing body defrayed?
- 20. When and by whom are the officers and directors elected?
- 21. What are the qualifications for membership?
- 22. What are the limiting ages for admission?
- 23. What is the minimum and maximum insurance that may be issued on any one life?
- 24. Is a medical examination required before issuing a benefit certificate or application? Yes [] No []
- 25. Are applicants admitted to membership without filing an application with and becoming a member of a local branch by ballot and insurance? Yes [] No []
- 26.1 Are notices of the payments required one to the members? Yes [] No [] N/A []
- 26.2 If yes, do the notices state the purpose for which the money is to be used? Yes [] No []
- 27. What portions of first and subsequent year's payments may be used for management expenses?
 - 27.11 For Year:
 - 27.12 For Subsequent Years:
- 28.1 Is any part of the mortality, disability, emergency or reserve fund or the amounts from or payments to the same used for expenses? Yes [] No []
- 28.2 If so, what amount and for what purpose?
- 29.1 Does the reporting entity pay an old-age disability benefit? Yes [] No []
- 29.2 If yes, at what age does the benefit commence?
- 30.1 Has the constitution or laws of the reporting entity been amended during the year? Yes [] No []
- 30.2 If yes, when?
- 31. Have you filed with this Department all forms of benefit applications issued, a copy of the constitution and all of the laws, rules and regulations in force at the present time? Yes [] No []
- 32.1 State whether all or a portion of the regular income contributions were waived during the current year under premium-paying certificates on account of meeting attained age membership requirements. Yes [] No []
- 32.2 If yes, was an additional reserve maintained in 2010? Yes [] No [] N/A []
- 32.3 If yes, explain:
- 33.1 Has the reporting entity, directly or indirectly, or shared any company, order, society, or association during the year? Yes [] No []
- 33.2 If yes, was there any financial agreement, an understanding, written or oral, expressed or implied, by means of which any officer, director, trustee, or any other person, firm, corporation, society or association, received or is to receive any fee, commission, emolument, or compensation of any kind, in any way or in connection with, or in account of such membership, association, subscription, or transfer of membership? Yes [] No [] N/A []
- 34. Has any person or board, officer, director, trustee, incorporator, or any other person, or any firm, corporation, society or association, any claim of any nature whatsoever against this reporting entity, which is not included in the facilities on Page 3 of this statement? Yes [] No []
- 35.1 Does the reporting entity have outstanding assessments in the form of loans against policy benefits that have increased surplus? Yes [] No []
- 35.2 If yes, what is the date of the original loan and the total outstanding balance of loans that remain in surplus?

Date	Outstanding Loan Amount
\$	
\$	
\$	

FIVE-YEAR HISTORICAL DATA

Show amounts in whole dollars only, unless noted; show percentages in unrounded form, i.e., 17.6
\$000 omitted for amounts of life insurance

	1 2015	2 2016	3 2017	4 2018	5 2019
Life Insurance in Force					
(Exhibit of Life Insurance)					
1. Ordinary—whole life and endowment (Line 34, Col. 4)					
2. Ordinary term (Line 21, Col. 4, less Line 34, Col. 4)					
3. Credit life (Line 21, Col. 6)					
4. Group, excluding FEGLI/SGLI (Line 21, Col. 9 less Lines 43 & 44, Col. 4)					
5. Industrial (Line 21, Col. 2)					
6. FEGLI/SGLI (Lines 43 & 44, Col. 4)					
7. Total (Line 21, Col. 19)					
7.1 Total in force for which VM-20 deterministic/stochastic reserves are calculated				XXX	XXX
New Business Issues					
(Exhibit of Life Insurance)					
8. Ordinary—whole life and endowment (Line 34, Col. 2)					
9. Ordinary term (Line 2, Col. 4, less Line 34, Col. 2)					
10. Credit life (Line 2, Col. 6)					
11. Group (Line 2, Col. 9)					
12. Industrial (Line 2, Col. 2)					
13. Total (Line 2, Col. 10)					
Premium Income—Lines of Business					
(Exhibit) — Part 11					
14. Industrial life (Line 204, Col. 2)					
15.1 Ordinary life insurance (Line 204, Col. 3)					
15.2 Ordinary individual annuities (Line 204, Col. 4)					
16. Credit life (group and individual) (Line 204, Col. 5)					
17.1 Group term insurance (Line 204, Col. 6)					
17.2 Group annuities (Line 204, Col. 7)					
18.1 A & H—group (Line 204, Col. 8)					
18.2 A & H—credit (group and individual) (Line 204, Col. 9)					
18.3 A & H—term (Line 204, Col. 10)					
19. Aggregate of all other lines of business (Line 204, Col. 11)					
20. Total					
Balance Sheet					
(Pages 2 and 3)					
21. Total admitted assets excluding Separate Accounts business (Page 2, Line 26, Col. 3)					
22. Total liabilities excluding Separate Accounts business (Page 3, Line 3)					
23. Aggregate life reserves (Page 3, Line 1)					
23.1 Excess VM-20 deterministic/stochastic reserve over NPR related to Line 7.1				XXX	XXX
24. Aggregate A & H reserves (Page 3, Line 2)					
25. Deposit-type contract funds (Page 3, Line 3)					
26. Asset valuation reserve (Page 3, Line 24, 21)					
27. Capital (Page 3, Lines 29 & 30)					
28. Surplus (Page 3, Line 37)					
Cash Flow (Page 5)					
29. Net cash from operations (Line 11)					
Risk-Based Capital Analysis					
30. Total adjusted capital					
31. Authorized control level risk-based capital					
Percentage Distribution of Cash, Cash Equivalents and Invested Assets					
(Page 2, Col. 3; Line No. Page 3, Line 10; Col. 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100)					
32. Bonds (Line 1)					
33. Stocks (Lines 2, 1 and 2)					
34. Mortgage loans on real estate (Line 1, Line 2)					
35. Real estate (Lines 1, 1, 1, 2 and 1, 2)					
36. Cash, cash equivalents and short-term investments (Line 5)					
37. Contract loans (Line 6)					
38. Derivatives (Page 2, Line 7)					
39. Other invested assets (Line 4)					
40. Receivables for securities (Line 9)					
41. Securities lending/reinvested collateral assets (Line 10)					
42. Aggregate write-ups for invested assets (Line 11)					
43. Cash, cash equivalents and invested assets (Line 12)	100	100	100	100	100

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2016	2 2018	3 2017	4 2016	5 2015
Investment in Parent, Subsidiaries and Affiliates					
44. Affiliated bonds (See: D Summary, Line 12, Col. 1)					
45. Affiliated preferred stocks (See: D Summary, Line 18, Col. 1)					
46. Affiliated common stocks (See: D Summary, Line 24, Col. 1)					
47. Affiliated short-term investments (partial included in Schedule DA, Verification, Col. 5, Line 16)					
48. Affiliated mortgage loans earned income					
49. All other affiliated					
50. Total of above Lines 44 to 49					
51. Total investment in parent included in Lines 44 to 49 above					
Total Surrendered and Admitted Assets					
52. Total nonadmitted assets (Page 3, Line 98, Col. 2)					
53. Total admitted assets (Page 3, Line 28, Col. 3)					
Investment Data					
54. Net investment income (Exhibit of Net Investment Income)					
55. Realized capital gains (losses) (Page 4, Line 34, Column 1)					
56. Unrealized capital gains (losses) (Page 4, Line 38, Column 1)					
57. Total of above Lines 54, 55 and 56					
Benefits and Reserve Increase (Page 5)					
58. Total contract contract benefits-life (Line 10, 11, 12, 13, 14 and 15, Col. 1 minus Lines 10, 11, 12, 13, 14 and 15, Col. 6, 7 and 8)					
59. Total contract contract benefits-A & H (Lines 13 & 14, Col. 6)					
60. Increase in life reserves other than group and annuities (Line 19, Col. 2)					
61. Increase in A & H reserves (Line 19, Col. 6)					
62. Dividends to policyholders and refunds to members (Line 30, Col. 3)					
Operating Percentages					
63. Insurance expense percent (Page 6, Col. 1, Lines 21, 22 & 23 less Line 6) (Page 6, Col. 1, Line 1 plus Exhibit 7, Col. 2, Line 2) x 100/100					
64. Lapse percent (ordinary only) (Exhibit of Life Insurance, Column 4, Lines 14 & 15) x 100/100 (Exhibit of Life Insurance, Column 4, Lines 1 & 21) x 100/100					
65. A & H loss percent (Schedule H, Part 1, Lines 5 & 6, Col. 2)					
66. A & H cost containment percent (Schedule H, Part 1, Line 4, Col. 3)					
67. A & H expense percent including cost containment programs (Schedule H, Part 1, Line 10, Col. 2)					
A & H Claim Reserve Adequacy					
68. Incurred losses on prior year's claims-group health (Sch. H, Part 3, Line 1, Col. 2)					
69. Prior year's claim liability and reserve-group health (Sch. H, Part 3, Line 1, Col. 2)					
70. Incurred losses on prior year's claims health other than group (Sch. H, Part 3, Line 1, Col. 2)					
71. Prior year's claim liability and reserve health other than group (Sch. H, Part 3, Line 1, Col. 2 less Col. 2)					
Net State Earned Reserves- Life: Dividends to Policyholders minus: Withdrawals and Federal Income Taxes by Lines of Business (Page 6, Line 1)					
72. Industrial life (Page 6, Col. 2)					
73. Ordinary life (Page 6, Col. 1 less Col. 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12)					
74. Ordinary-individual annuities (Page 6, Col. 4)					
75. Ordinary-supplementary contracts					
76. Credit life (Page 6, Col. 10 plus Page 6, Col. 7)					
77. Group life (Page 6, Col. 1 less Col. 2 and 9)					
78. Group annuities (Page 6, Col. 3)					
79. A & H group (Page 6, Col. 3)					
80. A & H benefit (Page 6, Col. 3)					
81. A & H benefit (Page 6, Col. 3 less Col. 4 and 10)					
82. Aggregate of all other lines of business (Page 6, Line 8)					
83. Federal (Page 6, Col. 2)					
84. Total (Page 6, Col. 2)					

NOTE: If a party to a merger during the two most recent years of this exhibit has been retained due to a merger in compliance with the disclosure requirements of NASB No. 3 - Accounting Changes and Corrections of Errors

Yes | | No | |

DIRECT BUSINESS IN THE STATE OF

DURING THE YEAR

LIFE INSURANCE

NAIC Group Code: _____

NAIC Group Code: _____

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1		2		3		4		5	
	Gross		Gross (including Dividends)		Net		Total (1)		Total	
1. Life insurance										
2. Annuity contracts										
3. Group-term life insurance										
4. Other considerations										
5. Total (Sum of lines 1-4)										
DIRECT INVESTMENTS HELD BY YOUR BUSINESS (NET TO YOU NETS)										
Life Insurance:										
6.1. Total investments reported										
6.2. Acquisition expenses reported										
6.3. Acquisition expenses paid for the first 12 months (reported as ongoing expense)										
6.4. Other										
6. Total (Sum of lines 6.1-6.4)										
Annuities:										
7.1. Total investments reported										
7.2. Acquisition expenses reported										
7.3. Other										
7. Total (Sum of lines 7.1-7.3)										
8. Grand Total (Sum of lines 5, 6, 7)										
INDIRECT CLAIMS AND BENEFITS PAID										
9. Total benefits										
10. Interest on claims										
11. Acquisition expenses										
12. Surrender charges and benefits on failed contracts										
13. Acquisition expenses for failed contracts and benefits paid										
14. All other benefits, costs, and other liabilities										
15. Total										
NET GROSS PREMIUMS										
16. Total										
17. Total										
18. Total										
19. Total										
20. Total										
21. Total										
22. Total										
23. Total										
24. Total										
25. Total										
26. Total										
27. Total										
28. Total										
29. Total										
30. Total										
31. Total										
32. Total										
33. Total										
34. Total										
35. Total										
36. Total										
37. Total										
38. Total										
39. Total										
40. Total										
41. Total										
42. Total										
43. Total										
44. Total										
45. Total										
46. Total										
47. Total										
48. Total										
49. Total										
50. Total										

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Net Premium	Direct Premium	Total (1) + (2) + (3)	Direct Losses	Direct Expenses
51. Group-term life					
52. Individual health and accident insurance					
53. Group-term health and accident insurance					
54. Other health and accident insurance					
55. Total (Sum of lines 51-54)					
56. Total (Sum of lines 51-54)					
57. Total (Sum of lines 51-54)					
58. Total (Sum of lines 51-54)					
59. Total (Sum of lines 51-54)					
60. Total (Sum of lines 51-54)					
61. Total (Sum of lines 51-54)					
62. Total (Sum of lines 51-54)					
63. Total (Sum of lines 51-54)					
64. Total (Sum of lines 51-54)					
65. Total (Sum of lines 51-54)					
66. Total (Sum of lines 51-54)					
67. Total (Sum of lines 51-54)					
68. Total (Sum of lines 51-54)					
69. Total (Sum of lines 51-54)					
70. Total (Sum of lines 51-54)					
71. Total (Sum of lines 51-54)					
72. Total (Sum of lines 51-54)					
73. Total (Sum of lines 51-54)					
74. Total (Sum of lines 51-54)					
75. Total (Sum of lines 51-54)					
76. Total (Sum of lines 51-54)					
77. Total (Sum of lines 51-54)					
78. Total (Sum of lines 51-54)					
79. Total (Sum of lines 51-54)					
80. Total (Sum of lines 51-54)					
81. Total (Sum of lines 51-54)					
82. Total (Sum of lines 51-54)					
83. Total (Sum of lines 51-54)					
84. Total (Sum of lines 51-54)					
85. Total (Sum of lines 51-54)					
86. Total (Sum of lines 51-54)					
87. Total (Sum of lines 51-54)					
88. Total (Sum of lines 51-54)					
89. Total (Sum of lines 51-54)					
90. Total (Sum of lines 51-54)					
91. Total (Sum of lines 51-54)					
92. Total (Sum of lines 51-54)					
93. Total (Sum of lines 51-54)					
94. Total (Sum of lines 51-54)					
95. Total (Sum of lines 51-54)					
96. Total (Sum of lines 51-54)					
97. Total (Sum of lines 51-54)					
98. Total (Sum of lines 51-54)					
99. Total (Sum of lines 51-54)					
100. Total (Sum of lines 51-54)					

EXHIBIT OF LIFE INSURANCE
(\$1000 Omitted for Amounts of Life Insurance)

	Individual		Company		Total Life (Personal Subtotal)		Group		Total Amount of Insurance
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance	5 Number of Individual Policies and Group Certificates	6 Amount of Insurance	7		
							8 Wholly Owned	9 Certificates	
1. In force end of prior year.....									
2. Issued during year.....									
3. Reinsurance assumed.....									
4. (Revised during year.....)									
5. Increased during year (net).....									
6. Surrenders, Lines 2 to 5.....									
7. Adjustments/dividends during year.....	XXX		XXX		XXX		XXX		
8. Aggregate write-ins for increases.....									
9. Totals (Lines 1 and 6 to 8).....									
10. Deductions during year.....									
11. Death.....							XXX		
12. Maturity.....							XXX		
13. Disability.....							XXX		
14. Lapse.....									
15. Surrender.....									
16. Conversion.....							XXX	XXX	XXX
17. Decreased face.....									
18. Reinsurance.....									
19. Aggregate write-ins for decreases.....									
20. Totals (Lines 10 to 19).....									
21. In force end of year (8) (Line 9 minus Line 20).....	XXX		XXX		XXX		XXX	XXX	
22. Reinsurance ended end of year.....	XXX		XXX		XXX		XXX	XXX	
23. Line 21 minus Line 22.....	XXX		XXX		XXX	101	XXX	XXX	
DETAILS OF WRITE-INS									
0801.....									
0802.....									
0803.....									
0808. Summary of remaining write-ins for Line 8 from overflow page.....									
0809. Totals (Lines 0801 through 0803 plus 0808) (Line 8 above).....									
901.....									
902.....									
903.....									
908. Summary of remaining write-ins for Line 19 from overflow page.....									
909. Totals (Lines 901 through 903 plus 908) (Line 19 above).....									

Life, Accident and Health Companies Only:

(4) Group 5..... Individual.....

Financial Institutions Only:

(9) End-of-insurance proceeds, including death of insured, are available to a beneficiary number of certificates..... Amount \$.....
 Additional available death benefits included in line 22 are amount of \$..... From the society's voluntary contribution from accounts for general purposes of the society and fully paid-up certificates? YES [] NO [] If no, how are accounts used?

EXHIBIT OF LIFE INSURANCE
(\$000 Omitted for Amounts of Life Insurance) (Continued)

ADDITIONAL INFORMATION ON INSURANCE IN FORCE END OF YEAR

	Term		Ordinary	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance
27. Additions by the Insurer	XXX		XXX	
28. Other policy terminations				
29. Death returns insurance	XXX	XXX		

ADDITIONAL INFORMATION ON ORDINARY INSURANCE

	In Force During Year (Included in Line 2)		In Force End of Year (Included in Line 2)	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance
Term Insurance Policies Issued To or Renewed				
29. Term auto endorsement				
30. Term auto add-on				
31. Other term insurance of existing	XXX		XXX	
32. Other term insurance	XXX		XXX	
33. Deaths (Lines 29 to 32)				
Reversions (Lines 2 and 3)				
34. Term additions	XXX			
35. Fully earned term insurance	XXX	XXX		
36. Fully earned whole and endowment				
37. Total (Lines 34 to 36)				

CLASSIFICATION OF AMOUNT OF INSURANCE BY PARTICIPATING STATUS

	In Force During Year (Included in Line 2)		In Force End of Year (Included in Line 2)	
	1 Not Participating	2 Participating	3 Not Participating	4 Participating
38. Term				
39. Ordinary				
40. Credit Life (Group and Individual)				
41. Group				
42. Total (Lines 38 to 41)				

ADDITIONAL INFORMATION ON CREDIT LIFE AND GROUP INSURANCE

	Credit Life		Group	
	1 Number of Policies with Policy and Group Certificates	2 Amount of Insurance	3 Number of Certificates	4 Amount of Insurance
43. Amount of insurance included in Line 2 related to the corporate	XXX			
44. Number of lives end of year of the number under a fixed amount of insurance on a premium basis		XXX		XXX
45. Excess employee Group Life Insurance included in Line 2				
46. Serviceable Group Life Insurance included in Line 2				
47. Group Premium Insurance included in Line 2				

ADDITIONAL ACCIDENTAL DEATH BENEFITS

48. Amount of additional accidental death benefits in force end of year on the following policies	
---	--

BASIS OF CALCULATION OF ORDINARY TERM INSURANCE

49. State type of insurance or (4)(1) ordinary term insurance explained in Part 1, Items 1, Mortgage Protection, etc., policies and (4)(2) term insurance on term and children under Parents, Parents and Children, etc., policies and risks included in	
49.1	
49.2	

POLICIES WITH DISABILITY PROVISIONS

Disability Provision	Individual		Ordinary		Credit		Group	
	1 Number of Policies	2 Amount of Insurance	3 Number of Policies	4 Amount of Insurance	5 Number of Policies	6 Amount of Insurance	7 Number of Certificates	8 Amount of Insurance
50. Waiver of Premium								
51. Disability Income								
52. Death Benefits			XXX	XXX				
53. Other								
54. Total	(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)

(a) See the Annual Statement of Receipts section of this annual statement for further details.

EXHIBIT OF NUMBER OF POLICIES, CONTRACTS, CERTIFICATES, INCOME PAYABLE AND ACCOUNT VALUES IN FORCE FOR SUPPLEMENTARY CONTRACTS, ANNUITIES, ACCIDENT & HEALTH AND OTHER POLICIES

SUPPLEMENTARY CONTRACTS

	Ordinary		Group	
	1 Iss. / exp. Life Contracts	2 Not Issued / exp. Life Contracts	3 Iss. / exp. Life Contracts	4 Not Issued / exp. Life Contracts
1. In force end of year				
2. Issued during year				
3. Reinsurance assumed				
4. In force end of year (total)				
5. Total (Lines 1 to 4)				
Delinquencies during year:				
6. Delinquent (total)				
7. Reinsurance ceded				
8. Total (Lines 6 to 7)				
9. In force end of year				
10. Amount in deposit		00		00
11. Income now payable				
12. Amount of income payable	00	00	00	00

ANNUITIES

	Policy		Group	
	1 Immediate	2 Deferred	3 Life only	4 Contingent
1. In force end of year				
2. Issued during year				
3. Reinsurance assumed				
4. In force end of year (total)				
5. Total (Lines 1 to 4)				
Delinquencies during year:				
6. Delinquent (total)				
7. Reinsurance ceded				
8. Total (Lines 6 to 7)				
9. In force end of year				
Income now payable:				
10. Amount of income payable	00	000	000	00
Delinquencies to be paid:				
11. Amount balance	N/A	00	N/A	00
12. Amount balance	N/A		N/A	00

ACCIDENT AND HEALTH INSURANCE

	Group		Other		Other	
	1		2		3	
	Contracts	Premiums in Force	Contracts	Premiums in Force	Contracts	Premiums in Force
1. In force end of year						
2. Issued during year						
3. Reinsurance assumed						
4. In force end of year (total)		N/A		N/A		N/A
5. Total (Lines 1 to 4)		0000		0000		0000
Delinquencies during year:						
6. Delinquent (total)		N/A		N/A		N/A
7. Reinsurance ceded		N/A		N/A		N/A
8. Total (Lines 6 to 7)		0000		0000		0000
9. In force end of year		00		00		00

DEPOSIT FUNDS AND DIVIDEND ACCUMULATIONS

	1		2	
	Deposit Funds Contracts	Dividend Accumulations Contracts	Deposit Funds Contracts	Dividend Accumulations Contracts
1. In force end of year				
2. Issued during year				
3. Reinsurance assumed				
4. In force end of year (total)				
5. Total (Lines 1 to 4)				
Delinquencies during year:				
6. Delinquent (total)				
7. Reinsurance ceded				
8. Total (Lines 6 to 7)				
9. In force end of year				
10. Amount of deposit balance	00		00	

00. See the annual Audited Financial Report section of the annual statement for details.

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE
Interest Maintenance Reserve

	1 Amount
1. Reserve as of December 31, prior year
2. Current year's realized pre-tax capital gains/(losses) of S..... transferred into the reserve net of taxes of \$
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)
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 1).....
6. Reserve as of December 31, current year (Line 4 minus Line 5)

Year of Amortization	Amortization			
	1 Reserve as of December 31, Prior Year	2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3 Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	4 Balance Before Reduction for Current Year's Amortization (Cols. 1+2+3)
1. 2019
2. 2020
3. 2021
4. 2022
5. 2023
6. 2024
7. 2025
8. 2026
9. 2027
10. 2028
11. 2029
12. 2030
13. 2031
14. 2032
15. 2033
16. 2034
17. 2035
18. 2036
19. 2037
20. 2038
21. 2039
22. 2040
23. 2041
24. 2042
25. 2043
26. 2044
27. 2045
28. 2046
29. 2047
30. 2048
31. 2049 and Later
32. Total (Lines 1 to 31)

ASSET VALUATION RESERVE

	Default Component			Total Component			
	1 Other Than Mortgage Loans	2 Mortgage Loans	3 Total (Cols. 1 + 2)	4 Common Stock	5 Real Estate and Other Invested Assets	6 Total (Cols. 4 + 5)	7 Total Amount (Cols. 3 + 6)
1. Reserve as of December 31, prior year							
2. Realized capital gains(losses) net of taxes -General Account.....							
3. Realized capital gains(losses) net of taxes-Separate Accounts.....							
4. Unrealized capital gains(losses) net of deferred taxes-General Account.....							
5. Unrealized capital gains(losses) net of deferred taxes-Separate Accounts.....							
6. Capital gains credited(losses charged) to contract benefits, payments or reserves.....							
7. Basic contribution.....							
8. Accumulated balances (Lines 1 through 5 + 6 + 7)							
9. Maximum reserve.....							
10. Reserve objective.....							
11. 70% of (Line 10 - Line 8)							
12. Balance before transfers (Lines 8 - 11).....							
13. Transfers							
14. Voluntary contribution.....							
15. Adjustment down to maximum/up to zero.....							
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 - 15).....							

Not for Distribution

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

Line Number	NAIC Designation	Description	1 Book Adjusted Carrying Value	2 Book(s)/ Retail Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1-3) (1)	Reserve Objective		Maximum Reserve	
							Factor (Col. 4-5)	Amount (Cols. 4-5)	Factor (Col. 4-7)	Amount (Cols. 4-9)
LONG TERM BONDS										
1		Exempt Obligations.....		XXX	XXX	0.000		0.0000		0.0000
2	1	Highest Quality.....		XXX	XXX	0.0005		0.0016		0.0031
3	2	High Quality.....		XXX	XXX	0.0021		0.0064		0.0105
4	3	Medium Quality.....		XXX	XXX	0.0039		0.0268		0.0375
5	4	Low Quality.....		XXX	XXX	0.0045		0.0372		0.0517
6	5	Lower Quality.....		XXX	XXX	0.0050		0.1128		0.1580
7	6	In or Near Default.....		XXX	XXX	0.0000		0.2370		0.2370
8		Total Limited-Multi-Issue Securities Acquired by Depositor.....		XXX	XXX	XXX		XXX		XXX
9		Total Long-Term Bonds (Sum of Lines 1 through 8).....		XXX	XXX	XXX		XXX		XXX
PREFERRED STOCKS										
10	1	Highest Quality.....		XXX	XXX	0.0005		0.0016		0.0031
11	2	High Quality.....		XXX	XXX	0.0021		0.0064		0.0105
12	3	Medium Quality.....		XXX	XXX	0.0039		0.0268		0.0375
13	4	Low Quality.....		XXX	XXX	0.0045		0.0372		0.0517
14	5	Lower Quality.....		XXX	XXX	0.0050		0.1128		0.1580
15	6	In or Near Default.....		XXX	XXX	0.0000		0.2370		0.2370
16		Affiliated Life with AVR.....		XXX	XXX	0.0000		0.0000		0.0000
17		Total Preferred Stocks (Sum of Lines 10 through 16).....		XXX	XXX	XXX		XXX		XXX
SHORT-TERM BONDS										
18		Exempt Obligations.....		XXX	XXX	0.0000		0.0000		0.0000
19	1	Highest Quality.....		XXX	XXX	0.0005		0.0016		0.0031
20	2	High Quality.....		XXX	XXX	0.0021		0.0064		0.0105
21	3	Medium Quality.....		XXX	XXX	0.0039		0.0268		0.0375
22	4	Low Quality.....		XXX	XXX	0.0045		0.0372		0.0517
23	5	Lower Quality.....		XXX	XXX	0.0050		0.1128		0.1580
24	6	In or Near Default.....		XXX	XXX	0.0000		0.2370		0.2370
25		Total Short-Term Bonds (sum of Lines 18 through 24).....		XXX	XXX	XXX		XXX		XXX
DERIVATIVE INSTRUMENTS										
26		Exchange Traded.....		XXX	XXX	0.0005		0.0016		0.0031
27	1	Highest Quality.....		XXX	XXX	0.0005		0.0016		0.0031
28	2	High Quality.....		XXX	XXX	0.0021		0.0064		0.0105
29	3	Medium Quality.....		XXX	XXX	0.0039		0.0268		0.0375
30	4	Low Quality.....		XXX	XXX	0.0045		0.0372		0.0517
31	5	Lower Quality.....		XXX	XXX	0.0050		0.1128		0.1580
32	6	In or Near Default.....		XXX	XXX	0.0000		0.2370		0.2370
33		Total Derivative Instruments.....		XXX	XXX	XXX		XXX		XXX
34		Total (Lines 9-17+ 25- 33).....		XXX	XXX	XXX		XXX		XXX

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

Line Number	NAIC Description	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book Adjusted Carrying Value	Realizability Related Party Encumbrance	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1-3)	Factor	Amount (Cols. 4-5)	Factor	Amount (Cols. 4-7)	Factor	Amount (Cols. 4-9)
MORTGAGE LOANS												
Good Standing:												
35	Farm Mortgages - CM1 - Highest Quality				XXX		0.0011		0.0057		0.0074	
36	Farm Mortgages - CM2 - High Quality				XXX		0.0040		0.0114		0.0149	
37	Farm Mortgages - CM3 - Medium Quality				XXX		0.0069		0.0209		0.0257	
38	Farm Mortgages - CM4 - Low-Medium Quality				XXX		0.0120		0.0343		0.0428	
39	Farm Mortgages - CM5 - Low Quality				XXX		0.0187		0.0486		0.0628	
40	Residential Mortgages - Insured or Guaranteed				XX		0.0001		0.0007		0.0011	
41	Residential Mortgages - All Other				XXX		0.0015		0.0054		0.0074	
42	Commercial Mortgages - Insured or Guaranteed				XX		0.0001		0.0007		0.0011	
43	Commercial Mortgages - All Other - CM1 - Highest Quality				XXX		0.0011		0.0057		0.0074	
44	Commercial Mortgages - All Other - CM2 - High Quality				XX		0.0040		0.0114		0.0149	
45	Commercial Mortgages - All Other - CM3 - Medium Quality				XX		0.0069		0.0209		0.0257	
46	Commercial Mortgages - All Other - CM4 - Low-Medium Quality				XX		0.0120		0.0343		0.0428	
47	Commercial Mortgages - All Other - CM5 - Low Quality				XXX		0.0187		0.0486		0.0628	
Overdue, Not in Process:												
48	Farm Mortgages				XXX		0.0080		0.0568		0.0721	
49	Residential Mortgages - Insured or Guaranteed				XXX		0.0005		0.0034		0.0043	
50	Residential Mortgages - All Other				XXX		0.0025		0.0066		0.0085	
51	Commercial Mortgages - Insured or Guaranteed				XXX		0.0005		0.0034		0.0043	
52	Commercial Mortgages - All Other				XXX		0.0080		0.0568		0.0721	
In Process of Foreclosure:												
53	Farm Mortgages				XXX		0.0000		0.1942		0.1942	
54	Residential Mortgages - Insured or Guaranteed				XXX		0.0000		0.0046		0.0046	
55	Residential Mortgages - All Other				XXX		0.0000		0.0149		0.0149	
56	Commercial Mortgages - Insured or Guaranteed				XXX		0.0000		0.0046		0.0046	
57	Commercial Mortgages - All Other				XXX		0.0000		0.1942		0.1942	
58	Total Schedule B Mortgages (Sum of Lines 35 through 57)				XXX		XXX		XXX		XXX	
59	Schedule BA Mortgages				XXX		0.0034		0.0115		0.0149	
60	Total Mortgage Loans on Real Estate (Lines 58 + 59)				XXX		XXX		XXX		XXX	

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

Line Number	NAIC Designation	Description	1	2	3	4		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Ratio/Qualify Related Party Transmittance	Adj Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1-3)*	Basic Contribution	Factor	Amount (Cols. 4-5)	Factor	Amount (Cols. 4-9)
COMMON STOCK											
1		Unaffiliated Public.....		XXX	XXX	0.000		0.1580		0.1580 (4)	
2		Unaffiliated Private.....		XXX	XXX	0.000		0.0945		0.0945	
3		Federal Home Loan Bank.....		XXX	XXX	0.000		0.0001		0.0001	
4		Affiliated Life with AVR.....		XXX	XXX	0.000		0.0000		0.0000	
Affiliated Investment Subsidiary:											
5		Fixed Income Exempt Obligations.....				XXX		XXX		XXX	
6		Fixed Income Highest Quality.....				XXX		XXX		XXX	
7		Fixed Income High Quality.....				XXX		XXX		XXX	
8		Fixed Income Medium Quality.....				XXX		XXX		XXX	
9		Fixed Income Low Quality.....				XXX		XXX		XXX	
10		Fixed Income Lower Quality.....				XXX		XXX		XXX	
11		Fixed Income In or Near Default.....				XXX		XXX		XXX	
12		Qualifying Common Stock Public.....				0.000		0.1580 (4)		0.1580 (4)	
13		Qualifying Common Stock Private.....				0.000		0.0945		0.0945	
14		Real Estate.....				(0)		(0)		(0)	
15		Affiliated Contract Other (See SVU Purpose & Procedures Manual).....		XX	XXX	0.000		0.1580		0.1580	
16		Affiliated - All Other.....		XXX	XXX	0.000		0.0945		0.0945	
17		Total Common Stock (Sum of Lines 1 through 16)						XXX		XXX	
REAL ESTATE											
18		Home Office Property (General Assesment only).....				0.000		0.0912		0.0912	
19		Investment Properties.....				0.000		0.0912		0.0912	
20		Properties Acquired in Satisfaction of Debt.....				0.000		0.1337		0.1337	
21		Total Real Estate (Sum of Lines 18 through 20)						XXX		XXX	
OTHER INVESTED ASSETS											
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS											
22		Exempt Obligations.....		XXX	XXX	0.000		0.0001		0.0001	
23	1	Highest Quality.....		XXX	XXX	0.000		0.0016		0.0016	
24	2	High Quality.....		XXX	XXX	0.001		0.0064		0.0064	
25	3	Medium Quality.....		XXX	XXX	0.009		0.0369		0.0369	
26	4	Low Quality.....		XXX	XXX	0.045		0.0772		0.0772	
27	5	Lower Quality.....		XXX	XXX	0.070		0.1128		0.1128	
28	6	In or Near Default.....		XXX	XXX	0.000		0.3370		0.3370	
29		Total with Bond Characteristics (Sum of Lines 22 through 28)		XXX	XXX			XXX		XXX	

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

Line Number	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassified Related Party Encumbrance	Add Third Party Encumbrance	Balance for AVB Reserve Calculations (Cols. 1-3)	Factor	Amount (Cols. 4-5)	Factor	Amount (Cols. 4-7)	Factor	Amount (Cols. 4-7)
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS												
30	1	Highest Quality		XXX	XXX		0.0085		0.0016		0.0033	
31	2	High Quality		XXX	XXX		0.020		0.0050		0.0116	
32	3	Medium Quality		XXX	XXX		0.0299		0.0265		0.0976	
33	4	Low Quality		XXX	XXX		0.0245		0.0572		0.0817	
34	5	Lower Quality		XXX	XXX		0.0520		0.128		0.1890	
35	6	In or Near Default		XXX	XXX		0.0200		0.2370		0.2370	
36		Affiliated Life with AVB		XXX	XXX		0.0500		0.0500		0.0500	
37		Total with Preferred Stock Characteristics (Sum of Lines 30 through 36)		XXX	XXX		XXX		XXX		XXX	
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS												
In Good Standing (Affiliated)												
38		Mortgages – CM1 – Highest Quality			XXX		0.0051		0.0057		0.0074	
39		Mortgages – CM2 – High Quality			XXX		0.0040		0.0174		0.0149	
40		Mortgages – CM3 – Medium Quality			XXX		0.0060		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		0.0436		0.0624	
43		Residential Mortgages – Insured or Guaranteed			XXX		0.0001		0.0057		0.0011	
44		Residential Mortgages – All Other		XXX	XXX		0.0015		0.0014		0.0046	
45		Commercial Mortgages – Insured or Guaranteed			XXX		0.0001		0.0057		0.0011	
Overdue, Not in Process & Titled:												
46		Farm Mortgages			XXX		0.0480		0.0058		0.1371	
47		Residential Mortgages – Insured or Guaranteed			XXX		0.0008		0.0014		0.0023	
48		Residential Mortgages – All Other			XXX		0.0075		0.0056		0.0035	
49		Commercial Mortgages – Insured or Guaranteed			XXX		0.0005		0.0017		0.0023	
50		Commercial Mortgages – All Other			XXX		0.0489		0.0488		0.1371	
In Process of Completion (Affiliated)												
51		Farm Mortgages			XXX		0.0000		0.1942		0.1942	
52		Residential Mortgages – Insured or Guaranteed			XXX		0.0000		0.0016		0.0016	
53		Residential Mortgages – All Other			XXX		0.0000		0.0149		0.0149	
54		Commercial Mortgages – Insured or Guaranteed			XXX		0.0000		0.0016		0.0016	
55		Commercial Mortgages – All Other			XXX		0.0000		0.1942		0.1942	
56		Total Affiliated (Sum of Lines 38 through 55)			XXX		XXX		XXX		XXX	
57		Disaffiliated – In Good Standing With Guarantors			XXX		(0)		(0)		(0)	
58		Disaffiliated – In Good Standing (Holds With Guarantors Securities)			XXX		0.001		0.0057		0.0034	
59		Disaffiliated – In Good Standing (Holds Securities)			XXX		0.0080		0.013		0.0149	
60		Unaffiliated – In Good Standing (All Other)			XXX		0.0069		0.0240		0.0257	
61		Unaffiliated – Overdue, Not in Process			XXX		0.0480		0.0058		0.1371	
62		Unaffiliated – In Process of Completion			XXX		0.0000		0.1942		0.1942	
63		Total Disaffiliated (Sum of Lines 57 through 62)			XXX		XXX		XXX		XXX	
64		Total with Mortgage Loan Characteristics (Lines 38 – 63)			XXX		XXX		XXX		XXX	

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

Line Number	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/ Adjusted Carrying Value	Reducely Related Party Encumbrances	Add Third Party Encumbrances	Factor for AVB Reserve Calculations (Cols. 1-3)	Factor	Amount (Col. 4x5)	Factor	Amount (Col. 4x7)	Factor	Amount (Cols. 4x9)
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK												
05		Unaffiliated Public.....		XXX	XXX		0.000		0.1580		0.1580	
06		Unaffiliated Private.....		XXX	XXX		0.000		0.1945		0.1945	
07		Affiliated Life with AVB.....		XXX	XXX		0.000		0.000		0.000	
08		Affiliated Certain Other (See SVU Purposes & Procedures Manual).....		XXX	XXX		0.000		0.1580		0.1580	
09		Affiliated Other - All Other.....		XXX	XXX		0.000		0.1945		0.1945	
10		Total with Common Stock Characteristics (Sum of Lines 05 through 09)		XXX	XXX		XXX		XXX		XXX	
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE												
11		Home Office Property (Contents Account only).....					0.000		0.000		0.000	
12		Investment Properties.....					0.000		0.000		0.000	
13		Properties Acquired in Satisfaction of Debt.....					0.000		0.1257		0.1257	
14		Total with Real Estate Characteristics (Sum of Lines 11 through 13)					XXX		XXX		XXX	
LOW INCOME HOUSING TAX CREDIT INVESTMENTS												
55		Governmental Federal Low Income Housing Tax Credit.....					0.000		0.000		0.000	
56		Non-governmental Federal Low Income Housing Tax Credit.....					0.067		0.0120		0.0120	
57		Governmental State Low Income Housing Tax Credit.....					0.000		0.000		0.000	
58		Non-governmental State Low Income Housing Tax Credit.....					0.062		0.0120		0.0120	
59		All Other Low Income Housing Tax Credit.....					0.077		0.000		0.000	
60		Total LIHTC (Sum of Lines 55 through 59)					XXX		XXX		XXX	
ALL OTHER INVESTMENTS												
81		NAIC 1 Working Capital Finance Investments.....		XXX			0.000		0.0042		0.0042	
82		NAIC 2 Working Capital Finance Investments.....		XXX			0.000		0.0137		0.0137	
83		Other Invested Assets - Schedule BA.....		XXX			0.000		0.1580		0.1580	
84		Other Short-Term Invested Assets - Schedule DA.....		XXX			0.000		0.1580		0.1580	
85		Total All Other (Sum of Lines 81, 82, 83 and 84).....		XXX			XXX		XXX		XXX	
86		Total Other Invested Assets - Schedules BA & DA (Sum of Lines 25, 27, 64, 70, 74, 80 and 85)					XXX		XXX		XXX	

- (a) Times the company's weighted average portfolio beta (Minimum: 10, Maximum: 25)
 (b) Determined using same factors and breakdowns used for directly owned real estate.
 (c) This will be the factor associated with the risk category determined by the company generated worksheet.

SCHEDULE II – ACCIDENT AND HEALTH EXHIBIT

	Total		Group Accident And Health		Credit Accident and Health (Group and Individual)		Collectively Reinsurable		The Individual Contracts										
	1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	Non-Cancellable		Guaranteed Renewable		Non-Renewable For Specified Reasons Only		Other Accident Only		All Other		
									9 Amount	10 %	11 Amount	12 %	13 Amount	14 %	15 Amount	16 %	17 Amount	18 %	
PART I – ANALYSIS OF UNDERWRITING OPERATIONS																			
1. Premiums written	99%	.....	99%	.....	99%	.....	99%	.....	99%	.....	99%	.....	99%	.....	99%	.....	99%	.....
2. Premiums ceded	99%	.....	99%	.....	99%	.....	99%	.....	99%	.....	99%	.....	99%	.....	99%	.....	99%	.....
3. Incurred claims
4. Cost containment expenses
5. Incurred claims and cost containment expenses (Lines 3 and 4)
6. Increase in contract reserves
7. Commissions fee
8. Other general insurance expenses
9. Taxes, licenses and fees
10. Total other expenses incurred
11. Aggregate write-ins for deductibles
12. Gain from underwriting before dividends or refunds
13. Dividends or refunds
14. Gain from underwriting after dividends or refunds
DETAILS OF WRITINGS																			
1101
1102
1103
1198. Summary of remaining write-ins for Line 11, 200 overflow page
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11, above)

(a) Includes \$..... reported as "Contract, membership and other fees critical to agents."

SCHEDULE II – ACCIDENT AND HEALTH EXHIBIT (Continued)

	1 Total	2 Group Accident And Health	3 Group Accident and Health (Corporate Individual)	4 Collectively Renewable	Other Individual Contracts				
					5 Non-Cancellable	6 Guaranteed Renewable	7 Non-Renewable for Rated Reasons Only	8 Other Accident Only	9 All Other
PART 2 – RESERVES AND LIABILITIES									
A. Premium Reserves:									
1. Unearned premiums.....
2. Advance premiums.....
3. Reserve for rate credits.....
4. Total premium reserves, current year.....
5. Total premium reserves, prior year.....
6. Increase in total premium reserves.....
B. Contract Reserves:									
1. Additional reserves (a).....
2. Reserve for future contingent benefits.....
3. Total contract reserves, current year.....
4. Total contract reserves, prior year.....
5. Increase in contract reserves.....
C. Claim Reserves and Liabilities:									
1. Total current year.....
2. Total prior year.....
3. Increase.....
PART 3 – TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES									
1. Claims paid during the year.....
1.1 On claims incurred prior to current year.....
1.2 On claims incurred during current year.....
2. Claim reserves and liabilities, December 31, current year.....
2.1 On claims incurred prior to current year.....
2.2 On claims incurred during current year.....
3. Test.....
3.1 Line 1 minus Line 2.1.....
3.2 Claim reserves and liabilities, December 31, prior year.....
3.3 Line 3.1 minus Line 3.2.....
PART 4 – REINSURANCE									
A. Reinsurance Assumed:									
1. Premiums written.....
2. Premiums earned.....
3. Unpaid claims.....
4. Commissions.....
B. Reinsurance Ceded:									
1. Premiums written.....
2. Premiums earned.....
3. Unpaid claims.....
4. Commissions.....

(a) Includes S..... premium deficiency reserve.

SCHEDULE II – PART 5 – HEALTH CLAIMS

	1 Medical	2 Dental	3 Other	4 Total
A. Direct:				
1. Incurred Claims
2. Beginning Claim Reserves and Liabilities
3. Ending Claim Reserves and Liabilities
4. Claims Paid
B. Assumed Reinsurance:				
5. Incurred Claims
6. Beginning Claim Reserves and Liabilities
7. Ending Claim Reserves and Liabilities
8. Claims Paid
C. Ceded Reinsurance:				
9. Incurred Claims
10. Beginning Claim Reserves and Liabilities
11. Ending Claim Reserves and Liabilities
12. Claims Paid
D. Net:				
13. Incurred Claims
14. Beginning Claim Reserves and Liabilities
15. Ending Claim Reserves and Liabilities
16. Claims Paid
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred Claims and Cost Containment Expenses
18. Beginning Reserves and Liabilities
19. Ending Reserves and Liabilities
20. Paid Claims and Cost Containment Expenses

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

	1 2012	2 2013	3 2014	4 2015	5 2015
A. OPERATIONS ITEMS					
1. Premiums and annuity considerations for life and accident and health contracts.....					
2. Commissions and reinsurance expense allowances.....					
3. Contract claims.....					
4. Surrender benefits and withdrawals for life contracts.....					
5. Dividends to policyholders and refunds to members.....					
6. Reserve adjustments on reinsurance ceded.....					
7. Increase in aggregate reserves for life and accident and health contracts.....					
B. BALANCE SHEET ITEMS					
8. Premiums and annuity considerations for life and accident and health contracts deferred and unearned.....					
9. Aggregate reserves for life and accident and health contracts.....					
10. Liability for deposit-type contracts.....					
11. Contract claims unpaid.....					
12. Amounts recoverable on reinsurance.....					
13. Expenses relating to claims due or unpaid.....					
14. Policyholders' dividends and refunds to members (not included in Line 10).....					
15. Commissions and reinsurance expense allowances due.....					
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).....					

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SCHEDULE S – PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12).....
2. Reinsurance (Line 16).....
3. Premiums and considerations (Line 15).....
4. Net cred. for ceded reinsurance.....	XXX	.....	.....
5. All other admitted assets (balance).....
6. Total assets excluding Separate Accounts (Line 26).....
7. Separate Account assets (Line 27).....
8. Total assets (Line 28).....
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9. Contract reserves (Lines 1 and 2).....
10. Liability for deposit-type contracts (Line 3).....
11. Claims reserves (Line 4).....
12. Policyholder dividend- member refunds reserves (Lines 5 through 7).....
13. Premium & annuity considerations received in advance (Line 8).....
14. Other contract liabilities (Line 9).....
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount).....
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount).....
17. Reinsurance with Certified Reinsurers (Line 24.02 inset amount).....
18. Funds held under reinsurance treaties with Certified Reinsurers (Line 24.03 inset amount).....
19. All other liabilities (balance).....
20. Total liabilities excluding Separate Accounts (Line 26).....
21. Separate Account liabilities (Line 27).....
22. Total liabilities (Line 28).....
23. Capital & surplus (Line 38).....	XXX	.....
24. Total liabilities, capital & surplus (Line 39).....
NET CREDIT FOR CEDED REINSURANCE			
25. Contract reserves.....
26. Claims reserves.....
27. Policyholder dividend-reserves.....
28. Premium & annuity considerations received in advance.....
29. Liability for deposit-type contracts.....
30. Other contract liabilities.....
31. Reinsurance ceded assets.....
32. Other ceded reinsurance receivables.....
33. Total ceded reinsurance receivables.....
34. Premiums and considerations.....
35. Reinsurance in unauthorized companies.....
36. Funds held under reinsurance treaties with unauthorized reinsurers.....
37. Reinsurance with Certified Reinsurers.....
38. Funds held under reinsurance treaties with Certified Reinsurers.....
39. Other ceded reinsurance payable assets.....
40. Total ceded reinsurance payable assets.....
41. Total net credit for ceded reinsurance.....

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SCHEDULE T – PREMIUMS AND ANNUITY CONSIDERATIONS
 Allocated by States and Territories

State, DC	1 Annuity Sales (A)	2 Life Contracts		3 New Business Data				
		Life Insurance Policies	Accident Policies	4 Accident and Health Insurance Premiums, Including Policy Renewal and Other Fees	5 Other Considerations	6 Total Considerations	7 Deposit Type Consideration	
1. Alabama.....	AL							
2. Alaska.....	AK							
3. Arizona.....	AZ							
4. Arkansas.....	AR							
5. California.....	CA							
6. Colorado.....	CO							
7. Connecticut.....	CT							
8. Delaware.....	DE							
9. District of Columbia.....	DC							
10. Florida.....	FL							
11. Georgia.....	GA							
12. Hawaii.....	HI							
13. Idaho.....	ID							
14. Illinois.....	IL							
15. Indiana.....	IN							
16. Iowa.....	IA							
17. Kansas.....	KS							
18. Kentucky.....	KY							
19. Louisiana.....	LA							
20. Maine.....	ME							
21. Maryland.....	MD							
22. Massachusetts.....	MA							
23. Michigan.....	MI							
24. Minnesota.....	MN							
25. Mississippi.....	MS							
26. Missouri.....	MO							
27. Montana.....	MT							
28. Nebraska.....	NE							
29. Nevada.....	NV							
30. New Hampshire.....	NH							
31. New Jersey.....	NJ							
32. New Mexico.....	NM							
33. New York.....	NY							
34. North Carolina.....	NC							
35. North Dakota.....	ND							
36. Ohio.....	OH							
37. Oklahoma.....	OK							
38. Oregon.....	OR							
39. Pennsylvania.....	PA							
40. Rhode Island.....	RI							
41. South Carolina.....	SC							
42. South Dakota.....	SD							
43. Tennessee.....	TN							
44. Texas.....	TX							
45. Utah.....	UT							
46. Vermont.....	VT							
47. Virginia.....	VA							
48. Washington.....	WA							
49. West Virginia.....	WV							
50. Wisconsin.....	WI							
51. Wyoming.....	WY							
52. American Samoa.....	AS							
53. Guam.....	GU							
54. Puerto Rico.....	PR							
55. U.S. Virgin Islands.....	VI							
56. Northern Mariana Islands.....	MN							
57. Canada.....	CAN							
58. Argentina/Other Asia.....	OT	NXX						
59. National.....		NXX						
60. Reporting entity with business or employee life plan.....		NXX						
61. Dividends or refunds applied to purchase premium, future premium and annuities.....		NXX						
62. Dividends or refunds applied to death benefit or annuity premium payment.....		NXX						
63. Dividends or refunds applied to death benefit or annuity premium payment.....		NXX						
64. Agency/contract account for life insurance.....		NXX						
65. Trust (Direct account).....		NXX						
66. The insurance company.....		NXX						
67. Trust (Indirect account).....		NXX						
68. Life insurance policy.....		NXX						
69. Life insurance policy.....		NXX						
70. Other (All business and personal).....		NXX						
71. Total Life Insurance.....								
72. Total Life Insurance.....								
73. Total Life Insurance.....								
74. Total Life Insurance.....								
75. Total Life Insurance.....								
76. Total Life Insurance.....								
77. Total Life Insurance.....								
78. Total Life Insurance.....								
79. Total Life Insurance.....								
80. Total Life Insurance.....								
81. Total Life Insurance.....								
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89. Total Life Insurance.....								
90. Total Life Insurance.....								
91. Total Life Insurance.....								
92. Total Life Insurance.....								
93. Total Life Insurance.....								
94. Total Life Insurance.....								
95. Total Life Insurance.....								
96. Total Life Insurance.....								
97. Total Life Insurance.....								
98. Total Life Insurance.....								
99. Total Life Insurance.....								
100. Total Life Insurance.....								

Not for Distribution

1. Includes all policies that are not subject to the reporting requirements of this schedule.
 2. Includes all policies that are not subject to the reporting requirements of this schedule.
 3. Includes all policies that are not subject to the reporting requirements of this schedule.
 4. Includes all policies that are not subject to the reporting requirements of this schedule.
 5. Includes all policies that are not subject to the reporting requirements of this schedule.
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 22. Includes all policies that are not subject to the reporting requirements of this schedule.
 23. Includes all policies that are not subject to the reporting requirements of this schedule.
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SCHEDULE T – PART 2

**INTERSTATE COMPACT – EXHIBIT OF PREMIUMS WRITTEN
Allocated By States and Territories**

1	2	3 Total Premiums Only			5	6
		Life (Group and Individual)	Accident (Group and Individual)	Health Insurance (Group and Individual)			Long Term Care (Group and Individual)	Deposit Type Contract	Total
States, DC						
1. Alabama.....AL.....						
2. Alaska.....AK.....						
3. Arizona.....AZ.....						
4. Arkansas.....AR.....						
5. California.....CA.....						
6. Colorado.....CO.....						
7. Connecticut.....CT.....						
8. Delaware.....DE.....						
9. District of Columbia.....DC.....						
10. Florida.....FL.....						
11. Georgia.....GA.....						
12. Hawaii.....HI.....						
13. Idaho.....ID.....						
14. Illinois.....IL.....						
15. Indiana.....IN.....						
16. Iowa.....IA.....						
17. Kansas.....KS.....						
18. Kentucky.....KY.....						
19. Louisiana.....LA.....						
20. Maine.....ME.....						
21. Maryland.....MD.....						
22. Massachusetts.....MA.....						
23. Michigan.....MI.....						
24. Minnesota.....MN.....						
25. Mississippi.....MS.....						
26. Missouri.....MO.....						
27. Montana.....MT.....						
28. Nebraska.....NE.....						
29. Nevada.....NV.....						
30. New Hampshire.....NH.....						
31. New Jersey.....NJ.....						
32. New Mexico.....NM.....						
33. New York.....NY.....						
34. North Carolina.....NC.....						
35. North Dakota.....ND.....						
36. Ohio.....OH.....						
37. Oklahoma.....OK.....						
38. Oregon.....OR.....						
39. Pennsylvania.....PA.....						
40. Rhode Island.....RI.....						
41. South Carolina.....SC.....						
42. South Dakota.....SD.....						
43. Tennessee.....TN.....						
44. Texas.....TX.....						
45. Utah.....UT.....						
46. Vermont.....VT.....						
47. Virginia.....VA.....						
48. Washington.....WA.....						
49. West Virginia.....WV.....						
50. Wisconsin.....WI.....						
51. Wyoming.....WY.....						
52. American Samoa.....AS.....						
53. Guam.....GU.....						
54. Puerto Rico.....PR.....						
55. U.S. Virgin Islands.....VI.....						
56. Northern Mariana Islands.....MP.....						
57. Canada.....CA.....						
58. Associate Degree Admin.....AD.....						
59. Total.....						

Not for Distribution

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART I – ORGANIZATIONAL CHART

Not for Distribution

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental exhibits are required to be filed as part of your statement to the state or specifically stated by the regulatory state. However, in the event that your regulatory state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report that a response will be printed below. If the supplemental is required of your regulatory state and being filed, for what ever reason, SEE EXPLANATION and provide an explanation following the interrogatory question.

		<u>Response</u>
MARCH FILING		
1.	Will the Supplemental Cooperation Exhibit be filed with the state of domicile by March 17?	.....
2.	Will the confidential State-based Capital Report be filed with the state of domicile by March 17?	.....
3.	Will the confidential State-based Capital Report be filed with the state of domicile, if required, by March 17?	.....
4.	Will an actual opinion be filed by March 17?	.....
APRIL FILING		
5.	Will Management's Discussion and Analysis be filed by April 17?	.....
6.	Will the 7th Edition of Security Guaranty Association Model Act Approved Basic Reinsurance Table be filed with the state of domicile by the NAC by April 17? (Not applicable to financial health societies)	.....
7.	Will the Addendum to the Life, Health & Annuity Guaranty Association Model Act Approved Basic Reinsurance Table be required to be filed with the state of domicile and the NAC by April 17? (Not applicable to financial health societies)	.....
8.	Will the Supplemental Insolvency Risk Interrogatory be filed by April 17?	.....
JUNE FILING		
9.	Will an audited financial report be filed by June 17?	.....
10.	Will Accounts Listed of Qualifications be filed with the state of domicile and electronically with the NAC by June 17?	.....
AUGUST FILING		
11.	Will the requirements (non-public) Communication of Internal Control Related to purchase of a security be filed with the state of domicile and electronically with the NAC (for a replacement non-public document as August 17)?	.....
<p>The following supplemental exhibits are required to be filed as part of your annual statement to the state or specifically stated by the regulatory state. However, in the event that your regulatory state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report that a response will be printed below. If the supplemental is required of your regulatory state and being filed for what ever reason, SEE EXPLANATION and provide an explanation following the interrogatory question.</p>		
MARCH FILING		
12.	Will Schedule S-B Shareholder Information Supplement be filed with the state of domicile by March 17? (Not applicable to financial health societies)	.....
13.	Will the Modern Supplement Insurance Coprocessor be filed with the state of domicile and the NAC by March 17?	.....
14.	Will the financial surplus statement be filed with the state of domicile and the NAC by March 17?	.....
15.	Will the financial statement on participating and non-participating policies as specified in Interrogatory 1 and 2 be required to be filed with the state of domicile and electronically with the NAC by March 17?	.....
16.	Will the financial statement on non-participating policies as specified in Interrogatory 3 be required to be filed with the state of domicile and electronically with the NAC by March 17?	.....
17.	Will the financial statement on S-Shareholders be filed with the state of domicile and electronically with the NAC by March 17?	.....
18.	Will the financial statement on separate accounts funding Guaranteed Minimum Benefits be filed with the state of domicile and electronically with the NAC by March 17?	.....
19.	Will the financial statement on Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAC by March 17?	.....
20.	Will the financial statement on Assumptions Certification required by Actuarial Guidelines XXSV be filed with the state of domicile and electronically with the NAC by March 17?	.....
21.	Will the Assumptions and Consistency of Assumptions Certification required by Actuarial Guidelines XXSV be filed with the state of domicile and electronically with the NAC by March 17?	.....
22.	Will the Assumptions and Consistency of Assumptions Certification for Simple Guaranteed Rate Method required by Actuarial Guidelines XXSV be filed with the state of domicile and electronically with the NAC by March 17?	.....
23.	Will the Assumptions and Consistency of Assumptions Certification required by Actuarial Guidelines XXSV (Simple Average Market Value) be filed with the state of domicile and electronically with the NAC by March 17?	.....
24.	Will the Assumptions and Consistency of Assumptions Certification required by Actuarial Guidelines XXSV (Simple Market Value) be filed with the state of domicile and electronically with the NAC by March 17?	.....
25.	Will the C-2 RBC Certification revised and in C-2 Phase 1 be filed with the state of domicile and electronically with the NAC by March 17?	.....

**SUPPLEMENTAL EXHIBITS AND SCHEDULES
INTERROGATORIES**

28.	Will the CS-IBIL Certifications required under CS-11 be filed with the state of domicile and electronically with the NAC by March 1?	.....
29.	Will the Annual Certifications Related to Annual Nonforfeiture Ongoing Compliance for equity Indexed Annuities be filed with the state of domicile and electronically with the NAC by March 1?	.....
30.	Will the annual reports required by the Modified Guaranteed Renewal Model Top-Up be filed with the state of domicile electronically with the NAC by March 1?	.....
31.	Will the Annual Certifications Related to Ratings required by Annual Guideline XLII be filed with the state of domicile and electronically with the NAC by March 1?	.....
32.	Will the Annual Certifications Related to Likely Defined Funding Strategy required by Annual Guideline XLIII be filed with the state of domicile and electronically with the NAC by March 1?	.....
33.	Will the Management Certification That the Valuation Method Management's Asset required by Annual Guideline XLIII be filed with the state of domicile and electronically with the NAC by March 1?	.....
34.	Will the Annual Certifications Related to the Reserve required by Annual Guideline XLIII be filed with the state of domicile and electronically with the NAC by March 1?	.....
35.	Will the Annual Certification regarding the use of 2001 Preferred Class Table required by the Model Application Permitting the Reversion of Preferred Normalcy Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAC by March 1?	.....
36.	Will the Workers' Compensation Case Out Supplement be filed by March 1? (Not applicable to financial institutions)	.....
37.	Will Supplemental Schedule be filed with the state of domicile with the NAC by March 1?	.....
38.	Will the Annual Form D Coverage Supplement be filed with the state of domicile and the NAC by March 1?	.....
39.	Will an approval from the reporting entity's state of domicile be filed related to the two-year reserve requirement for individual partner be filed electronically with the NAC by March 1?	.....
40.	Will an approval from the reporting entity's state of domicile be filed related to the one-year cooling-off period for Application CPA be filed electronically with the NAC by March 1?	.....
41.	Will an approval from the reporting entity's state of domicile be filed related to the Regulatory Reporting Coverage be filed electronically with the NAC by March 1?	.....
42.	Will the V-M-IB Reserve Supplement be filed with the state of domicile and the NAC by March 1?	.....
APRIL FILING		
43.	Will the Confidential Regulatory Asset Adequacy Data Summary (CAADS) required by the Valuation Manual be filed with the state of domicile by April 1?	.....
44.	Will the Long-Term Care Experience Reporting Form be filed with the state of domicile and the NAC by April 1?	.....
45.	Will the Credit Insurance Experience Report be filed with the state of domicile and the NAC by April 1? (Not applicable to financial institutions)	.....
46.	Will the Accident and Health Policy Requirements Table be filed by April 1?	.....
47.	Will the Supplemental Health Care Information Form be filed with the state of domicile and the NAC by April 1?	.....
48.	Will the Supplemental Health Care Escalation Report be filed with the state of domicile and the NAC by April 1?	.....
49.	Will the Confidential Annual Management Report required by Annual Guideline XXXVIII SD be filed with the state of domicile by April 10?	.....
50.	Will the Supplemental Term and Interest Rate Insurance Release or Policy be filed with the state of domicile and the NAC by April 1?	.....
51.	Will the Variable Annuity Policy be filed with the state of domicile and the NAC by April 1?	.....
AUGUST FILING		
52.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	.....

Explanation:

Bar code:

OVERFLOW PAGE FOR WRITE-INS

Not for Distribution

SUMMARY INVESTMENT SCHEDULE

Investment Category	Gross Investment Holdings		Admitted Assets as Reported in the Annual Statement			
	1 Amount	2 Percentage of Column 1 (Line 13)	3 Amount	4 Securities Lending Reinstated Colateral Amount	5 Total (Col. 1-4) Amount	6 Percentage of Column 3 (Line 13)
1 Long-term bonds (Schedule D, Part 1):						
1.01 U.S. governments						
1.02 All other governments						
1.03 U.S. states, territories and possessions, etc. governmental						
1.04 U.S. political subdivisions of states, territories, and possessions governmental						
1.05 U.S. issues involving the credit assessment obligations, etc. non-governmental						
1.06 Industrial and miscellaneous						
1.07 Hybrid securities						
1.08 Parent, subsidiaries and affiliates						
1.09 SVU identified funds						
1.10 Unaffiliated bond funds						
1.11 Total long-term bonds						
2 Preferred stocks (Schedule D, Part 2, Section 1):						
2.01 Industrial and miscellaneous (Unaffiliated)						
2.02 Parent, subsidiaries and affiliates						
2.03 Total preferred stocks						
3 Common stocks (Schedule D, Part 2, Section 2):						
3.01 Industrial and miscellaneous Publicly traded (Total/Unadmitted)						
3.02 Industrial and miscellaneous Other (Un/Admitted)						
3.03 Parent, subsidiaries and affiliates Publicly traded						
3.04 Parent, subsidiaries and affiliates Other						
3.05 Mutual funds						
3.06 Other investment trusts						
3.07 Closed-end funds						
3.08 Total common stocks						
4 Mortgage loans (Schedule 1B):						
4.01 Commercial mortgages						
4.02 Residential mortgages						
4.03 Governmental mortgages						
4.04 Mezzanine real estate loans						
4.05 Total mortgage loans						
5 Real estate (Schedule A):						
5.01 Properties occupied by company						
5.02 Properties held for production of income						
5.03 Properties held for sale						
5.04 Total real estate						
6 Cash, cash equivalents and short-term investments:						
6.01 Cash (Schedule E, Part 1)						
6.02 Cash equivalents (Schedule E, Part 2)						
6.03 Short-term investments (Schedule DA)						
6.04 Total cash, cash equivalents and short-term investments						
7 Contract loans						
8 Derivatives (Schedule DB)						
9 Other financial assets (Schedule BA)						
10 Receivables for securities						
11 Securities lending (Schedule DL, Part 1)				XXX	XXX	XXX
12 Other financial assets (Page 2, Line 11)						
13 Total invested assets						

SCHEDULE A – VERIFICATION BETWEEN YEARS

Real Estate

1.	Book/adjusted carrying value, December 31 of prior year.....	_____	_____
2.	Cost of acquisition:		
2.1.	Actual cost at time of acquisition (Part 2, Column 6).....	_____	_____
2.2.	Additional investment made after acquisition (Part 2, Column 9).....	_____	_____
3.	Current year change in circumstances:		
3.1.	Totals, Part 1, Column 13.....	_____	_____
3.2.	Totals, Part 3, Column 11.....	_____	_____
4.	Total gain/(loss) on disposals, Part 3, Column 15.....	_____	_____
5.	Taxable amounts received on disposals, Part 3, Column 15.....	_____	_____
6.	Total foreign exchange change in book/adjusted carrying value:		
6.1.	Totals, Part 1, Column 13.....	_____	_____
6.2.	Totals, Part 3, Column 11.....	_____	_____
7.	Deduct current year's other than-temporary impairment recognized:		
7.1.	Totals, Part 1, Column 13.....	_____	_____
7.2.	Totals, Part 3, Column 11.....	_____	_____
8.	Deduct current year's depreciation:		
8.1.	Totals, Part 1, Column 13.....	_____	_____
8.2.	Totals, Part 3, Column 11.....	_____	_____
9.	Book/adjusted carrying value at the end of current period (Lines 1-2(1)+(3)-6-7-8).....	_____	_____
10.	Deduct total unadjusted amounts.....	_____	_____
11.	Statement value at end of current period (Line 9 minus Line 10).....	_____	_____

SCHEDULE B – VERIFICATION BETWEEN YEARS

Mortgage Loans

1.	Book value recorded investment excluding accrued interest, December 31 of prior year.....	_____	_____
2.	Cost of acquisition:		
2.1.	Actual cost at time of acquisition (Part 2, Column 7).....	_____	_____
2.2.	Additional investment made after acquisition (Part 2, Column 9).....	_____	_____
3.	Capitalised deferred income and other:		
3.1.	Totals, Part 1, Column 12.....	_____	_____
3.2.	Totals, Part 3, Column 11.....	_____	_____
4.	Accrual of discount.....	_____	_____
5.	Unrealised valuation increase/(decrease):		
5.1.	Totals, Part 1, Column 9.....	_____	_____
5.2.	Totals, Part 3, Column 8.....	_____	_____
6.	Total gain/(loss) on disposals, Part 3, Column 15.....	_____	_____
7.	Taxable amounts received on disposals, Part 3, Column 15.....	_____	_____
8.	Taxable amortisation of premiums and margins, interest points and commitment fees.....	_____	_____
9.	Total foreign exchange change in book value/total net investment excluding accrued interest:		
9.1.	Totals, Part 1, Column 13.....	_____	_____
9.2.	Totals, Part 3, Column 11.....	_____	_____
10.	Deduct current year's other than-temporary impairment recognized:		
10.1.	Totals, Part 1, Column 13.....	_____	_____
10.2.	Totals, Part 3, Column 11.....	_____	_____
11.	Book value recorded investment excluding accrued interest at end of current period (Lines 1-2(1)+(3)+4-7-8+9-10).....	_____	_____
12.	Cost of acquisition.....	_____	_____
13.	Subtotal (Line 11 plus Line 12).....	_____	_____
14.	Deduct total unadjusted amounts.....	_____	_____
15.	Statement value of mortgages owned at end of current period (Line 13 minus Line 14).....	_____	_____

SCHEDULE BA – VERIFICATION BETWEEN YEARS
 (Other Long-Term Investment Assets)

1	Book value and carrying value, December 31 of prior year	_____
2	Cost of acquisitions:	_____
3.1	Acquired cost at time of acquisition (Part 3, Column 8)	_____
3.2	Additional investment costs also acquired (Part 3, Column 9)	_____
3	Capital and deferred interest and other:	_____
3.1	Taxable (Part 3, Column 10)	_____
3.2	Tax-exempt (Part 3, Column 11)	_____
4	Accrual of interest	_____
5	Unrealized valuation increase (decrease):	_____
5.1	Taxable (Part 3, Column 12)	_____
5.2	Tax-exempt (Part 3, Column 13)	_____
6	Total gain (loss) on disposals (Part 3, Column 14)	_____
7	Deduct amounts received on disposals (Part 3, Column 15)	_____
8	Deduct amortization of premium and depreciation	_____
9	Total foreign exchange change in book value and carrying value:	_____
9.1	Taxable (Part 3, Column 17)	_____
9.2	Tax-exempt (Part 3, Column 18)	_____
10	Deduct current year's other transfers (premiums surrendered):	_____
10.1	Taxable (Part 3, Column 19)	_____
10.2	Tax-exempt (Part 3, Column 20)	_____
11	Book value and carrying value at end of current period (Line 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11)	_____
12	Deduct total realized income	_____
13	Statement value at end of current period (Line 11 minus Line 12)	_____

SCHEDULE D – VERIFICATION BETWEEN YEARS
 Bonds and Stocks

1	Book value and carrying value, December 31 of prior year	_____
2	Cost of bonds and stocks acquired (Part 5, Column 7)	_____
3	Accrual of interest	_____
4	Unrealized valuation increase (decrease):	_____
4.1	Part 5, Column 12	_____
4.2	Part 2, Section 1, Column 12	_____
4.3	Part 2, Section 2, Column 12	_____
4.4	Part 4, Column 11	_____
5	Total gain (loss) on disposals (Part 4, Column 19)	_____
6	Deduct tax considerations for bonds and stocks disposed of (Part 4, Column 18)	_____
7	Deduct amortization of premium	_____
8	Total foreign exchange change in book value and carrying value:	_____
8.1	Part 5, Column 19	_____
8.2	Part 2, Section 1, Column 19	_____
8.3	Part 2, Section 2, Column 19	_____
8.4	Part 4, Column 19	_____
9	Deduct current year's other transfers (premiums surrendered):	_____
9.1	Part 5, Column 14	_____
9.2	Part 2, Section 1, Column 14	_____
9.3	Part 2, Section 2, Column 14	_____
9.4	Part 4, Column 14	_____
10	Total realized income (gross) less total of pro-portionate penalty and/or acceleration fees. See My Line 2.	_____
11	Book value and carrying value at end of current period (Line 1, 2, 3, 4, 5, 6, 7, 8, 9, 10)	_____
12	Deduct total realized income	_____
13	Statement value at end of current period (Line 11 minus Line 12)	_____

SCHEDULE D – SUMMARY BY COUNTRY
 Long-Term Bonds and Stocks OWNED December 31 of Current Year

Description		1 Book/Adjusted Carrying Value	2 Fair Value	3 Actual Cost	4 Par Value of Bonds
BONDS					
Governments (including all obligations guaranteed by governments)	1. United States.....	.....	.....	.....	.....
	2. Canada.....	.....	.....	.....	.....
	3. Other Countries.....	.....	.....	.....	.....
	4. Totals				
U.S. States, Territories and Possessions (direct and guaranteed)	5. Totals				
U.S. Political Subdivisions of States, Territories and Possessions (direct and guaranteed)	6. Totals				
U.S. Special Revenue and Special Assessment Obligations and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and their Political Subdivisions		7. Totals			
Industrial and Miscellaneous, SVO Identified Funds, Unaffiliated Bank Loans and Hybrid Securities (unaffiliated)	8. United States.....	.....	.....	.....	.....
	9. Canada.....	.....	.....	.....	.....
	10. Other Countries.....	.....	.....	.....	.....
	11. Totals				
Parent, Subsidiaries and Affiliates	12. Totals				
	13. Total Bonds				
PREFERRED STOCKS					
Industrial and Miscellaneous (unaffiliated)	14. United States.....	.....	.....	.....	.....
	15. Canada.....	.....	.....	.....	.....
	16. Other Countries.....	.....	.....	.....	.....
	17. Totals				
Parent, Subsidiaries and Affiliates	18. Totals				
	19. Total Preferred Stocks				
COMMON STOCKS					
Industrial and Miscellaneous (unaffiliated)	20. United States.....	.....	.....	.....	.....
	21. Canada.....	.....	.....	.....	.....
	22. Other Countries.....	.....	.....	.....	.....
	23. Totals				
Parent, Subsidiaries and Affiliates	24. Totals				
	25. Total Common Stocks				
	26. Total Stocks				
	27. Total Bonds and Stocks				

Not for Distribution

SCHEDULE D – PART 1A – SECTION 1

Quality and Maturity Distribution of All Bonds Owned December 31, or Book/Adjusted Carrying Values by Major Types of Issues and NAC Designations

NAC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col 7 100 % of Line 7	9 % from 12/17 Prior Year	10 % from Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed
1. U.S. Governments												
1.1 NAIC 1						XXX						
1.2 NAIC 2						XXX						
1.3 NAIC 3						XXX						
1.4 NAIC 4						XXX						
1.5 NAIC 5						XXX						
1.6 NAIC 6						XXX						
1.7 Totals						XXX						
2. All Other Governments												
2.1 NAIC 1						XXX						
2.2 NAIC 2						XXX						
2.3 NAIC 3						XXX						
2.4 NAIC 4						XXX						
2.5 NAIC 5						XXX						
2.6 NAIC 6						XXX						
2.7 Totals						XXX						
3. U.S. States, Territories and Possessions, etc., Guaranteed												
3.1 NAIC 1						XXX						
3.2 NAIC 2						XXX						
3.3 NAIC 3						XXX						
3.4 NAIC 4						XXX						
3.5 NAIC 5						XXX						
3.6 NAIC 6						XXX						
3.7 Totals						XXX						
4. U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed												
4.1 NAIC 1						XXX						
4.2 NAIC 2						XXX						
4.3 NAIC 3						XXX						
4.4 NAIC 4						XXX						
4.5 NAIC 5						XXX						
4.6 NAIC 6						XXX						
4.7 Totals						XXX						
5. U.S. Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed												
5.1 NAIC 1						XXX						
5.2 NAIC 2						XXX						
5.3 NAIC 3						XXX						
5.4 NAIC 4						XXX						
5.5 NAIC 5						XXX						
5.6 NAIC 6						XXX						
5.7 Totals						XXX						

Not for Distribution

SCHEDULE D – PART 1A - SECTION 1 (Continued)
 Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 Less Col. 7 Line 1	9 Total Current Col. 7 Less Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
8. Individual and Miscellaneous (non-affiliated)												
81 NAIC 1						XXX						
82 NAIC 2						XXX						
83 NAIC 3						XXX						
84 NAIC 4						XXX						
85 NAIC 5						XXX						
86 NAIC 6						XXX						
87 Totals						XXX						
9. Hybrid Securities												
91 NAIC 1						XXX						
92 NAIC 2						XXX						
93 NAIC 3						XXX						
94 NAIC 4						XXX						
95 NAIC 5						XXX						
96 NAIC 6						XXX						
97 Totals						XXX						
9. Parent, Subsidiaries and Affiliates												
81 NAIC 1						XXX						
82 NAIC 2						XXX						
83 NAIC 3						XXX						
84 NAIC 4						XXX						
85 NAIC 5						XXX						
86 NAIC 6						XXX						
87 Totals						XXX						
9. SWG Identified Funds												
91 NAIC 1	XXX	XXX	XXX	XXX	XXX							
92 NAIC 2	XXX	XXX	XXX	XXX	XXX							
93 NAIC 3	XXX	XXX	XXX	XXX	XXX							
94 NAIC 4	XXX	XXX	XXX	XXX	XXX							
95 NAIC 5	XXX	XXX	XXX	XXX	XXX							
96 NAIC 6	XXX	XXX	XXX	XXX	XXX							
97 Totals	XXX	XXX	XXX	XXX	XXX							
10. Commercial Bank Loans												
10.1 NAIC 1						XXX						
10.2 NAIC 2						XXX						
10.3 NAIC 3						XXX						
10.4 NAIC 4						XXX						
10.5 NAIC 5						XXX						
10.6 NAIC 6						XXX						
10.7 Totals						XXX						

SCHEDULE D – PART IA – SECTION 1 (Continued)

Quality and Maturity Distribution of All Bonds Owned (December 31, of Bond) / Adjusted Carrying Values by Major Types of Issues and NAIC Designations

	1	2	3	4	5	6	7	8	9	10	11	12
NAIC Designation	1 Year or Less	Over 1 Year Through 5 Years	Over 5 Years Through 10 Years	Over 10 Years Through 20 Years	Over 20 Years	No Maturity Date	Total Current Year	Col. 7 as a % of Line (a)	Total Issued Col. 7 Prior Year	% From Col. 8 Prior Year	Total Publicly Traded	Total Privately Placed (b)
11. Total Bonds Current Year												
11.1 NAIC 1	(d)								XXX	XXX		
11.2 NAIC 2	(d)								XXX	XXX		
11.3 NAIC 3	(d)								XXX	XXX		
11.4 NAIC 4	(d)								XXX	XXX		
11.5 NAIC 5	(d)						(e)		XXX	XXX		
11.6 NAIC 6	(d)						(e)		XXX	XXX		
11.7 Totals							(f)		XXX	XXX		
11.8 Line 11.7 as a % of Col. 7								XXX		XXX		
12. Total Bonds Prior Year												
12.1 NAIC 1							XXX	XXX				
12.2 NAIC 2							XXX	XXX				
12.3 NAIC 3							XXX	XXX				
12.4 NAIC 4							XXX	XXX				
12.5 NAIC 5							XXX	XXX	(g)			
12.6 NAIC 6							XXX	XXX	(g)			
12.7 Totals							XXX	XXX	(g)			
12.8 Line 12.7 as a % of Col. 9										XXX		
13. Total Publicly Traded Bonds												
13.1 NAIC 1												XXX
13.2 NAIC 2												XXX
13.3 NAIC 3												XXX
13.4 NAIC 4												XXX
13.5 NAIC 5												XXX
13.6 NAIC 6												XXX
13.7 Totals												XXX
13.8 Line 13.7 as a % of Col. 7								XXX	XXX	XXX		XXX
13.9 Line 13.7 as a % of Line 11.7, Col. 7, Section 11								XXX	XXX	XXX		XXX
14. Total Privately Placed Bonds												
14.1 NAIC 1											XXX	
14.2 NAIC 2											XXX	
14.3 NAIC 3											XXX	
14.4 NAIC 4											XXX	
14.5 NAIC 5											XXX	
14.6 NAIC 6											XXX	
14.7 Totals											XXX	
14.8 Line 14.7 as a % of Col. 7								XXX	XXX	XXX	XXX	
14.9 Line 14.7 as a % of Line 11.7, Col. 7, Section 11								XXX	XXX	XXX	XXX	

(a) Includes \$ _____ freely marketable under SEC Rule 144 and/or held for resale under SEC Rule 144A.
 (b) Includes \$ _____ current year of bonds with Z designations and \$ _____ prior year of bonds with Z designations. The letter "Z" means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the agreement.
 (c) Includes \$ _____ current year, \$ _____ prior year of bonds with 0A designations and \$ _____ current year, \$ _____ prior year of bonds with 0B designations. "0A" means the NAIC designation was assigned by the SVO in reliance on the issuer's certification that the issuer is current in all principal and interest payments. "0B" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.
 (d) Includes the following amount of fixed term and floating rate bonds by NAIC designation: NAIC 1 \$ _____; NAIC 2 \$ _____; NAIC 3 \$ _____; NAIC 4 \$ _____; NAIC 5 \$ _____; NAIC 6 \$ _____.

SCHEDULE D – PART 1A – SECTION 2

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1	2	3	4	5	6	7	8	9	10	11	12
	Year or Less	Over 1 Year Through 5 Years	Over 5 Years Through 10 Years	Over 10 Years Through 20 Years	Over 20 Years	No Maturity	Total Floating Rate	Over 1 Year Through 5 Years	Total Issues Over 7 Plus Years	10 Year Issues Over 5 Plus Years	Total Payable Within	Total Payable Beyond
1 U.S. Government												
101 U.S. Obligations						XXX						
105 Residential Mortgage-Backed Securities						XXX						
106 Commercial Mortgage-Backed Securities						XXX						
109 Other Loans/Secured and Structured Securities						XX						
107 Total						XXX						
2 All Other Government												
201 U.S. Obligations						XX						
205 Residential Mortgage-Backed Securities						XX						
206 Commercial Mortgage-Backed Securities						XXX						
209 Other Loans/Secured and Structured Securities						XXX						
207 Total						XX						
3 U.S. States, Territories and Possessions, Guaranteed												
301 U.S. Obligations						XXX						
305 Residential Mortgage-Backed Securities						XX						
306 Commercial Mortgage-Backed Securities						XXA						
309 Other Loans/Secured and Structured Securities						XXA						
307 Total						XXA						
4 U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed												
401 U.S. Obligations						XXX						
405 Residential Mortgage-Backed Securities						XXX						
406 Commercial Mortgage-Backed Securities						XXX						
409 Other Loans/Secured and Structured Securities						XXX						
407 Total						XXX						
5 U.S. Special Revenue or Special Assessment Obligations, Not Guaranteed												
501 U.S. Obligations						XXX						
505 Residential Mortgage-Backed Securities						XXX						
506 Commercial Mortgage-Backed Securities						XXA						
509 Other Loans/Secured and Structured Securities						XXA						
507 Total						XXA						
6 International Municipalities												
601 U.S. Obligations						XXX						
605 Residential Mortgage-Backed Securities						XXX						
606 Commercial Mortgage-Backed Securities						XXX						
609 Other Loans/Secured and Structured Securities						XXX						
607 Total						XXX						
7 Export Services												
701 U.S. Obligations						XXX						
705 Residential Mortgage-Backed Securities						XXX						
706 Commercial Mortgage-Backed Securities						XXX						
709 Other Loans/Secured and Structured Securities						XXX						
707 Total						XXX						
8 Foreign Sovereigns and Affiliates												
801 U.S. Obligations						XXX						
805 Residential Mortgage-Backed Securities						XXX						
806 Commercial Mortgage-Backed Securities						XXA						
809 Other Loans/Secured and Structured Securities						XXA						
802 Affiliate Bank Loans – Issued						XXA						
803 Affiliate Bank Loans – Acquired						XXA						
807 Total						XXX						

Not for Distribution

SCHEDULE D – PART IA – SECTION 2 (Continued)

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

6(a) Bonds by Type	Maturity Distribution											
	1 Year or Less	Over 1 Year Through 5 Years	Over 5 Years Through 10 Years	Over 10 Years Through 20 Years	Over 20 Years	No Maturity Date	Total Carrying Value	% of Total	Total Face Value	% of Total Face Value	Total Par Value	Total Face Value
9. SVU identified bonds												
9.01 Exchange Traded Funds Identified by the SVU	N/A	N/A	N/A	N/A	N/A	N/A						
9.02 Bond Mutual funds identified by the SVU	N/A	N/A	N/A	N/A	N/A	N/A						
9.03 Total	N/A	N/A	N/A	N/A	N/A	N/A						
10. Credit-related issues												
10.01 Credit-related issues - insured						N/A						
10.02 Credit-related issues - assumed						N/A						
10.03 Total						N/A						
11. Total Bonds Current Year												
11.01 Bond Options						N/A			N/A	N/A		
11.02 Residential Mortgage-Backed Securities						N/A			N/A	N/A		
11.03 Commercial Mortgage-Backed Securities						N/A			N/A	N/A		
11.04 Other Loan-Related and Structured Securities						N/A			N/A	N/A		
11.05 SVU Identified Bonds	N/A	N/A	N/A	N/A	N/A	N/A			N/A	N/A		
11.06 Affiliate Bank Loans	N/A	N/A	N/A	N/A	N/A	N/A			N/A	N/A		
11.07 Credit-Related Bank Loans	N/A	N/A	N/A	N/A	N/A	N/A			N/A	N/A		
11.08 Total	N/A	N/A	N/A	N/A	N/A	N/A			N/A	N/A		
11.09 Line 11.08 as a % of Col 7									N/A	N/A		
12. Total Bonds Prior Year												
12.01 Bond Options						N/A			N/A	N/A		
12.02 Residential Mortgage-Backed Securities						N/A			N/A	N/A		
12.03 Commercial Mortgage-Backed Securities						N/A			N/A	N/A		
12.04 Other Loan-Related and Structured Securities						N/A			N/A	N/A		
12.05 SVU Identified Bonds	N/A	N/A	N/A	N/A	N/A	N/A			N/A	N/A		
12.06 Affiliate Bank Loans	N/A	N/A	N/A	N/A	N/A	N/A			N/A	N/A		
12.07 Credit-Related Bank Loans	N/A	N/A	N/A	N/A	N/A	N/A			N/A	N/A		
12.08 Total	N/A	N/A	N/A	N/A	N/A	N/A			N/A	N/A		
12.09 Line 12.08 as a % of Col 9									N/A	N/A		
13. Total Publicly Traded Bonds												
13.01 Bond Options						N/A						N/A
13.02 Residential Mortgage-Backed Securities						N/A						N/A
13.03 Commercial Mortgage-Backed Securities						N/A						N/A
13.04 Other Loan-Related and Structured Securities						N/A						N/A
13.05 SVU Identified Bonds	N/A	N/A	N/A	N/A	N/A	N/A						N/A
13.06 Affiliate Bank Loans	N/A	N/A	N/A	N/A	N/A	N/A						N/A
13.07 Credit-Related Bank Loans	N/A	N/A	N/A	N/A	N/A	N/A						N/A
13.08 Total	N/A	N/A	N/A	N/A	N/A	N/A						N/A
13.09 Line 13.08 as a % of Col 9									N/A	N/A		N/A
13.10 Line 13.08 as a % of Line 11.08, Col 7, Section II									N/A	N/A		N/A
14. Total Privately Placed Bonds												
14.01 Bond Options						N/A						N/A
14.02 Residential Mortgage-Backed Securities						N/A						N/A
14.03 Commercial Mortgage-Backed Securities						N/A						N/A
14.04 Other Loan-Related and Structured Securities						N/A						N/A
14.05 SVU Identified Bonds	N/A	N/A	N/A	N/A	N/A	N/A						N/A
14.06 Affiliate Bank Loans	N/A	N/A	N/A	N/A	N/A	N/A						N/A
14.07 Credit-Related Bank Loans	N/A	N/A	N/A	N/A	N/A	N/A						N/A
14.08 Total	N/A	N/A	N/A	N/A	N/A	N/A						N/A
14.09 Line 14.08 as a % of Col 9									N/A	N/A		N/A
14.10 Line 14.08 as a % of Line 11.08, Col 7, Section II									N/A	N/A		N/A

Not for Distribution

SCHEDULE DA – VERIFICATION BETWEEN YEARS
Short-Term Investments

	1	2	3	4	5
	Total	Bonds	Money Market Funds	Other Short-Term Investment Assets (a)	Investments in Parent, Subsidiaries and Affiliates
1. Book/adjusted carrying value, December 31 of prior year.....
2. Cost of short-term investments acquired.....
3. Accrual of discount.....
4. Unrealized valuation increase (decrease).....
5. Total gain (loss) on disposals.....
6. Deduct consideration received on disposals.....
7. Deduct amortization of premium.....
8. Total foreign exchange change in book/adjusted carrying value.....
9. Deduct current year's other-than-temporary impairment recognized.....
10. Book adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....
11. Deduct total nonadmitted amounts.....
12. Statement value at end of current period (Line 10 minus Line 11)

(a) Indicate the category of such assets, for example, joint ventures, transportation equipment.

Not for Distribution

SCHEDULE DB – PART A – VERIFICATION BETWEEN YEARS

Options, Caps, Floors, Collars, Swaps and Forwards

1.	Book/adjusted carrying value, December 31, prior year (Line 9, prior year)	_____	_____
2.	Cost paid/consideration received on additions:		
2.1	Current year paid/consideration received) at time of acquisition, still open, Section 1, Column 13	_____	_____
2.2	Current year paid/consideration received) at time of acquisition, terminated, Section 2, Column 14	_____	_____
3.	Unrealized valuation increase/(decrease):		
3.1	Section 1, Column 17	_____	_____
3.2	Section 2, Column 19	_____	_____
4.	SSAP No. 108 adjustments	_____	_____
5.	Total gain (loss) on termination recognized, Section 2, Column 22	_____	_____
6.	Considerations received/(paid) on terminations, Section 2, Column 15	_____	_____
7.	Amortization:		
7.1	Section 1, Column 19	_____	_____
7.2	Section 2, Column 21	_____	_____
8.	Adjustment to the book/adjusted carrying value of hedged item:		
8.1	Section 1, Column 20	_____	_____
8.2	Section 2, Column 24	_____	_____
9.	Total foreign exchange change in book/adjusted carrying value:		
9.1	Section 1, Column 18	_____	_____
9.2	Section 2, Column 20	_____	_____
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6+7+8+9)	_____	_____
11.	Deduct nonadmitted assets	_____	_____
12.	Statement value at end of current period (Line 10 minus Line 11)	_____	_____

SCHEDULE DB – PART B – VERIFICATION BETWEEN YEARS

Futures Contracts

1.	Book/adjusted carrying value, December 31 of prior year (Line 6, prior year)	_____	_____
2.	Cumulative cash charge (Section 1, Broker Name/Net Cash Deposits Forwards Cumulative Cash Charge Column)	_____	_____
3.1	Add:		
	Change in variation margin on open contracts – Fully effective hedges:		
3.11	Section 1, Column 15, current year minus	_____	_____
3.12	Section 1, Column 15, prior year	_____	_____
	Change in the variation margin on open contracts – All hedges:		
3.13	Section 1, Column 18, current year minus	_____	_____
3.14	Section 1, Column 18, prior year	_____	_____
3.2	Add:		
	Change in adjustment to basis of hedged item:		
3.21	Section 1, Column 17, current year minus	_____	_____
3.22	Section 1, Column 17, prior year	_____	_____
	Change in amount recognized:		
3.23	Section 1, Column 19, current year to date minus	_____	_____
3.24	Section 1, Column 19, prior year plus	_____	_____
3.25	SSAP No. 108 adjustments	_____	_____
3.3	Subtotal (Line 3.1 minus Line 3.2)	_____	_____
4.1	Cumulative variation margin on terminated contracts during the year (Section 2, Column 15)	_____	_____
4.2	Less:		
4.21	Amount used to adjust basis of hedged item (Section 2, Column 17)	_____	_____
4.22	Amount recognized (Section 2, Column 16)	_____	_____
4.23	SSAP No. 108 adjustments	_____	_____
4.3	Subtotal (Line 4.1 minus Line 4.2)	_____	_____
5.	Dispositions gains (losses) on contracts terminated in prior year:		
5.1	Total gain (loss) recognized for terminations in prior year	_____	_____
5.2	Total gain (loss) adjusted into the hedge (amount) for terminations in prior year	_____	_____
6.	Book/adjusted carrying value at end of current period (Lines 1+2+3.1-4.3+5.1+5.2)	_____	_____
7.	Deduct total nonadmitted amounts	_____	_____
8.	Statement value at end of current period (Line 6 minus Line 7)	_____	_____

SCHEDULE DB – PART C – SECTION 2
 Replication (Synthetic Asset) Transactions Open

	First Quarter		Second Quarter		Third Quarter		Fourth Quarter		Year-to-Date	
	1 Number of Positions	2 Total Replication (Synthetic Asset) Transactions Statement Value	3 Number of Positions	4 Total Replication (Synthetic Asset) Transactions Statement Value	5 Number of Positions	6 Total Replication (Synthetic Asset) Transactions Statement Value	7 Number of Positions	8 Total Replication (Synthetic Asset) Transactions Statement Value	9 Number of Positions	10 Total Replication (Synthetic Asset) Transactions Statement Value
1. Beginning Inventory										
2. Add: Opened or Acquired Transactions										
3. Add: Increases in Holdings in Synthetic Asset Transactions Statement Value	N/A		N/A		N/A		N/A		N/A	
4. Less: Closed or Disposed of Transactions										
5. Less: Position Disposed of by Falling Effectiveness Date										
6. Less: Decrease in Replication (Synthetic Asset Transactions Statement Value)	N/A		N/A		N/A		N/A		N/A	
7. Ending Inventory										

Not for Distribution

SCHEDULE DB – VERIFICATION

Verification of Book/Adjusted Carrying Value, Fair Value and Potential Exposure of all Open Derivative Contracts

		Book/Adjusted Carrying Value Check
1.	Part A, Section 1, Column 17	
2.	Part B, Section 1, Column 15 plus Part D, Section 1, Business – Total Ending Cash Balance	_____
3.	Total (Line 1 plus Line 2)	_____
4.	Part D, Section 1, Column 5	_____
5.	Part D, Section 1, Column 6	_____
6.	Total (Line 3 minus Line 4 minus Line 5)	_____
Fair Value Check		
7.	Part A, Section 1, Column 16	
8.	Part B, Section 1, Column 13	_____
9.	Total (Line 7 plus Line 8)	_____
10.	Part D, Section 1, Column 8	_____
11.	Part D, Section 1, Column 9	_____
12.	Total (Line 9 minus Line 10 minus Line 11)	_____
Potential Exposure Check		
13.	Part A, Section 1, Column 21	
14.	Part B, Section 1, Column 20	_____
15.	Part D, Section 1, Column 11	_____
16.	Total (Line 13 plus Line 14 minus Line 15)	_____

Not for Distribution

SCHEDULE E – PART 2 – VERIFICATION BETWEEN YEARS
(Cash Equivalents)

	1	2	3	4
	Total	Bonds	Money Market Mutual Funds	Other (c)
1. Book/adjusted carrying value, December 31 of prior year.....
2. Cost of cash equivalents acquired.....
3. Accrual of discount.....
4. Unrealized valuation increase (decrease).....
5. Total gain (loss) on disposals.....
6. Deduct consideration received on disposals.....
7. Deduct amortization of premium.....
8. Total foreign exchange change in book/adjusted carrying value.....
9. Deduct current year's other-than-temporary impairment recognized.....
10. Book/adjusted carrying value at end of current period (Lines 1-2) (+/-) 3-6-7 (-/+) 8-9.....
11. Direct sold non-derivative amounts.....
12. Settlement value at end of current period (Line 10 minus Line 11)

(c) Indicate the category of such investments, for example, joint ventures, intangible equipment

Not for Distribution

Not for Distribution

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